

Health Surveillance Knowledge: Where Are We Going?

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[...] I do not count those who die by knife or who die by police;
I count those who die of fever and those who die of tuberculosis.
I count those who die of typhus, of helminthiasis:
I count those who die of croup, cancer, and schistosomiasis.
But all these deceased actually die of hunger,
whether we call it fever or any other name.
Four men per minute die of hunger and misery
although they enrich others who do not know much about them.

Ferreira Gullar

The text written by the poet Ferreira Gullar remains current in a time of growing social inequality, attempts to reduce the constitutional right to health, newly-imposed limitations to science and technology, threats to democracy and public safety, among many other problems. The growing number of yellow fever cases in Brazil adds to the ongoing reemerging of diseases and pathologies described by the poet. A sense of apprehension settles in the four corners of this country, as well as in other countries.

Working with collective health knowledge in the adverse context that we live in, dominated more by the functionality of markets and their products, requires that those who produce, divulge and disseminate it have an ethical concern with its strategic purpose.

With this in mind, the beginning of a new year carries with it dreams and planning. Considering scientific publications in health surveillance, we are encouraged to reflect after four years of uninterrupted existence: How do the published articles, for the most part, express the objectives related to health protection? How many accesses has our scientific production in health surveillance received? Which topic is most recurrent? Which regions of the country access the journal the most? What growth needs will the journal have to face?

During this year, we intend to share these questions and answers with our authors, readers, and reviewers. We will also comply with guidelines that we establish for our Editorial Policy: publication in Portuguese, English and Spanish; *online* submission of manuscripts system, with more agility and transparency in the publication process; internationalization by translating a percentage of the publications into English and attracting foreign *ad hoc* authors and referees; relevance and quality of the published data by increasing our bank of renowned national and international reviewers.

For such challenges, we have readers, researchers, and collaborators in the Brazilian National Health Surveillance System. A solidarity network is necessary to consolidate knowledge and bring it to life.

The importance of open access knowledge - in a time of increasingly-commercialized knowledge - needs to be debated and a sum of strategic actions must become effective. Disseminating a scientific article often instigates a transformation. There are articles that make us question our pre-established view, signal a change in usual parameters, demonstrate a more effective way of acting on known risks, and bring light where knowledge is opaque.

In health surveillance, this new knowledge can, and should, influence the regional inequalities of the National Health Surveillance System and its health protection actions, inspiring changes. This is the foundation of scientific dissemination in health surveillance, especially in times mediated by so much anxiety.

Good reading and a healthy new year!

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