

## Editorial

## Child and adolescent health: from research to public policies

Despite advances found in recent decades, the challenges for equity and integrality in the health of children and adolescents still remain. Historical and social challenges that need to be seen, understood and faced.

The understanding of children and adolescents as subjects of law and voice, then of health, citizens who need to be respected and prioritized in public policies, is recent, especially in developing countries, such as Brazil.

The "*miniature adult*" and the "*minor*" were legitimate terms and visions, which still hold remnants. In this sense, the Statute of Children and Adolescents of Brazil (*Estatuto da Criança e do Adolescente* - ECA), promulgated in 1990, denoted advances in ensuring integral protection of children and adolescents, legitimizing and validating it; but the transposition of ECA from paper to practices in this continental country has not been effected evenly after 30 years of promulgation.

In Brazil, the area of health, many initiatives have promoted advances in the care of children and adolescents, such as: *National Immunization Program; School Health Program; National Policy for Reduction of Morbidity and Mortality from Accidents and Violence; National Policy for Integral Child Health Care; National Guidelines for Comprehensive Health Care for Adolescents and Youth in Health Promotion, Protection and Recovery.* These initiatives led to a reduction in child morbidity and mortality and greater access of the adolescent population to health and education services. In turn, the numerous political, economic, social and legal clashes have imposed deconstruction of these advances and, in recent years, have caused setbacks, such as *gender equity* and *sex education*.

This phenomenon is felt in all areas of research with children and adolescents, whether in the area of Health, *stricto sensu*, Human and Social Sciences. These aspects have shown that the reduction of investments in health promotion policies and prevention of violence resulted in school dropouts, child labor, sexual exploitation, increase in the number of violent deaths of adolescents, especially blacks, among others. These elements aggravate the situation of the Unified Health System (Brazil) and that directly impacted social and economic development of the country.

In times of social isolation, due to COVID-19, combined with the austerity of social "*spending*", the scope of public policies has been restricted, re-expanding historical effects of



vulnerability. Effects whose impacts are felt and perceived, especially in children and adolescents, in their plurality.

The individual, social and programmatic vulnerabilities of this population are still evident. For this, concepts and strategies such as intersectoriality, integrality, social determinants of health, health promotion, permanent education, violence prevention, reception, notification, Primary Care, Basic Social Protection, territory... give the emphasis of this Special Volume, which intends to contribute in the search for strategies that promote integral health of children and adolescents.

Good reading!

## Ailton Souza Aragão

Social Scientist. Master's degree in Sociology. PhD and Post-Doctor in Health Sciences. Adjunct Professor of Department of Public Health of Universidade Federal do Triângulo Mineiro, MG, Brazil. Guest Editor.

## **Diene Monique Carlos**

Nurse. Specialist in Pediatric and Neonatological Nursing. Master and PhD in Public Health Nursing. Post PhD in Maternal And Child Nursing and Public Health. Adjunct Professor of Nursing Departament of Universidade Federal de São Carlos, SP, Brazil. Guest Editor.