

Health Family, now more than never!

Since the middle of the last century, Primary Health Care (PHC) has been developed as organizer of health systems of universal character in countries as England, Sweden, The Netherlands, Canada, and New Zealand among others.

The Brazilian PHC is implemented as a state policy and defined in a broad format, involving promotion and protection, damage prevention, diagnosis, treatment as well as health rehabilitation. It is oriented by the principles of universality, accessibility and coordination, bond and continuity, integration, humanization, equity and social participation. The PHC aims an integral and primary care, not a selective action dressed as traditional basic packages to “poor people” historically recommended by Multilateral Agencies.

The structuring character of the municipal health systems oriented from a Family Health Strategy perspective caused an important movement in the reorganization of the care model at SUS: being the first contact of the population with actions and services in health allowing better coordination of the attention to users at the services network.

The Family Health Strategy is a tripartite effort or an integration between federal, state and municipal instances that overcomes political-parties divergences. But its relevant specificity is to be a proposal of multi-professional action, oriented to a specific territory under the responsibility of a team that aims to avoid sickness and death by preventable reasons and act as a reference to other actions at health services that demands secondary attention or above.

Nowadays 90 million of Brazilians access the Health System by means of the Family Health Strategy, 70 million are assisted by the Oral Health Program and the presence of Community Health Agents increases the offer of attention focused at family and communitarian orientation.

In 2008, with the inclusion of the Family Health Support Group (NASF) the work process qualification of professionals was strengthened by the improvement of the multi-professionalism as well as by the participation of the best practices in health in PHC.

Results from various studies that approach the Family Health Strategy consider it to be positive in the evaluation of users, managers and health professionals, in relation to the offer of health action, access and use of services, infant mortality diminution, reduction of the entries by sensible conditions to Primary Attention as well as to the improvement of socio-economic indicators of the population. The WHO annual report of 2008 – “Primary Health Care, now more than ever” strengthens the PHC as a force-idea 30 years after Alma-Ata, and congratulates the Brazilian experience. This is the right track, as PHC is capable of conducting the society in the definition of needs and rights, incorporating concepts of empowerment and social capital.

Failures and problems exist and it is necessary to recognize them, aiming at improving the mechanisms that ensure the social importance of the Family Health Strategy. The texts in this thematic issue, published with the sponsorship of the Ministry of Health of Brazil, presents researches and debates about gains, difficulties and proposals that collaborate with the strengthening of this strategy and the qualification, reinforcing the best and most important Brazilian social inclusion policy that is the Unified Health System.

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