

Research Article,

Implementation of Integrative and Complementary Practices in the Unified Health System: Municipal Experience Report

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Summary

Introduction: Historically, the Unified Health System began with the 8th National Health Conference and, throughout the Brazilian territory, opened up new perspectives and perspectives focused on health and dreamed of by the population. The Integrative and Complementary Practices in Health, are inserted within this context, from 2006 and, complement the holistic view on the actions developed in the public services.

Objectives: to describe and analyze the advances and challenges in the implementation of Integrative and Complementary Practices in the public service of a municipality in the south of the country.

Methodology: contemporary documentary study, carried out through the analysis of public documents, describing the actions developed from 2002 to 2022.

Results: Even before the ordinance under n° 971 of 2006 defined the guidelines of the National Policy of Integrative Practices and Complementary in Brazilian territory, other ordinances were being discussed and implemented in different municipalities, such as the implementation process of the Unified Health System, initiating the development of new ancient forms of care.

Considerations: Health is understood as a set of different factors, such as physical, mental and social well-being. Understanding and providing opportunities for people's promotion, prevention and restoration services through simple and effective practices, in addition to promoting the reception and rescue of many cultures that existed and still exist in our country, contributes to the optimization of public resources and goes against with that recommended by the Unified Health System.

Descriptors: integrative and complementary practices; public service; alternative therapies; public health.

Introduction:

With the advent of the Unified Health System - SUS from the 8th National Health Conference, the entire Brazilian territory began a journey towards new perspectives and perspectives focused on health. Integrative and Complementary Health Practices, inserted within this context, from Ordinance 971/2006, began to gain prominence and visibility within Brazilian municipalities, being recognized both by the World Health Organization (WHO) and by the Federal Councils of some professions in the health area and complement the holistic look at the actions developed in public services (BRASIL, 2018).

A municipality in the south of the country had the opportunity to initiate these actions through programs of Phytotherapy and Medicinal Plants and Integrative Community Therapy. Two differentiated programs that were started in Londrina-Paraná in the same year, in 2002. Based on surveys carried out by the public servants involved in both programs, and, as these are inserted within the Municipal Health Secretariat, actions were incorporated in order to strengthen and justify their implementation and the use of these new forms of care (LONDRINA, 2002-2014).

Through public reports, it is possible to describe and analyze the experience of this municipality from the year 2002, pointing out the advances and challenges with the two programs, the Integrative Community Therapy being initially inserted within the Municipal Secretariat of Social Assistance - SMAS (2002 to 2004) and later assigned to the Municipal Health Secretariat – SMS (2005) in the Coordination of Community Therapy and Behavioral Practices within the Primary Health Care Board. The Phytotherapy and Medicinal Plants program, located within the Municipal Health Department, in the Planning Board, trained municipal public servants for 14 consecutive years and offered herbal medicines in the Basic Health Units – UBS.

The historic journey of this municipality, in 2018, gave rise to the project entitled “The use of Integrative and Complementary Practices in the municipality of Londrina”, which would be the partnership between teaching, community and service, consolidating the tripod for a successful extension project and thus, it was possible to collect data and prove the results empirically already experienced by so many people. The ethical precepts established in Resolution n° 466/12 of the National Health Council were complied with and all stages of the research were followed for approval by the Research Ethics Committee by opinion n°: 2.682.912.

Goals

To describe and analyze the advances and challenges in the implementation of Integrative and Complementary Practices in the Unified Health System, reporting the experience of a municipality in the south of the country.

Methodology:

Contemporary documentary study, carried out through the analysis of public documents, describing the actions developed from 2002 to 2022 by the municipal health department of the municipality of Londrina-Paraná. Carrying out a survey of all documentation that proves the history experienced by the municipality within the implementation of integrative and complementary practices: annual reports from the coordination of Community Therapy, annual management reports, attendance lists of servers enrolled in training and training and analyzing the challenges and

advances found, it is possible to describe and report the experience of this implantation.

Results:

The results in table 1 present the historical evolution considering the advances and challenges, to be discussed later, in the implementation of integrative and complementary practices in the Unified Health System, within the municipality, even before the ordinance under n° 971 of 2006 defined the guidelines of the National Policy on Integrative and Complementary Practices in Brazilian territory, other ordinances were being discussed and implemented in different municipalities, initiating the development of new ancient forms of care and walking along with the history of the Unified Health System.

The results found in the city of Londrina-Paraná, prove that the Ministry of Health has correctly defined the implementation strategies, not requiring a single model, but being free for each administration to define and find the best model. It is fundamental to observe and analyze the data found for discussion through the theoretical framework found.

Table 1 – Integrative and Complementary Practices - PICS. Londrina – PR, 2022.

PICS	Period	In use	In progress
Phytotherapy and Medicinal Plants	2002 - 2014	-	Resumption process
Integrative Community Therapy	2002 - 2022	At UBS	-
Auriculotherapy	2017 - 2022	At UBS POLICLINICA IN THE UEL	-
Meditation	2014 - 2022	At UBS	-
Shantala	2019	-	Childcare share to resume

Source: Survey data (2002-2022)

Discussion:

Through documentary research, the data collected could bring the experience lived with the records of integrative and complementary practices inserted in the municipality of Londrina-Paraná, being Integrative Community Therapy - TCI, together with Phytotherapy, the pioneers within the municipality. Thus, shortly after the first ICT training, including employees of the municipal

secretariats of Social Assistance, Health and Women, from October 2002 to July 2003, carried out by the Federal University of Ceará, taught by the creator of this integrative and complementary practice, visiting the city of Londrina-Pr., prof. Dr. Adalberto Barreto de Paula; other training was carried out within the municipality and by local civil servants trained in the first group of 2002 (61 civil servants), always with the support and matrix support of the creator of the technique. In all, training was carried out in 2005 (61 civil servants), in partnership with the National Antidrug Secretariat – SENAD; 2008 (75 professionals) training in agreement with the Ministry of Health in Palotina; 2009 (40 civil servants) agreement with the Ministry of Health in Apucarana; 2010 (70 servers) and in 2011 (73 servers) and, in 2005, the Brazilian Association of Integrative Community Therapy - ABRATECOM, constituting and strengthening the network of people involved in this practice (BOARETTO, et al, 2019) .

The public administration then promoted a model of social intervention by innovating through the use of this practice and, in parallel with this program, the municipality had a phytotherapy and medicinal plant program located within the Municipal Health Department, in the Planning Board, which has been developing training and workshops for municipal public servants for 14 consecutive years, offering herbal medicines in different Basic Health Units. The experiences were presented in different events, having received an honorable mention in the year 2011, in an event held in the municipality of Medianeira (LONDRINA, 2002-2014).

Brazil continued to discuss the implementation of integrative and complementary practices and, perhaps the successful experiences of different municipalities have contributed to the National Department of Primary Care, defining the text of ordinance 971 and launching the National Policy of Integrative and Complementary Practices in Health in the year 2006.

While the two programs were being developed, during the years 2013 to 2015, different meetings were held with some previously invited professionals, to offer the first training in Auriculotherapy. It was an attempt to implement a third integrative and complementary practice to compose the two existing programs. However, in

2016, due to management changes, the Phytotherapy and Medicinal Plants program was suspended, leaving only the Integrative Community Therapy program, but having its last training in 2011, while Auriculotherapy continued to be studied. and analyzed by servers and management.

The National Policy advanced and the municipality continued with the coordination of Integrative Community Therapy, holding meetings called intervision and in 2014, the experience of the Caregiver Care Workshops at INOVASUS was awarded in 5th place in the country. In view of this scenario, and with the guidance of the Ministry of Health - MS, for Brazilian municipalities to include new practices in user care, in a way that best contemplates the municipal policy of each location, it was implemented, within the municipality of Londrina (PR) , the use of auriculotherapy within Primary Health Care (PHC) services, starting in 2017, after the training of municipal servants by the Federal University of Santa Catarina – USFC in partnership with the Ministry of Health – MS (SOUSA , 2012).

In all, the municipality has different civil servants trained in integrative therapies, as shown below:

Table 2 – Integrative and Complementary Practices - PICS. Londrina – PR, 2022.

Integrative and Complementary Practice	SERVERS
AURICULOTHERAPY	44
INTEGRATIVE COMMUNITY THERAPY	14
PHYTOTHERAPY	06
HOMEOPATHY	06
ACUPUNCTURE	05
FLORAL THERAPY	04
REIKI	08
SHANTALA	03
CIRCLE DANCE	01
MASSAGE THERAPY	01

Source: Survey data (2002-2022)

Considerations:

The World Health Organization (WHO) in its 2017 annual report, World Health Organization, states that Brazil is one of the most anxious countries in the world. The Brazilian Federal Constitution, in its article 196 says that “health is a right of all and a duty of the State guaranteed

through social and economic policies that aim at the reduction and universal and equal access to actions and services for its promotion, protection and recovery” (WHO, 2017).

Health, then, is understood as a set of different factors, such as physical, mental and social well-being. Understanding and providing opportunities for people's promotion, prevention and restoration services through simple and effective practices, in addition to promoting the reception and rescue of many cultures that existed and still exist in our country, contributes to the optimization of public resources.

To report the experience in the implementation of integrative and complementary practices in health within municipal management, it aims to provide subsidies to other municipalities in this same impasse and doubt as to how they can use the practices in their services, at the same time that it reveals the challenges and advances faced during 20 years of history with integrative and complementary practices within Primary Health Care in a municipality in the south of the country. It is fundamental to assess that both the challenges and the advances are linked to the guidelines of the Unified Health System, as they advocate in their doctrinal principles that there must be Universality, Integrality and Equity in all health services, so that the user can choose the service that best incorporates their reality of life, while the manager can use the PIC's that he has in his services, to enhance the assistance and optimize public resources.

This research brings the experience of coping with the implementation of a municipality, which has more than 600 thousand inhabitants and has 54 Basic Health Units, in relation to the use of Integrative and Complementary Health Practices. We reinforce the importance of more research and studies related to other Brazilian realities, since, in view of more than 16 years since the publication of the National Policy on Integrative and Complementary Practices, it is known that training takes place in the vast majority, by the private sector, as pointed out by the research carried out in 2020 by HABIMORAD et al.

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