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CONTRIBUTIONS OF S.U.S. (UNIFIED HEALTH SYSTEM) IN THE QUALITY OF BRAZILIAN MENTAL HEALTH

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Abstract: Mental health is a topic that has received a lot of attention around the world in recent years. The Brazilian reality presents numerous challenges regarding innovative solutions to meet fundamental human psychological needs. This study aimed to identify how the S.U.S. (UNIFIED HEALTH SYSTEM) has contributed to meeting these human needs today. This is a bibliographical study that presents some Brazilian initiatives for sustainability on the planet, considering strategies that address aspects of the public mental health of its citizens. A content analysis of articles addressing the topic was carried out. The search was carried out in the Virtual Health Library (VHL) database. The search with the combination of keywords resulted in 33 articles, but only 8 met the research objective. From the readings, it was possible to establish the following categories: mental health in Brazil; Unified Health System (SUS) and the network of psychosocial care, assistance and promotion of Brazilian mental health. Studies indicate, as a result, that the Psychosocial Support Network offered by public health in Brazil, located close to communities, creates opportunities for access and improvement in the quality of mental health for Brazilians who need care. The S.U.S. (UNIFIED HEALTH SYSTEM) has been offering relevant services in the subject's psychosocial care, but needs to advance in its scope and integration of services.

Keywords: Unified Health System (SUS); promoting mental health; mental health assistance; psychosocial care and mental health.

INTRODUCTION

Man's survival on earth depends on the balanced use of natural resources. Such balance requires balanced and healthy minds. The perception of the need to pay attention to the psychological needs of human beings is notable. More appropriate strategies are discussed so that the subject is the center of care and contributes to improving their individual quality of life and that of the planet.

The Brazilian reality presents numerous challenges regarding innovative solutions to meet fundamental human psychological needs. The Unified Health System (SUS) plays an important role in Primary Health Care (PHC) for people with mental disorders, psychological distress, problems caused by the use of narcotics and risk of suicide. Strategies and guidelines present in Brazil's Public Mental Health Policy guide mental health assistance and care actions. The Psychosocial Care Network (RAPS) is organized into Psychosocial Care Centers (CAPS) that serve adults and also offers care to children and young people and those with disorders caused by the use of alcohol and other drugs. The assistance network also includes Therapeutic Residential Services (SRT), among others.

Psychological suffering is observed in a broad scope, considering that "...every health problem is also – and always – mental, and that all mental health is also – and always – producing health. In this sense, the articulation of mental health with primary care will always be important and necessary" (Ministry of Health, 2007, p. 3). Federal Laws Number: 10,216/2001, 10,708/2003, Ordinance Number: 3,088/2011 guarantee rights, expand and promote citizens' access to the public mental health system.

But after all, how is it possible to contribute more significantly to the transformation of psychologically healthier subjects for the sustainability of life on the planet?

METHODOLOGY

This study aimed to identify how the S.U.S. (UNIFIED HEALTH SYSTEM) has contributed to meeting these human needs today. This is a bibliographical study that presents some Brazilian initiatives for sustainability on the planet, considering strategies that address aspects of the public mental health of its citizens. A content analysis of articles addressing the topic was carried out. The search was carried out in the Virtual Health Library (VHL) database.

The terms used as descriptors were: Unified Health System (SUS); promoting mental health; mental health assistance; psychosocial care and mental health. The combinations for the survey occurred through the initial combination of two terms, which always included S.U.S. (UNIFIED HEALTH SYSTEM) and mental health. The inclusion criteria used were: articles written in Portuguese, qualitative research and publications from 2022 to 2023. Publications in the format of theses, dissertations and monographs were excluded from the selection.

The search with the combination of keywords resulted in 33 articles, but only 8 met the research objective. From the readings, it was possible to establish the following categories: mental health in Brazil; Unified Health System (SUS) and the network of psychosocial care, assistance and promotion of Brazilian mental health.

MENTAL HEALTH IN BRAZIL

Law number: 10,216, dated April 6, 2001, known as the Psychiatric Reform Law in Brazil, is an important milestone in improving the quality of Brazilian mental health. It is based on the humanized treatment of people with mental illnesses and provides guidelines for the patient's reintegration into family and community social life, among others.

Services offered to the population through

Psychosocial Care Centers (CAPS), which began in 1980 and were regulated in 1992 through Ordinance MS 224/921, began to receive resources in the year following the publication of the psychiatric reform law. Their role is considered strategic in the process of Psychiatric Reform in Brazil, as they bring about the humanization of services provided to people with mental problems. Document from the Ministry of Health describes the emergence of CAPS (Brazil. Ministry of Health, 2005).

Psychosocial Care Centers began to emerge in Brazilian cities in the 1980s and began to receive a specific line of funding from the Ministry of Health from 2002 onwards, a time when these services experienced great expansion. These are municipal, open, community health services that offer daily care to people with severe and persistent mental disorders, providing clinical monitoring and social reintegration of these people through access to work, leisure, exercise of civil rights and strengthening family ties and communities. (Brazil. Ministry of Health, 2005, P. 27).

Social inclusion and intervention in crisis situations are part of the role of CAPS in mental health care. These centers arise from Brazil's commitment to the guidelines of the "Declaration of Caracas", which directs to the "reorganization of care in psychiatry" (Martins et.al, 2022).

On July 31, 2003, law 10,708 instituted psychosocial rehabilitation aid for patients with mental disorders discharged from hospitalization. The aid was called "Back home" and aims to encourage treatment in the community, instead of hospitals, and resocialization within this context.

Ordinance Number: 3,088, of December 23, 2011, "establishes the Psychosocial Care Network for people with suffering or mental disorders and with needs resulting from the use of crack, alcohol and other drugs, within

the scope of the Unified Health System" (Brazil. Ministry of Health, 2011).

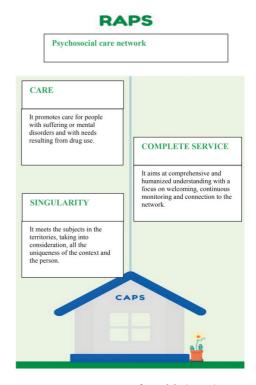
The laws numbered: 10.216/2001, 10.708/2003 and the Decree numbered: 3.088/2011 are fundamental guarantees of citizens' rights and access to Brazilian public mental health services.

UNIFIED HEALTH SYSTEM (SUS) AND THE PSYCHOSOCIAL CARE NETWORK

The Unified Health System (SUS) was officially regulated in 1990 with the following basic guidelines: universality, comprehensiveness, equity, social control and administrative decentralization. Brazil is among the few countries with free public health services.

According to the Ministry of Health (2022), the Psychosocial Care Network (RAPS) includes diversified services with multidisciplinary therapeutic care close to the family network. The care network includes: Psychosocial Care Centers (CAPS) in six different modalities to assist specific audiences; Urgency and emergency: SAMU 192, stabilization room, 24-hour UPA and emergency room for reception and triage in critical moments of crisis; Therapeutic Residential Services (SRT) for people who do not have family and social support; Reception Units (UA) for temporary care for drug addicts in vulnerable situations for protective therapeutic care in the adult and child and youth categories; Multidisciplinary Mental Health Outpatient Clinics with a multidisciplinary team - psychiatrist, psychologist, social worker, occupational therapist;

Therapeutic Communities with continuous home care for patients with stable clinical needs due to the use of crack, alcohol and other drugs; Specialized wards in a General Hospital with short hospitalization services for people at high risk to their lives and serious harm to their health; Day Hospital with assistance of up to 12 hours between hospitalization and outpatient care, to carry out clinical, surgical, diagnostic and therapeutic procedures. Below is a summary of the SUS RAPS.



Source: Ministry of Health (2023)

ASSISTANCE AND PROMOTION OF BRAZILIAN MENTAL HEALTH

When examining the contributions of the Unified Health System (SUS) to the quality of mental health in Brazil, it is clear that the S.U.S. (UNIFIED HEALTH SYSTEM) plays a crucial role in promoting a comprehensive approach that transcends the simple management of mental disorders. The interconnection between individual psychological balance and environmental sustainability emerges as a focal point in the strategies implemented by the SUS. The advances achieved are notable, with the creation of the Psychosocial Care Network (RAPS) and the Psychosocial Care Centers (CAPS), which represent a paradigmatic change in the approach to

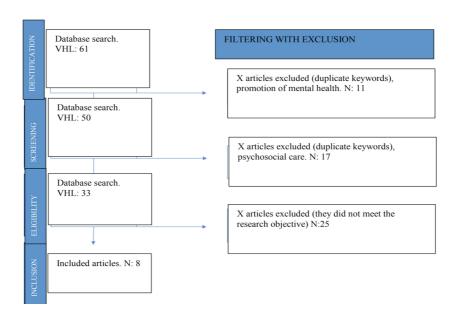
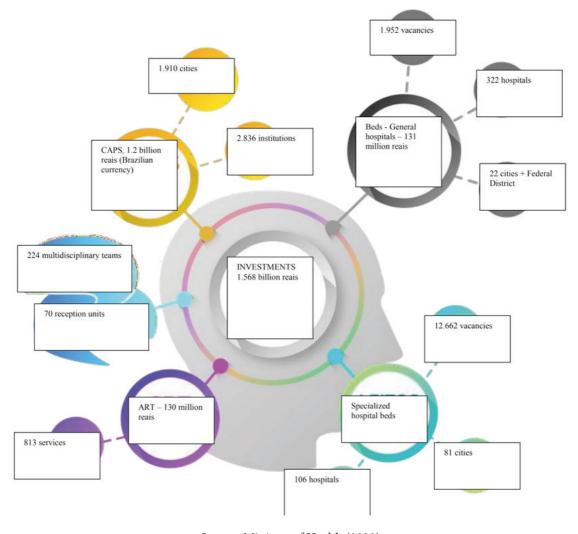


Figure 1: article selection and survey flowchart.



Source: Ministry of Health (2023)

mental health. These initiatives are not limited to simply mitigating disorders, but actively seek the formation of psychologically healthy individuals. Legislation, such as Law Number: 10,216/2001, strengthens this commitment, ensuring social reintegration and promoting a more supportive community. The emphasis on treatment practices in the community, including psychosocial rehabilitation assistance, highlights not only the concern with the resocialization of patients, but also environmental awareness. This approach not $only \, contributes \, to \, reducing \, the \, environmental \,$ impact associated with hospital admissions, but also reflects a holistic view of health, by considering the patient's family and social context.

FINAL CONSIDERATIONS

Studies indicate, as a result, that the Psychosocial Support Network offered by public health in Brazil, located close to communities, creates opportunities for access and improvement in the quality of mental health for Brazilians who need care. The S.U.S. (UNIFIED HEALTH SYSTEM) has been offering relevant services in the subject's

psychosocial care, but needs to advance in its scope and integration of services.

However, despite notable advances, it is crucial to recognize the challenges that still need to be faced. Although there is a noticeable presence of ecological awareness, it is imperative to strengthen this aspect through more comprehensive educational approaches. Expanding access and coverage, with an emphasis on equity, together with interdisciplinary and intersectoral integration, emerges as crucial elements to consolidate a comprehensive approach.

Therefore, the S.U.S. (UNIFIED HEALTH SYSTEM) stands out as a significant agent of transformation by building a connection between mental health and sustainability. However, it is essential to recognize that the journey is ongoing, and continued attention to challenges and areas for improvement is necessary to solidify a mental health system that goes beyond treating illness to promote global health and environmental awareness. In this evolutionary context, the S.U.S. (UNIFIED HEALTH SYSTEM) has the potential to lead the way towards a healthier Brazilian society.

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