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THE IMPORTANCE OF PRIMARY HEALTH CARE (PHC) IN THE PROMOTION OF COLLECTIVE HEALTH

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ABSTRACT
The research aimed to analyze the importance of Primary Health Care (PHC) in the promotion of collective health in Brazil, highlighting its contributions, challenges and potentialities within the context of the Unified Health System (SUS). The methodology used was a bibliographic research, which involved the review of articles, books and official documents on PHC and public health. The results showed that PHC, by prioritizing prevention, health promotion, and universal and equitable access to care, plays a crucial role in improving the health conditions of the population, especially the most vulnerable. In addition, PHC contributes to the reduction of social inequalities and to the integration of care between the different levels of the SUS. However, the survey also revealed significant challenges, such as lack of resources, regional inequality in access to services, and a shortage of professionals in some areas, which still limit the effectiveness of PHC in some regions of the country. The conclusion indicated that, although there are obstacles to be overcome, PHC has enormous potential to transform the health model, promoting a fairer and more efficient system, especially when there are adequate investments, continuous training of professionals, and strengthening of public health policies. The survey reinforces the importance of continuing to improve PHC to achieve a more inclusive and equitable health system.

Keywords: Primary Health Care (PHC). Collective Health. SUS.

INTRODUCTION

Primary Health Care (PHC) has been recognized worldwide as one of the fundamental pillars for building efficient and equitable health systems. It represents the first level of contact of the individual with the health system, offering a comprehensive, continuous and accessible approach. PHC is a model of care that is not limited to the treatment of diseases, but also encompasses preventive, health promotion, and rehabilitation actions. Its practice involves a holistic view of the patient, taking into account the social determinants of health and the needs of each community, which makes it an essential tool for the promotion of collective health (Araújo et al., 2023).

In Brazil, PHC has gained even greater importance, especially with the implementation of the Unified Health System (SUS), which seeks to ensure universal, comprehensive, and equitable access to health for the entire population. The SUS is based on the principles of universality, equity, and comprehensiveness, and PHC is the model that best represents these principles in the context of health care. The Family Health Strategy (FHS), for example, has been one of the main strategies adopted to promote PHC, with multiprofessional teams that work directly in the communities, offering health care close to people and their needs. The promotion of collective health, therefore, is inserted in the context of PHC as one of its main missions (Brito et al., 2022).

The concept of collective health goes beyond individual care, considering the living conditions, the social environment, culture, and public policies that influence the well-being of the population. In this way, PHC is a strategy that directly contributes to the reduction of health inequalities, since it focuses on prevention, health education, and the treatment of diseases in an equitable way, prioritizing the most vulnerable populations and those exposed to socioeconomic risks (Maziero et al., 2020).

The practice of PHC is characterized by a problem-solving action in many cases, providing continuous care, which facilitates the monitoring of health conditions and the early detection of problems. It also promotes care coordination, when necessary, referring patients to more specialized levels of the health system, but always with the follow-up of the primary health professional. This model of care aims to avoid overloading urgent and emergency services, promoting the appropriate use of health resources and optimizing care (Santos et al., 2023).

In addition, PHC is a fundamental strategy for integration between different areas of health and sectors of society, such as education, sanitation, work, and food security. By adopting an interdisciplinary and intersectoral approach, PHC allows public policies to be more effective, addressing population health issues in a broad and integrated manner. This

interconnected character is one of the keys to the success of PHC in promoting collective health that is sustainable and positively impacts people's quality of life (Barros et al., 2021).

However, despite its importance, Primary Health Care still faces significant challenges, such as the lack of adequate investments, the scarcity of qualified professionals in certain regions, and the difficulty of articulating between the different levels of health care. The expansion of PHC coverage, as well as the improvement in the quality of care, are central issues to ensure that this model of care is effective in promoting collective health. In addition, it is necessary to overcome cultural and structural barriers so that PHC fully meets the needs of the most vulnerable populations (Gatti-Reis; Paiva, 2023).

In this context, the objective of this research was to analyze the importance of Primary Health Care (PHC) in the promotion of collective health, exploring how this strategy can be optimized to achieve better results in terms of disease prevention, reduction of health inequalities and improvement of the quality of life of populations. The research seeks to identify the challenges and potentialities of PHC, as well as the best practices and experiences that can serve as a model for more effective public policies in Brazil and in other contexts.

As for the methodology, a bibliographic research was carried out, based on academic studies, scientific articles and reports from international organizations, in order to understand in depth the practices and impacts of PHC on public health. The research also included the analysis of government documents and public policies focused on health, allowing an insight into the performance of PHC in the Brazilian context and its contribution to the health system.

The relevance of this research lies in its contribution to the understanding of how Primary Health Care can be improved and expanded to promote more equitable and accessible health for all. The research offers subsidies for the formulation of more effective public policies and health practices, in addition to strengthening the debate on the role of PHC in improving the health conditions of the population, especially the most vulnerable. This knowledge can help health managers, professionals in the area, and public policy makers to make more informed decisions that are appropriate to the Brazilian reality, with a positive impact on public health.

DEVELOPMENT

COLLECTIVE HEALTH

Collective health is an interdisciplinary field of studies and practices that is dedicated to understanding and promoting the health conditions of populations from a broad

perspective, which goes beyond individual care and focuses on the social, economic, cultural, and environmental issues that influence the well-being of groups and communities. Unlike traditional medicine, which focuses on curing a patient's illnesses, collective health adopts a public health approach that aims at prevention, promoting healthy habits, and reducing inequalities in access to health services (Santos et al., 2023).

The concept of collective health emerged in the 1970s, inspired by social movements and the recognition that health cannot be dissociated from social and structural determinants. Over time, this concept has been consolidated as an academic discipline, incorporating knowledge from various areas, such as medicine, epidemiology, sociology, economics, psychology, and public policy. The central objective of collective health is the construction of a fairer and more equitable health system, where the health of populations is seen as the result of a combination of individual, collective, and contextual factors (Araújo et al., 2023).

One of the central premises of collective health is the social determinant of health, which postulates that health is not only the reflection of individual behavior and choices, but is strongly influenced by social, economic, and political conditions. Factors such as income, education, housing conditions, access to health services, basic sanitation, working conditions, food security, and social support networks play decisive roles in the health of populations. In this way, collective health seeks not only to treat diseases, but also to transform the conditions that favor the emergence of health problems (Maziero et al., 2020).

In addition, collective health is also concerned with equity in access to health, that is, with the elimination of disparities that exist between different population groups, especially those in situations of social vulnerability, such as the low-income population, residents of urban peripheries, indigenous peoples, and blacks. The goal is to ensure that everyone has access to the same health rights and services, regardless of their social, economic, or geographic status. To this end, public health advocates a public health policy that considers these inequalities and seeks strategies to address them (Santos et al., 2023).

In the context of public health, social participation is another essential concept. Health management cannot be done only by professionals in the area, but must actively involve the population. The idea is that people, as citizens and users of the health system, can give their opinion, suggest and participate in the formulation of policies that affect their communities. This includes the promotion of a decentralized health system, in which decisions are made closer to the local reality, taking into account the needs and specificities of each population group (Barros et al., 2021).

Another relevant aspect of collective health is health promotion. Rather than simply treating diseases, collective health aims to create conditions for populations to achieve a better state of health. This involves actions such as prevention campaigns, health education, encouraging healthy lifestyles, and strengthening public policies that improve living conditions. Health promotion also implies dealing with structural issues, such as ensuring drinking water, basic sanitation, adequate housing, and access to healthy food (Gatti-Reis; Paiva, 2023).

Intersectoriality is another key concept in public health, which refers to collaboration between different sectors of society to promote health. This means that health cannot be treated only within the limits of the health system, but must involve joint action between several areas, such as education, social assistance, security, transportation, urbanism and the environment. For example, accessible and quality public transport policies can have a significant impact on health by facilitating people's access to health services and promoting physical activity. Collective health also focuses on coping with epidemics and health emergencies, which includes constantly monitoring the health of populations, planning rapid responses to disease outbreaks, and implementing control and prevention strategies (Santos et al., 2023).

In this sense, collective health is linked to health surveillance, with the collection of data and the analysis of health indicators that help to identify trends and risks to public health. The practice of collective health, therefore, seeks to build a broader health system, which considers health as a universal right and a collective good (Barros et al., 2021).

Collective health sees health in an integral way, considering that people's well-being is not only in the absence of diseases, but also in the quality of living conditions, social relationships and respect for human rights. Therefore, collective health presents itself as an indispensable approach for building fairer, healthier, and more resilient societies. It is, therefore, not only an area of study, but a practice of social transformation, which aims to create conditions for everyone to live fully and healthily, regardless of their social or economic conditions (Maziero et al., 2020).

PRIMARY HEALTH CARE (PHC): HISTORICAL OVERVIEW AND FUNCTIONING IN BRAZIL

Primary Health Care (PHC) is one of the central components of health systems in several countries, and is especially relevant in the context of the Unified Health System (SUS) in Brazil. It aims to offer basic and continuous care to the population, being an approach that aims at disease prevention, health promotion and continuous monitoring of

the health conditions of individuals and communities. PHC seeks to ensure universal, comprehensive, and equitable access to health services, focusing on the approach closest to the reality and local needs (Araújo et al., 2023).

The concept of Primary Health Care gained prominence after the Declaration of Alma-Ata, in 1978, during the International Conference on Primary Health Care organized by the World Health Organization (WHO). This conference, held in Kazakhstan, established PHC as a strategy for health promotion, with the aim of achieving "Health for All". From this declaration, PHC came to be considered an effective and necessary model to ensure universal health coverage, especially in developing countries, which faced great inequalities in access to medical care (Figueredo; Matos, 2022; Gama et al., 2021).

The model advocated by the Declaration of Alma-Ata emphasized that primary care should be accessible, socially acceptable, comprehensive, and centered on the basic needs of the population. From this milestone, PHC came to be seen as a strategic solution to address global public health challenges, such as the high burden of infectious diseases, lack of access to adequate medical services, and inequality in access to health care (Santos et al., 2023).

In Brazil, the idea of health care closer to the population was already present in the first decades of the twentieth century, with public health initiatives aimed at health surveillance and epidemic control, but it was only with the 1988 Constitution and the creation of the Unified Health System (SUS) that Primary Health Care began to gain strength as a central model for the organization of the health system Brazilian. The Federal Constitution of 1988 guaranteed the right to health as a universal right, and the SUS, created in 1990, consolidated PHC as one of the fundamental pillars for the organization of the health system, with the objective of offering basic and accessible care to the entire population (Maziero et al., 2020).

In Brazil, Primary Health Care is structured to act as the entry point for most users into the SUS, representing the first level of care and the main form of care organization. PHC focuses on prevention, health promotion, and care for the most common diseases, seeking to solve most health issues in a problem-solving and low-cost way, preventing patients from having to resort to more complex services (Guedes; Silva, 2023; File; Domingues Junior; Gomes, 2023; File; Domingues Junior; Silva, 2024; File; Silva; Domingues Júnior, 2024).

The Family Health Strategy (FHS), created in the 1990s, is one of the main programs within PHC and has been fundamental in the organization of primary care in the country. The FHS organizes health teams into family health units, composed of doctors, nurses,

nursing technicians and community health agents, who work in an integrated manner, acting not only in clinical care, but also in the promotion of health education actions and in the identification of health problems in the community. Community health agents, for example, play a crucial role in bonding with the community, conducting home visits and identifying health risks in the family environment (Santos et al., 2023).

The Basic Health Units (UBS) are the main facilities that offer PHC services in Brazil. They are responsible for carrying out medical consultations, nursing care, vaccination, control of chronic diseases, maternal and child care, among other services. The UBS are also responsible for organizing disease promotion and prevention actions, such as vaccination campaigns, control of epidemics and endemic diseases, and health education actions in the communities (Maziero et al., 2020).

PHC in Brazil is, therefore, universal and comprehensive, seeking to serve all people continuously and based on the health needs of the population. The idea is that, by providing continuous and accessible care, PHC helps solve the population's health issues before they become serious problems, avoiding the overload of emergency services and hospitals. PHC also plays an important role in the coordination of care, that is, it acts as the centralizer of the patient's health process, referring them to other levels of care when necessary, such as medium and high complexity services (Maziero et al., 2020).

However, despite the advances, the functioning of PHC in Brazil still faces significant challenges. The lack of financial resources, the lack of professionals in some regions, inequity in access to services, and logistical difficulties are obstacles that compromise the full implementation and universal access to this type of care. Regional disparities, for example, are still a serious problem, with some regions, especially the most remote and underserved, facing difficulty in ensuring adequate basic health services to the population (Barros et al., 2021).

The implementation of PHC in Brazil has advanced significantly since its creation, with the expansion of family health teams and the coverage of new areas. The family health model, with a focus on proximity and the bond between health professionals and communities, has proven to be an effective model for reducing health problems and improving access to health, especially among the most vulnerable populations (Santos et al., 2023).

However, there are still challenges to be faced, such as the need for greater training of health professionals, the expansion of the infrastructure of the UBS, and the improvement of the quality of care offered. The integration of PHC with other levels of care

also needs to be more effective to ensure continuity of care, especially for patients with chronic diseases or complex needs that require specialized care.

THE IMPORTANCE OF PRIMARY HEALTH CARE (PHC) IN THE PROMOTION OF COLLECTIVE HEALTH

Primary Health Care (PHC) plays a central role in the promotion of collective health, being essential for the construction of a fairer, more equitable, and more effective health system. By focusing on prevention and health promotion actions, PHC aims to improve the living conditions of populations, meeting their health needs in a continuous and comprehensive way. This model of care goes beyond individual care, seeking to work on the health of the collectivity, taking into account the social determinants that influence people's well-being (Maganhoto; Brandão; Aragão, 2022).

In this way, PHC is directly aligned with the objectives of collective health, because, by acting in the health of the population as a whole, it promotes equity in access to health services and seeks to reduce social inequalities, one of the great challenges faced by health systems. Collective health understands that health is not limited to the absence of disease, but is a reflection of a series of social, economic, cultural and environmental factors. In this context, PHC stands out for its approach that aims to transform the living conditions of the population (Maziero et al., 2020).

By providing medical care close to the reality of the community, PHC is able to act more effectively in health promotion and disease prevention. The actions carried out in the Basic Health Units (UBS) and by the Family Health Strategy (ESF) teams range from the monitoring of chronic diseases, such as hypertension and diabetes, to vaccination programs and educational campaigns on healthy habits, such as a balanced diet and the practice of physical activities. These actions not only improve individual health but also contribute to collective well-being, reducing the burden of diseases that impact the entire community (Santos et al., 2023).

PHC is also essential to ensure equitable access to health, especially for populations in vulnerable situations. In Brazil, where social inequality is still a major challenge, Primary Health Care plays a crucial role in reducing regional and socioeconomic disparities in access to health services (Araújo et al., 2023).

The strategy of expanding basic care through the UBS and the ESF seeks to ensure that all citizens, regardless of their geographic location or economic condition, have access to quality health care. The presence of community health agents, who work directly in people's homes, strengthens this model, as they know the social context of families and can

more effectively identify local health needs. This facilitates the promotion of more personalized care adapted to the reality of the most needy populations (Maziero et al., 2020).

Another essential aspect of PHC in public health is the integration of care. PHC is not limited to treating diseases, but acts in a continuous and comprehensive way, providing a comprehensive approach to the health of the individual and the community. This includes not only medical care, but also attention to living conditions, such as health education, access to healthy food, basic sanitation, and quality of housing. This holistic and continuous approach helps to prevent the worsening of diseases and reduce the need for more complex treatments, alleviating the burden on the health system and making it more efficient and sustainable (Barros et al., 2021).

Social participation is another fundamental principle of PHC and is directly linked to the promotion of collective health. One of the pillars of the primary care model in Brazil is the democratization of health, which implies the active inclusion of the population in decisions about health policies and actions. The presence of social control mechanisms and the realization of educational and informative activities in the communities allow people to become protagonists of their own health. This participation is crucial for health policies to effectively meet the needs of the population, especially in contexts of social inequality and lack of resources (Santos et al., 2023).

In addition, the constant bond between health professionals and communities, characteristic of PHC, strengthens the perception that health is a right for all and must be guaranteed in an equitable way for the entire community. Health education is one of the main instruments used by PHC to promote collective health. Through educational campaigns, lectures and guidance at the UBS and during home visits by community health agents, the population is trained to adopt healthy behaviors, such as physical exercise, a balanced diet and disease prevention. These educational actions have a significant impact on the reduction of chronic non-communicable diseases, such as diabetes, hypertension, and obesity, and also on communicable diseases, such as respiratory and infectious diseases (Brito et al., 2022).

By transforming people's behavior, PHC contributes to the construction of a culture of preventive health, which benefits the entire community. Coordination and continuity of care are crucial aspects of PHC to ensure that the population's health needs are met in an integrated manner. PHC not only provides direct care, but also coordinates referral to other levels of care when needed, such as hospitals and specialized health facilities. This articulation allows the health system to function more efficiently and for the patient to have

access to specialized care when their condition requires it, without losing the link with primary care (Barros et al., 2021).

In summary, Primary Health Care is fundamental for the promotion of collective health, as it guarantees broader, more equitable and quality access to health care. Its emphasis on prevention, education, social participation, and comprehensive care places PHC at the center of a fairer and more effective health system. By focusing on the health of communities, meeting their needs continuously and closely, PHC becomes an essential strategy to reduce health inequalities, improve the quality of life of the population, and transform the health conditions of the entire community (Santos et al., 2023).

FINAL CONSIDERATIONS

Primary Health Care (PHC) plays a fundamental role in the promotion of collective health, being crucial for the organization and functioning of health systems that seek to offer accessible, universal, and effective care. Throughout the research, it was possible to realize that PHC, with its focus on prevention, health promotion and equitable access, not only contributes to the reduction of social inequalities, but also to the improvement of the health conditions of populations, especially the most vulnerable. This model of care, which places the user at the center of care and prioritizes the continuous bond with the community, is directly aligned with the principles of collective health, which aim to build a fairer and healthier society.

The analysis of the historical panorama of PHC, with its implementation in Brazil from the creation of the Unified Health System (SUS), showed how the country has advanced in expanding access to basic health, mainly through the Family Health Strategy (ESF). The Brazilian model, which aims to integrate and coordinate the health care of the population, demonstrates the benefits of a system that favors preventive health and the promotion of collective well-being. PHC is not limited to medical care, but is also concerned with the social determinants of health, such as education, sanitation and food, being essential for the construction of public health that is more than the sum of consultations and treatments, but an integral approach to the human being.

However, it was also possible to identify that, despite the advances, there are still significant challenges in the full implementation of PHC, such as regional inequality in access to services, the shortage of health professionals in some areas, and the limitation of resources to expand and improve the infrastructure of Basic Health Units (UBS). These issues, added to problems of management and training of professionals, still compromise the quality and coverage of care, especially in rural and peripheral areas. The lack of

continuous investments and the overload of the health system, aggravated by the growing demand, are obstacles that need to be overcome to ensure the effectiveness of PHC.

However, the survey also highlighted that PHC has enormous potential for transformation. When well implemented, it is capable of revolutionizing the health model, promoting a more humanized, efficient, and problem-solving approach. The integration of health with other public policies, such as education and social assistance, social participation in health decisions, and health education have shown positive effects in several communities, promoting health in a sustainable and prolonged manner.

Through a literature review and analysis of public policies and strategies implemented in the country, it was clear that PHC, with its comprehensive approach and proximity to the community, has the power to promote a more inclusive, problem-solving, and sustainable health model. Its ability to interact with social demands, to prevent diseases and to provide care on a continuous basis places it at the center of discussions about the future of public health in Brazil.

In terms of relevance, this research is extremely important for understanding the role of PHC not only as a health care model, but as an essential strategy for building a fairer and more equitable health system. In addition, the research contributes to the debate on possible solutions to the structural and organizational challenges that still limit the effectiveness of PHC, providing subsidies for the continuous improvement of this care model. Ultimately, the promotion of collective health through PHC is a matter not only of health, but of social justice, being one of the greatest challenges and, at the same time, one of the greatest opportunities for Brazil to achieve a more egalitarian and efficient health system.

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