


THE RICHNESS OF INTER-EPISTEMOLOGICAL DIALOGUE FOR COMPREHENSIVE CARE: HUMANITIES AND SOCIAL MEDICINE BY THE PROJECT ENVIRONMENTAL HEALTH, PARASITOLOGY, BIOETHICS

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ABSTRACT

The present case study presents the actions carried out in extension by the Environmental Health, Parasitology, Bioethics Project by the Laboratory of Immunoparasitology and Toxicological Analysis of the Faculty of Pharmacy, a project that works in complexity bringing together the disciplinaries: multi, inter and transdisciplinaries. Together with the representatives of the Native Peoples in an urban context in the city of Rio de Janeiro, they have been rescuing the cosmovisions of the different native peoples residing in the city of Rio de Janeiro, resulting in diversified cultural and technological products, with regard to the premises in social technology and social medicine. The phenomenon studied and

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discussed is related to the need for knowledge of indigenous worldviews for effective care for urban indigenous people in integrality, improving the anamnesis in ethnopsychiatry (branch of study on cultural behavioral variants of ethnic origin and native peoples) to fulfill the singular therapeutic project. Furthermore, the respectful inter-epistemological dialogue is made of reciprocity and constitutes the best example of ethics between peoples, empirically perceived as such by our students and by all those involved in this project.

Keywords: Comprehensive care for urban indigenous people, Indigenous cosmovisions in Health, Anamnesis in Ethnopsychiatry, Social Medicine, Transdisciplinarity.

INTRODUCTION

The word universality in health evokes a transversal meaning for its comprehensive equitable expression in society, while the word integrality evokes a vertical sense in the sense of deepening the multidimensionality of the person, for each user of the health system, integrating its complexity with its singularity, in the sanitarian model of health instituted through the National Primary Care Policy (BR, MS, PNAB-SUS, 2017, a).

Based on the humanization and welcoming strategies of the PNAB-SUS, it is considered that the National Humanization Policy (PNH) is:

“... cross-cutting policy,
understood as a
Set of Principles and Guidelines
that translate into actions
in the various services,
in health practices
and in the instances of the system,
characterizing a collective construction”.
(PNAB-SUS, 2017, a)

In line with paragraphs 3, 4 and 9 of the Organon of the Art of Healing by Samuel Hahnemann (1810 *In Pustiglione*, Carillo Jr., 1994), the physician who instituted Homeopathy, which has as one of the health parameters, that people fulfill stages carried out for each phase of life, thus aiming to achieve the highest ends of their existence.

Inspired by these homeopathic philosophical principles and the Unified Health System (SUS) that complement each other, this understanding was continued through assistance, research, attention and teaching, the Homeopathy Service of the 7th Ward of the Santa Casa da Misericórdia Hospital in Rio de Janeiro, a territorialized and intersectoral service that performs primary care actions in its health space (Teixeira et al., 1994; BRAZIL, DCN, 2014; Machado/Duigó-TUKANO et al., 2019; Varricchio & Lage, 2020).

Being inserted in the multidimensional view of health, comprehensiveness also corresponds to the view of that individual in its complexity and singularity, aiming to promote self-awareness and, consequently, self-care. In this sense, our first indigenous self-care booklet was developed (Nunes *et al.*, 2010).

The notion of environment is not only biological, it implies the coexistence and inclusive and citizen presence of human beings, making it pertinent to approach cultural values, in a respectful way, in addition to understanding the preservation of culture as a good in itself (Varricchio & Lage, 2020).

Such an attitude of intervention, as an agent that promotes the well-being of traditional populations and native peoples, as well as in the promotion of sustainability, is recommended by the International Psychiatric Association (Patel et al., 2018), aiming at better outcomes of problem situations, both in collective health and environmental health, both branches of public health, both considered fundamental branches of public health. (Varricchio & Lage, 2020).

In addition to the indigenous people in an urban context with whom we have worked over the years developing intercultural educational citizen actions in social technology (Varricchio, 2023; Hansel-Martins *et al.*, 2024; Cler *et al.*, 2024), we started to invite urban indigenous teachers with degrees in History, Social Sciences, Arts and Letters/Linguistics to clarify the health team of the Homeopathy Service itself regarding the historical and sociocultural context experienced by them, aiming to improve our human contact and the improvement of the work in assistance and psychosocial care. (Patel et al., 2018)

Initiatives such as the "Intercultural Café" have provided dialogues between health professionals and graduated indigenous teachers, with the aim of understanding historical, sociocultural and linguistic contexts experienced by these peoples. During these playful meetings in our Health Space, we advanced the learning of the concept of Ancestry by the various peoples, told by them from their diverse worldviews (Patel et al., 2018; Souza/Otomorinhori'õ – XAVANTE, 2024; Oliveira – GOYTAKÁ *et al.*, 2024, Machado – TUKANO *et al.*, 2024).

In psychosocial care, during the transdisciplinary and interdisciplinary revitalization of the intercultural garden of the Homeopathy Service of the 7th Ward at the Santa Casa da Misericórdia Hospital in Rio de Janeiro (Varricchio, 2023), in symmetry, representatives of peoples and ethnicities involved with ethnomedicine and traditional medicine brought their contributions. Participations were recorded through audiovisual presentations for the 4th Global Meeting of Traditional Medicines, a hybrid meeting, promoted by the Traditional Community of Hawaií (Machado – TUKANO *et al.*, 2024; Oliveira – GOYTAKÁ *et al.*, 2024).

Furthermore, as part of the development of the project on anamnesis in ethnopsychiatry, the historical and linguistic relevance shared by the graduate professors, members of the Indigenous Multiethnic University Aldeia Maraká-nã (UIPAM), has been presented and explored.

In order to improve the relationship between professionals and individuals, meetings were held with ethnic leaders and native peoples, including the elderly and mature people

present in Rio de Janeiro. On these occasions, a professional listening was promoted attentive to the problems and disorders presented, with special attention to the linguistic and cultural aspects and the worldviews of these communities. The meetings took place in the 7th Infirmary, through the Department of Traditional Medicine of the Brazilian Federation of Homeopathy. In this way, the inter-epistemological dialogue was characterized (Souza/XAVANTE, 2024; Oliveira/GOYTAKÁ *et al.*, 2024; Bentes Lopes, Silva/TUPINAMBÁ, 2024).

This article aims to historically record this stage of knowledge exchange with indigenous university professors, representatives of native peoples in an urban context in Rio de Janeiro. These professors contributed significantly to the formulation and implementation of the proposal of the Pluriethnic Indigenous University Aldeia Maraká-nã, helping to understand their worldviews. This understanding was fundamental for the development of work focused on collective health, social medicine and humanities, within the scope of local community extension, conducted by the Environmental Health, Parasitology and Bioethics Project of the Laboratory of Immunoparasitology and Toxicological Analysis of the Faculty of Pharmacy of the Federal University of Rio de Janeiro.

METHODOLOGY

The present study documents exchanges of knowledge, carried out between June and November 2024, in the 7th Infirmary of Santa Casa in partnership with the Indigenous Multiethnic University Aldeia Maraká-nã and other representatives of native peoples. These actions seek to strengthen collective health, social medicine, and humanities practices in the city of Rio de Janeiro, promoting inclusion and sustainability.

This work adopts a qualitative approach, focusing on the promotion of environmental sustainability in health, based on the valorization of intercultural practices and the inclusion of traditional knowledge. The method chosen was the Case Study, which, according to Ventura (2007), is a research modality that consists of the systematic and detailed analysis of an individual or collective case, allowing an in-depth investigation of the phenomenon of interest.

The case analyzed refers to the actions carried out by the Homeopathy Service of the 7th Infirmary of the Santa Casa da Misericórdia Hospital of Rio de Janeiro, in partnership with representatives of native peoples in an urban context in the city of Rio de

Janeiro. The activities took place from June to November 2024 and included educational actions, intercultural meetings and the revitalization of the intercultural garden.

The data were collected through records of events such as the editions of the "Intercultural Café", which promoted dialogues between the health team and graduated indigenous teachers. These conversations addressed topics such as ethnomedicine, ancestry and worldviews, contributing to the interdisciplinary and transdisciplinary training of professionals. In addition, audiovisual materials produced for the 4th Global Meeting on Traditional Medicines were analyzed, documenting the contributions of indigenous leaders and ethnic groups involved in the project.

The analysis of the case was enriched by the triangulation of data sources: institutional documents, records of interactions in the meetings and scientific literature, based on the principles of the National Primary Care Policy (PNAB-SUS) and the National Humanization Policy (PNH). This approach allowed us to explore the interrelations between collective health, sustainability, and social inclusion, highlighting the importance of inter-epistemological dialogue for the strengthening of integrative and intercultural health practices.

RESULTS

In the context of the actions promoted by the Homeopathy Service of the 7th Infirmary of the Santa Casa da Misericórdia Hospital of Rio de Janeiro, the XVII Event promoted by the Environmental Health, Parasitology and Bioethics Project (SAPB) of the Laboratory of Immunoparasitology and Toxicological Analysis (LIPAT) of the Faculty of Pharmacy of the Federal University of Rio de Janeiro (FF/UFRJ) stands out. on September 14, 2024. The event, entitled "BIOETHICS, TRADITIONAL KNOWLEDGE, INTERCULTURAL HEALTH AND SOCIAL TECHNOLOGY" (https://sites.google.com/view/lipat/sapb-eventos_sapb?authuser=0#h.1s1skyyyka3s), was attended by indigenous representatives in an urban context and promoted inter-epistemological reflections and dialogues.

- Cacique Carlos/Doethyró - TUKANO, who addressed the theme "Brazilian Indigenous People during the Covid-19 Pandemic", reflecting on the challenges faced by indigenous peoples in contexts of health crisis and the social and cultural impacts of this period. (https://sites.google.com/view/lipat/sapb-eventos_sapb?authuser=0#h.pi1giown31yz).

- Professor Amanda Mara L. de Oliveira/GOYTAKÁ, graduated in History from UERJ, who presented the lecture "Matrilineal Medicine of the Forest: the Technology of the Ancestral Future", highlighting traditional care practices and their potential for integration with contemporary technologies (https://sites.google.com/view/lipat/sapb-eventos_sapb?authuser=0#h.xt8ebysu9y1r).

In addition to these contributions, we also emphasize the relevance of social medicine and ethnodevelopment in the urban context. A significant example was the lecture on audiovisual media presented by Jordan da Silva Cler, entitled "Social Technologies in the Field of Information Aiming at Citizen Integration to Members of Traditional Communities". In this presentation, the role of social technologies as tools for strengthening citizenship and the inclusion of traditional communities in the urban environment (https://sites.google.com/view/lipat/sapb-eventos_sapb?authuser=0#h.sl9ofd50dob9) was discussed.

These initiatives reinforce the commitment to the promotion of intercultural health, the preservation of ancestral knowledge, and the appreciation of indigenous worldviews, in line with the guidelines of the National Primary Care Policy (PNAB-SUS) and the National Humanization Policy (PNH). The realization of the event and the recording of these experiences contribute to the strengthening of inclusive and integrative health practices, in addition to promoting dialogue between different knowledge and cultures.

DISCUSSION

Since 2008, the team has been working with prevention and health promotion through health education with indigenous peoples, ethnic communities and traditional communities permanently or temporarily present in Rio de Janeiro. We work mainly with people on the move (Varricchio & Lage, 2020; Simões et al., 2021; Vacite et al., 2023; Cler et al., 2024; Cavalcanti et al., 2024).

Our work is based on established public policies, but always with care to adapt approaches as necessary, in accordance with the health care model. This model is a reason for being, a rationality that guides our actions; here, these actions refer to primary health care and psychosocial care (Varricchio & Lage, 2020; Varricchio, 2023).

Historically, in Brazil, the Santa Casa da Misericórdia Hospital in Rio de Janeiro, since the colonial period, has welcomed, treated, and cared for vulnerable and at-risk

populations, as was the case with both enslaved populations who arrived in Brazil, and the indigenous people who originated from this land, at the time called Pindorama (Mendes, 2022; Mendes et al., 2022a).

Various peoples and ethnicities have passed through the homeopathic clinic, but few historical records have been made.

PHENOMENON OF INTEREST

The phenomenon of interest discussed in this work is the trust and intersectoral partnership of the indigenous professors of the Pluriethnic Indigenous University Aldeia Maraka-nã, who cooperate not only for a better clinical care of their "relatives" in the outpatient clinic of the Homeopathy Service of the Santa Casa da Misericórdia Hospital in Rio de Janeiro, but also to ensure visibility and equity in access to health through territorialized services. These services have a work profile based on intercultural and interethnic clinical bioethics (Kottow, 2011), with matrix support and intersectoriality (Leal et al., 2022).

Acting in symmetry, as teachers that they are, through the intercultural education recorded here, they contributed significantly to the expansion of the cultural competence of the professionals of the Department of Traditional Medicine of the Brazilian Federation of Homeopathy, thus, from then on it is possible to associate the singularity aimed at through homeopathic anamnesis (Hansel-Martins et al., 2021; Bentes Lopes et al., 2023) to the singular therapeutic project established for each urban indigenous person who even presents himself to our service (Varricchio, 2023).

The singular therapeutic project corresponds to the organization and systematization of the care built between the health team and the user, considering the singularities of the subject, the complexity of each case (BRASIL, MS, 2017; 2017a) and, we add, the uniqueness of the peoples with their diverse customs and traditions - called cultural singularity. This presents us with a complex range of learnings and situations to be resolved in the best possible way for everyone involved. (Varricchio, 2023).

In Brazil, the health model is focused on coping with selected health problems and meeting the specific needs of certain groups, through collective actions. The health care model is a way of combining techniques and technologies (material and non-material) to intervene in health problems (damage and/or risks) and meet social health needs. It is a way of organizing the means of work (knowledge and instruments) used in health work

practices or processes. Technological combinations structured as a function of health problems that make up the epidemiological profile of a population (Paim, 2003).

Primary Health Care was defined by the Declaration of Alma-Ata (World Health Organization, 1978) as "the first level of contact between individuals, families and the community with the national health system, bringing health care as close as possible to the place where people live and work, constituting the first element of a process of continuous health care (...), in line with the principle of equity" (BRASIL, MS, 2017).

Primary Care, as a "gateway" to the health system, must be based on the local reality, considering the subjects in their singularity (particularity), complexity, integrity and sociocultural insertion. It must be based on the principles of the SUS: universality, equity, social control and hierarchization. Through its own organizational principles: accessibility, bonding, continuity of care, territorialization and description of clientele, accountability, humanization (BRASIL, MS, 2017; 2017 a).

Therefore, Health Systems guided by the principles and attributes of primary health care achieve better health indicators, have lower costs and have greater user satisfaction. Among the strategic areas of Primary Care is health promotion (BRASIL, MS, 2017; 2017 a).

In Psychosocial Care, for the development and deepening of anamnesis in Ethnopsychiatry, both areas not instituting diagnosis or medicalization, but aiming at the promotion of Mental Health among urban indigenous people impacted by so many changes in their lifestyles, we work with a mentality inserted in respect and recognition of the right to self-determination of peoples. (Varricchio, Lage; 2020).

Homeopathic medicine has always been directly related to the vision of preventive medicine and interventions in this sense. We have an interdisciplinary partnership with indigenous professors present in an urban context in Rio de Janeiro, who have increased our understanding of historical issues and the importance of preserving their worldviews, thus enhancing the understanding of health professionals regarding the aspects of anamnesis and the approach to physical examination who work in the Department of Traditional Medicine of the Brazilian Federation of Homeopathy, as well as in the construction and dynamic elaboration of our cultural competence and ethical discernment, which we have worked on over the years with our undergraduate students (Freire Souza Silva et al., 2023), graduate students (Cruz Filho et al., 2023) and Medical Residency students (Gomes et al., 2024).

Our usual interventions by the environmental health project, as a branch of public health, require notions of approach not only in the cultural aspects, but in the social aspects of Medicine that has been making specific contributions to Medical Education as presented to the Brazilian Association of Medical Education (Machado/Duigó –TUKANO et al., 2019).

In this way, the SAPB-LIPAT Project inaugurated, through the creation of its own teaching-learning space of conceptual and operational aspects of Intercultural and Interethnic Bioethics, in a hidden curriculum, a space for extracurricular practice in Social Medicine through project-based learning and leadership development, basically training scrutiny and discernment for conscious professional practice, ethical and autonomous.

The experience of this period, both with regard to the reflection on the thematic scope and the organization and management of theoretical-practical activities, was the objective of continuous evaluation by the professors involved, as well as served as a basis for the preparation of technical articles in the journals supporting the Project and as the realization of the final evaluation of the students when submitting their manuscripts to peers for criticism, in journals outside the higher education institution.

Considering the innovative character of the project by reference to the hegemonic conceptual framework in the scope of Medical Education, the team of professors decided to systematize, in the present work, the conceptual elements that guided this practice and to present the model of organization of the teaching-learning process developed.

Social Medicine can be conceived as a field of knowledge that is based on a disciplinary triad - Epidemiology, Social Sciences and Health Administration and Planning - and encompasses a set of social practices that are characterized by taking Health, in its social dimension, as an object of intervention. Thus, it encompasses a theoretical practice, of knowledge production, a technical practice of management and production of health actions and services, and a political and cultural practice, of dissemination of knowledge (knowledge), mobilization and social participation that make up what is now called "social communication in health", as preliminarily discussed by Almeida et al. (2024).

The broader purposes are to raise the health and environmental awareness of citizens, facilitating participation and social control over policies and practices in this field, and improving the quality and impact (effectiveness) of actions on health problems whose economic and social conditions have an impact, on the health-disease process in

populations, and on socially organized practices for the promotion and recovery of health in different social groups.

Some authors who have been concerned with systematizing and scientifically elaborating the advances in the theoretical practice of Social Medicine in recent years, point to three fields of investigation, which reflect the expansion and diversification of Social Medicine, as a technical and political practice.

- a) "Analysis of health practices, taking as object of studies the relations between the State and health institutions, the analysis of health policies and practices". They propose the revaluation of the Subject seeking to articulate the contributions of the social, political, sociology, anthropology - contemporary sciences, which emphasize action as an act of individual and collective will as a central element for the understanding of social processes that determine and condition history, in our experience discussed by History teachers Amanda Mara L. de Oliveira/GOYTAKÁ (2024) and Social Sciences Ricardo Felipe da Silva/Ybyráîara - TUPINAMBÁ (Bentes Lee; Da Silva/ Ybyráîara - TUPINAMBÁ, 2024).
- b) Studies on the relations between the social structure and the health-disease processes having as "mediation" the nutritional status, work and the social processes of modification of the environment. Reflection on the paradigms (theoretical models of explanation/understanding of health-disease in population) used in the production of knowledge in this field through a revaluation of the subjective, the cultural, and the dialogue with currents of epidemiological investigation. The central category that our studies focus on tends to be the "way of life" of these specific population groups, without denying the structural (class) determinations on the one hand, nor the singularity of the individual expression of the health-disease process on the other (Bentes Lopes *et al.*, 2021) to carry out strategic-situational planning.
- c) The third field concentrates studies on popular health practices, their internal logic, their relationship with health institutions and with medical knowledge. There is a concern with the analysis of the historicity of knowledge and practices in health (Luz, 1988; Costa, 1989 *In Varricchio, Lage, 2020*), when sociological, historical, anthropological, and even epistemological studies on the knowledge and health practices of these members of traditional peoples and communities of knowledge in an urban context have been multiplying. As a result of the previous two, we are at

this stage of building an intercultural space, for effective inter-epistemological exchange (Varricchio et al., 2022; Cler, Varricchio, 2023; Varricchio, 2023; Cler et al., 2024).

Therefore, the design and elaboration of the SAPB project, which began in December 2016, implied the formulation of educational objectives that would account for the expected results at the local level in terms of the knowledge, skills, and attitudes of students and members of collectives, ethnic groups, and native peoples (Varricchio, Lage, 2020).

The process of defining these objectives was the starting point for the construction of a preliminary consensus, within the teaching team, about the contents and practices that should be developed during the projects (Varricchio et al., 2022).

Each educational objective was sought to correspond to a theme to be addressed through expository classes, group discussions and/or practical activities.

- a. Describe the relationships between Nature, Culture and Society, giving examples of relationships with the level of health of the community studied and with the organization of health services (Machado-TUKANO et al., 2019).
- b. Discuss the relationships between the individual and society in economic production, in the consumption of goods and services, in action and in the defense of citizenship (Machado-TUKANO et al., 2019; Simões et al., 2021; Souza/XAVANTE et al., 2024, a).
- c. Identify civil society organizations, discussing forms of participation in the field of health (Gypsy Union of Brazil, Neg-Ex, CEDIND-RJ, Indigenous University
- d. Discuss social technology and the relationships between health, work and study, identifying the forms of organization, in the defense of working conditions and in health care for informal workers (Simões et al., 2021; De Almeida/TUKANO et al., 2024).
- e. Analyze Medicine as a professional practice in the development of Humanities (Leal et al., 2022; Cruz Filho et al., 2023).
- f. Comment on the different views on health (Bentes Lopes et al., 2021).
- g. Explain the importance of health education actions with regard to disease prevention, raising health awareness, and achieving citizenship (Leal et al., 2022; Freire Souza Filho et al., 2023; Cler et al., 2024).

- h. Carry out educational and community mobilization actions to support health campaigns and programs (Cler et al., 2024).

The theoretical activities consist of lectures, directed study, seminars and group discussions on the basic texts of the discipline, most of which are specially designed to account for the programmed content (Gomes *et al.*, 2024, a).

STUDY LIMIT

The present study, conducted within the scope of the Environmental Health, Parasitology and Bioethics Project (SAPB-LIPAT) of the Federal University of Rio de Janeiro (UFRJ), faces some limitations that deserve to be highlighted.

First, the geographic focus is on the city of Rio de Janeiro, especially in urban contexts where indigenous peoples and traditional populations are present. Although this approach has made it possible to carry out a more focused and detailed study, it limits the generalization of the findings to other regions of Brazil, where the cultural, historical, and social contexts can be significantly different.

In addition, interactions with ethnic leaders and representatives of indigenous peoples were carried out in an urban setting, implying that the specificities of indigenous communities in rural or isolated territories were not directly addressed. Thus, the study may not fully cover the cultural and linguistic dynamics of these groups in their territories of origin.

Another relevant aspect concerns the interdisciplinarity involved in the project. The exchange of knowledge with indigenous university professors and the interaction with representatives of different worldviews were enriching, but they also faced challenges related to linguistic, methodological and epistemological barriers. Understanding and recording these experiences depend on interpretations that can be influenced by researchers' perspectives, which can introduce biases.

Finally, it is important to consider that the analysis took place in a limited period and with specific available resources. These factors may have restricted the scope of the study, both in terms of the number of participants and the depth of some discussions.

These limitations, however, do not diminish the relevance of the results achieved. On the contrary, they indicate paths for future studies that can broaden the understanding

of collective health and social medicine practices with native peoples and traditional populations in different contexts.

CONTRIBUTION

The experience of the SAPB-LIPAT Project at UFRJ raises two types of questions: first, it contributed to the interest of medical students in broadening the range of discussion about the historical, political and socio-environmental aspects of medical practice for indigenous people in an urban context, particularly taking into account the current situation of health crisis and the process of reorientation of the health service system in Brazil.

Secondly, it allowed progress to be made in the debate about the possibilities of reorganizing health practices and, as a consequence, the training of personnel in this new field of transdisciplinarity, where indigenous people in an urban context are deterritorialized, but prepared, alert and active in the construction of citizenship.

In the process of reorganizing health care models towards intersectoriality, transdisciplinarity, participation and social control.

As a result, an important gap in medical education was filled, in particular, the elements of the socioeconomic urban context necessary for the critical positioning of the professional in relation to his practice and the historical conditions of his practice.

In particular, the humanistic focus in which ethics, solidarity and affection among subjects were resized stands out.

CONCLUSION

The knowledge, skills and competencies required to participate in an environmental health project required humanistic development. Thus, in addition to the view of parasitology, bioethics and public health, it added as a result the possibility of the hidden teaching of Social Medicine in the Undergraduate Program in Medicine, in this current design of the project and context: both in relation to the perspectives of medical practice and in relation to the process of reorientation of health policy in the country.

REFERENCES

1. Bentes Lopes, J., Varricchio, M. C. B. N., Pyrrho, A. dos S., & Lage, C. L. S. (2023). Ecoperception in narratives of subjects of ethnic origin in the face of Covid 19: primary mental health care. SEIVA/SAPB-LIPAT/UFRJ Support Magazine to SAPB-LIPAT Project - Technical Article, 7(2). https://sites.google.com/view/lipat/sapb-revista_seiva#h.4ovacivznsar
2. Bentes Lopes, J., & da Silva, R. F. (n.d.). Ybyrára – Tupinambá. Resgate histórico Tupinambá – Troca de Saberes Inter-epistemológica em atenção primária, visando ao atendimento clínico diferenciado de indígenas urbanos no Rio de Janeiro. VITAE - Revista de Apoio ao Serviço de Homeopatia do Hospital Geral Santa Casa da Misericórdia – RJ, 7ª Enfermaria. <https://sites.google.com/view/lipat/sapb-artigos?authuser=0#h.ixn783f730sa>
3. Brasil. Ministério da Educação, Conselho Nacional de Educação, Câmara de Educação Superior. (2014). Resolução Nº 3 de 20 de junho de 2014, Diário Oficial da União; 23 jun. 2014. Seção 1, p. 8-11.
4. Brasil/Ministério da Saúde. (2017). Portaria 2436, set. 2017.
5. Brasil/Ministério da Saúde. (2017). Política Nacional de Atenção Básica. PNAB, 2017a, artigo 5.
6. Brazil. Ministry of Health. Special Secretariat for Indigenous Health. Department of Indigenous Health Care. (2019). Psychosocial care for indigenous peoples: weaving networks to promote good living. Brasília, DF: Ministry of Health. https://bvsmms.saude.gov.br/bvs/publicacoes/Atencao_Psicossocial_Povos_Indigenas.pdf
7. Cavalcanti, L. C., Gonçalves, N. dos S., Bolognani, F., Malfacini, S. da S., da Silva, J., Lage, C. L. S., Pyrrho, A. dos S., & Varricchio, M. C. B. N. (2024). Facing COVID-19: Guidelines for Gypsy People. Revista de Gestão Social e Ambiental, 18(11). <https://doi.org/10.24857/rgsa.v18n11-257>
8. Cler, J. da S., de Almeida, D. da S., Yepáriô – Tukano, Cavalcanti, L. C., Gaspar, S. A., Malfacini, S. da S., Bolognani, F. de A., Varricchio, M. C. B. N., & Pyrrho, A. dos S. (2024). Traditional Knowledge approach at SAPB/LIPAT/FF/UFRJ intersectorial project. Revista Aracê, 6(2), 1183-1194. <https://doi.org/10.56238/arev6n2-042>
9. de Almeida, D. da S. (2024). Social technology and people's mental health: informal work in an urban context. Revista Observatorio de La Economía Latinoamericana, 22(9), 1-17. <https://doi.org/10.55905/oelv22n9-112>
10. de Oliveira, A. M. L., Goytaká, da Silva, R. F., Ybyrára - Tupinambá, de Souza, J. M., Otomorinhori'ô – Xavante, Gayer, D. de S., Lopes, J. B., Pyrrho, A. dos S., Varricchio, M. C. B. N., Bolognani, F. de A. (2024). Contribuições do Departamento de Medicina Tradicional da Federação Brasileira de Homeopatia: Atenção ao resgate histórico da Medicina Tradicional e Etnomedicina em contexto urbano no Rio de Janeiro. SEIVA –

Magazine Supporting the SAPB-LIPAT/FF/UFRJ Project, 8(2).
https://sites.google.com/view/lipat/sapb-revista_seiva#h.pvgytd220ruy

11. de Souza, J. M. (2024). Otomorinhori'õ – XAVANTE. Amerindian ancestry: Mother Tongue. SAPB PROJECT - LIPAT-FF/UFRJ & PROVE-MEPPSO-IPUB/UFRJ & UIPAM & Café (Inter)Cultural Homeopathy Service.
<https://sites.google.com/view/lipat/sapb?authuser=0#h.8vvlao7wwb04>
12. de Souza, J. M. (2024). Diversity and Intercultural Education: Urban Indigenous Cooperation at Homeopathy Service in Rio de Janeiro/BRAZIL. Chapter in E-book: Perspectives in Contemporary Education (1st ed.). ISBN: 978-65-982396-6-4.
<https://revistacontemporanea.com/e-books/perspectives-incontemporary-education-vol-01/>
13. de Souza, J. M. (2024). Intercultural education: urban indigenous people protagonism in Rio de Janeiro/Brazil. Revista Caderno Pedagógico, 21(7), 1-22.
<https://ojs.studiespublicacoes.com.br/ojs/index.php/cadped/issue/view/119>
14. Gomes, N. B. de N., Nagamatsu, D., Bolognani, F. de A., de Freitas, F. J., de Freitas, J. M. V., Varricchio, M. C. B. N., Pyrrho, A. dos S., & Castelo Branco, M. T. L. (2024). Potenciais mecanismos fisiopatológicos observados em toxicologia crônica de Euphorbia tirucalli: Estudo preliminar. Revista Aracê, 6(4), 11490-11516.
<https://doi.org/10.56238/arev6n4-035>
15. Hansel-Martins, C., Couto, B. C. de F., Mendes, M. G., Gonçalves, N. dos S., Gomes, N. B. N., Gorini, C., Pyrrho, A. dos S., & Varricchio, M. C. B. N. (2021). Anamnesis, psychosocial care, environmental health promotion. SEIVA – Magazine Supporting the SAPB-LIPAT/FF/UFRJ Project, 5(1). https://sites.google.com/view/lipat/sapb-revista_seiva?authuser=0#h.ecbe6ys28z5o
16. Hansel-Martins, C., et al. (2024). Medicinal intercultural plant garden homeopathy and phyto nutritional care. Revista Contribuciones a las Ciencias Sociales, 17(1), 6173-6188. <https://doi.org/10.55905/revconv.17n1.371>
17. Kottow, M. (2011). Didactic aspects in intercultural bioethics. Revista Brasileira de Educação Médica (RBEM), 35(2). <https://doi.org/10.1590/S0100-55022011000200017>
18. Leal, B. M. P. da S., Tavares, F., Gaspar, S. A., Bolognani, F. de A., Varricchio, M. C. B. N., & da Silva, J. (2022). Ações de Grupamentos Tradicionais Urbanos no RJ: Diversidade e Sustentabilidade. XXVIII Semana Científica UNIFASE/FMP. Outubro, Petrópolis, RJ.
19. Luz, M. F. (1988). Natural, racional, social: razão médica e racionalidade científica moderna. Campinas, Rio de Janeiro.
20. Machado, C. V. da S., Duigó-Tukano, Pinto, M. D. D. C. de A., Lage, C. L. S., Pyrrho, A. dos S., Amaral, M. do, & Varricchio, M. C. B. N. (2019). Quantum philosophical café of the FMPFase Cultural Center as a sensitizer to bioethics, diversity, sustainability,

environmental health and spiritual health. ABEM RJ/ES Conference. Available on Even 3 website.

21. Machado, C. A. F., Doethyro Chief Elder Tukano, de Almeida, D. S., Yeparió-Tukano, Machado, C. V. da S., Duigó-Tukano, Gaspar, S. A., Freitas, F. J. de, Bolognani, F. de A., Castelo Branco, M. T. L., Pyrrho, A. dos S., da Silva, J., Lage, C. L. S., & Varricchio, M. C. B. N. (2024). Originary people knowledge and Amazonian forest medicine in Brazil: Urucum (*Bixa orellana* L.) and Jenipapo (*Genipa americana* L.). SEIVA/SAPB-LIPAT/UFRJ Support Magazine to SAPB-LIPAT Project - Technical Article, 8(2). https://sites.google.com/view/lipat/sapb-revista_seiva#h.pvgytd220ruy
22. Mendes, M. G. (2022). HGSCMRJ Homeopathy Ward: Historical Report - Innovative Ethnocentric Educational Practice. 10th EVENT PROJECT SAPB-LIPAT & AIAM & UCB & INPI INVITE: LAFFH/UNIFASE, UESA & 7th Ward HGSCMRJ & ITEGAM – CBA. Available at: https://sites.google.com/view/lipat/sapb-aulas_e_apres#h.25b60tzodmk
23. Mendes, M. G., Gonçalves, N. dos S., de Oliveira, L. L., Varricchio, M. C. B. N., Pyrrho, A. dos S., & Lage, C. L. S. (2022). From the protection of traditional ethnic knowledge to public health policies, innovative ethnocentric educational practice. Innovative Teaching Practices. XVIII FMP-UNIFASE Scientific Week: (Re)-Existence and Consciousness: 200 years of what?. Petrópolis, RJ. Available at: https://sites.google.com/view/lipat/sapb-eventos_sapb#h.8avpfsa20yh3
24. Nunes, Darci Tupã - Guarany Mbyá Tekoi, Palma, Alexandre, & Varricchio, M. C. B. N. (2010). Dança pra Nhanderú. Cartilha para Auto-Cuidado. E-book. Edição dos autores. https://drive.google.com/file/d/1mljber_1tufx_rfbbp7_epawvzjytm/view
25. Organização Mundial da Saúde (OMS). (1986). Carta de Ottawa para a Promoção da Saúde. http://bvsmis.saude.gov.br/bvs/publicacoes/carta_ottawa.pdf
26. Paim, J. S. (2003). Políticas de saúde no Brasil. In M. Z. Rouquayrol & N. de A. Almeida Filho (Eds.), *Epidemiologia da Saúde* (6th ed., pp. 587-601). MEDSI.
27. Patel, V., Saxena, S., Lund, C., Thornicroft, G., Baingana, F., Bolton, P., Chisholm, D., Collins, P. Y., Cooper, J. L., Eaton, J., Herrman, H., Herzallah, M. M., Huang, Y., Jordans, M. J. D., Kleinman, A., Medina-Mora, M. E., Morgan, E., Niaz, U., Omigbodun, O., Prince, M., Rahman, A., Saraceno, B., Sarkar, B. K., de Silva, M., Singh, I., Stein, D. J., Sunkel, C., & Unützer, J. (2018). The Lancet Commission on global mental health and sustainable development. *The Lancet*, 392(10157), 1553–1598. [https://doi.org/10.1016/S0140-6736\(18\)31612-X](https://doi.org/10.1016/S0140-6736(18)31612-X)
28. Pustiglione, M., & Carrillo, R. Jr. (1994). *Organon da Arte de Curar de Samuel Hahnemann – versão sistematizada e comentada*. São Paulo: Homeopatia Hoje.
29. Rosen, G. (1980). *Da política médica à medicina social*. Graal.
30. Simões, G., Cler, J. da S., de Oliveira, L. L., Machado, C. V. da S., Duigó-Tukano, Machado, C. A. F., Doethyró-Tukano, Vacite, M., Cavalcanti, L. C., Varricchio, M. C. B.

- N., & Pyrrho, A. dos S. (2021). Metodologia ativa em ensino a indígenas em contexto urbano no RJ: Uma experiência local. SEIVA - Revista de apoio ao Projeto SAPB-LIPAT/FF/UFRJ, 5(2). https://sites.google.com/view/lipat/sapb-revista_seiva#h.jri8o7p4opc1
31. Teixeira, C. F., Noronha, C. V., & Paim, J. S. (1994). Ensino da medicina social na graduação. Revista Brasileira de Educação Médica, 18(1), 3-9. <https://doi.org/10.1590/1981-5271v18.1-003>
32. Universidade Pluriétnica Indígena Aldeia Maracanã (UIAM). (n.d.). Multi-Ethnic Indigenous University Aldeia Marakanã. Available at: https://www.uerj.br/uerj_tags/universidade-plurietnica-indigena-aldeia-maracana/
33. Vacite, M., et al. (2023). Health of the urban Romany people in Rio de Janeiro/Brazil. Revista Foco, 16(10). <https://doi.org/10.54751/revistafoco.v16n10-031>
34. Varricchio, M. C. B. N. (2020). Analysis regarding the effectiveness of legislation on access to Brazilian genetic heritage, protection and access to associated traditional knowledge, as a sustainable use of biodiversity. Post-Doctoral Internship Final Report, National Institute of Industrial Property. <https://sites.google.com/view/lipat/sapb-artigos#h.phiqv323b8w6>
35. Varricchio, M. C. B. N., et al. (2022). Educação intercultural para integração cidadã e inovação social a grupamentos étnicos em situação urbana no Rio de Janeiro. In XIV ENAPID Encontro Acadêmico de Propriedade Intelectual, Inovação e Desenvolvimento (pp. 1-7). Ministério da Economia, INPI.
36. Varricchio, M. C. B. N. (2023). Indigenous and gypsy leaders in urban territories, demands for care and psychosocial attention in times of pandemic: challenges, possibilities and expectations (Dissertation, Master's in Psychosocial Care). Institute of Psychiatry, Federal University of Rio de Janeiro, Rio de Janeiro. Advisor: Profa. Dr. Jaqueline da Silva.
37. Ventura, M. M. (2007). The case study as a research modality. SOCERJ Magazine, 20(5), 383-386. Available at: http://sociedades.cardiol.br/socerj/revista/2007_05/a2007_v20_n05_art10.pdf