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**The national policy for integral attention to human health and the implementation of care in Brazilian primary care: Advances, weaknesses and challenges**

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Despite the constant evolution of medicine with numerous recent scientific discoveries and the expansion of measures and policies of the Unified Health System to improve the quality of life in Brazil, the male population is often unable to access the health network and, when you have it, it often presents services with little resoluteness. It is a fact that the access that this material treat considers not only to have opened the door of the system but to give the opportunity to receive and direct the care for lines that are in crossings of networks. Difficulties often lead to 'pilgrimage' by the health care network, which is not always set up, but for the user it makes sense. Therapeutic trajectories are varied in the search for quality and resolute services for their problem; however, the fragmentation in the assistance does not allow their demand to be seen by the integrality, and the problems behaving as if they were fragmented, tend to increase, compromising their cheers. Thus, the production of integrality, the adoption of the principles of the Brazilian Unified Health System and its various understandings, directs management to take care of the production of care

and health work as objects of action; thus, "it is not enough to set up information systems, flowcharts, protocols and standards. It is necessary to carry them out in daily life, in the interaction between the various services, with those who are present, managers, workers and users. "According to Cecilio and Merhy (2003), health care is the sum of small partial care, which is discussed at all times and complemented, negotiated among the various actors involved, including the user. A complex network of acts, procedures, flows, routines, knowledge, is formed in a dialectical process of complementation, being the integrality of attention resulting from the way in which the practices of workers and services are articulated in practices directed by care lines. This paper presents the national policy of integral attention to the health of the man and the north of his care in the primary attention, listing the advances, the fragilities and the challenges for the health promotion and the prevention of diseases, considering the man in the diverse masculinities, in their social-historical contexts.

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