

Municipal Health Councils of Campinas-SP and its health workers

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Abstract

Qualitative research aimed to know and analyze the participation of health workers during the implementation of the MHC (Municipal Health Councils) of Campinas, 1990-94, to rescue the oral history of 6 key subjects, using semistructured interviews. Analysis revealed 3 themes: Background of Campinas MHC Constitution, the MHC Acting and Social representations of the UHS (Unified Health System), enabling understanding of the MHC creation, the role of workers and users to consolidate it and the impact in the current reality.

Key words: social participation, history, public health policies.

Introduction

MHC, present in Brazil since the 90s, is permanent, with deliberative, normative functions, supervisory and advisory and aim at the establishment, monitoring, control and evaluation of the Municipal Health Policy, in accordance with the Federal Law numbers 8.080 and 8.142, constituting as maximum collegiate bodies responsible for coordination of the UHC in municipalities. The history of health popular movements in Campinas occurred before this time and included a strong alliance between population and professionals area¹. **Objectives:** to know and analyze the participation of health workers in the implementation period of the MHC of Campinas-SP, from 1990 to 1994, to rescue the oral history of six important subjects of this period.

Results and Discussion

Methodology: Qualitative and social historical study. Developed by individual interviews - analyzing content - from February to April 2015 with six subject assets with fundamental importance for the construction of the MHC, five health workers (two doctors, a social scientist, a nurse and a nursing technician) and one user.

Results and Discussion²:

Background of the MHC: Respondents, when they describe the MHC implementation period, reported that the background of this movement was instrumental in the formulation this deliberative space.

The Acting of the MHC: The MHC at the time was not carried away by the bureaucracy of institutionalization. It used this formal space as an ally to strengthen their struggle and reaffirm the power of democracy to expand and legitimize the participation of new actors in the decision processes. Another defining feature is the alliance between workers and users.

Social representations about the UHS and its principles.

Workers: Participation of health and nursing workers consisted of active people of conscience, political admiration and belief that changes and maintenance in UHS were possible. These workers were political agents of change, not because of their academic training, but by their own convictions. However, this engagement is not present today. **Users:** There was a legitimate fear in the movement to become institutionalized along with the MHC. A real concern, since there is no complete assurance of intervention capacity, even though the quantitative presence of representatives of the population is ensured by the legal requirement of parity. **Management:** MHC is recognized as a local political arena, as a confrontational political space. It is configured as a space of dispute, in which the institution and new entrants actors compete.

Conclusions

The study allowed us to understand how the MHC formation happened, the fundamental role of workers and users for its consolidation and impact in the current reality; and that historical knowledge is associated directly to the addressing the contemporary challenges of public health.

Notas: Municipal Health Councils (MHC); Unified Health System (UHS).

Acknowledgement

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