

Public health policies and the challenge faced by the COVID-19 pandemic





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ABSTRACT

Public policies are state constructions that implement effective mechanisms in society in the search for solutions to the public problem, thus seeking harmony and the reduction of social inequality. Some authors that we will address in the course of the text, affirm that they are inserted in the social actions of the State, promoting well-being, better health conditions to the population and to each individual, going much further than that, reducing social inequalities in health. This article aims to weave a literature review, aiming to gather essential information and data that permeate public health policies and the challenges of the Covid-19 pandemic.

Keywords: Public policies, Health policies, Mint health, Covid.

1 INTRODUCTION

Since antiquity it is possible to observe the essentiality of the State in the survival and quality of life of a people, which in the present day is no different. The performance of the State in contemporary times is fundamental for the consolidation of a just society and it is in this sense that public policies are paramount.

Health is a right that every human being has, being widely related to life and well-being, as well as mental health, however, it is not because health is included in a legal device, that it will effectively produce its effects, because there are many challenges that the law itself does not know or when it was created it was not possible to predict, Like, for example, the effects of the covid-19 pandemic. Public policy then is a tool that the State has to face these challenges in a current and effective way, acting specifically in the solution of the problem that affects the collectivity.



Public health policies, as far as they are concerned, are inserted in the social actions of the State, promoting well-being, better health conditions for the population and for each individual, going much further than that, reducing social inequalities in health (CUNHA, HENRIQUES, COSTA, 2020).

Through the mental health policy initiated in the 80s, Brazil has gained great prominence in the international scenario regarding mental health. This recognition is due to the fact that Brazil was one of the first countries, outside the group of countries with great resources, to establish a national mental health policy and to have implemented it with appreciable success for more than 30 years (ALMEIDA, 2019).

In this pandemic period caused by covid-19, there is agreement that it not only affects physical health, but also people's mental health and well-being, and its effects may be greater than the pandemic, resulting in invaluable economic and psychosocial complications (NABUCO, DE OLIVEIRA, AFONSO, 2020).

Understanding how public policies impact the reality of the population and how they produce their effects, especially on health, are one of the objectives of this research, which will consider the current scenario of the covid-19 pandemic in these policies.

The research is exploratory and began with a Literature Review, aiming to gather information and data essential for the construction of the article.

2 DEVELOPMENT

2.1 FUNDAMENTAL NOTIONS OF PUBLIC POLICIES

To understand how and where public policies operate, it is first necessary to understand the elements that make up all its complexity, it is important to emphasize that the idea we have today of public policy is the result of a series of facts and events that have traveled throughout history (GIANEZINI *et al.*, 2017).

Many theories permeate the idea of the State, and can be synthesized under three major theories that declare that: there has always been the existence of a State and a society; the State was created to meet the needs of social groups; and that the definition of State is historical and concrete. Other theories hover over the formation of the State, which occurred naturally, however, the most accepted is the contractual formation of the State, in which the human being makes pacts and contracts aimed at the public interest (common good) thus arising social actions. In this sense, it is that the idea of public policies is born, since it is directly associated with the State, even if other actors are often reported (GIANEZINI *et al.*, 2017).

With the advent of public policies, the area is constantly represented as an applied social science, focused on problem solving, some elements are commonly associated with the problem such



as: Causality; Gravity; Incidence; Novelty; Closeness; Crisis; Target audience; Means versus ends; and Solutions (CAPELLA, 2018).

However, an important notion in studies on problems in public policies is the differentiation between conditions and public problems. The public problem is to the disease, as public policy is to the treatment. Public problems and public policy exist in many areas of government. The main purpose of a public policy is the confrontation, reduction and even the resolution of the public problem (SECCHI, 2020).

There is also in the context of public policies, the term agenda, which can be understood as a set of political discussions that assess which issues deserve attention from the political system, and can be divided into systemic, governmental and decision-making (CAPELLA, 2018).

In the systemic agenda, it is when society understands that certain issues are of governmental competence, manifesting itself through public opinion, however, not all these issues presented will attract the attention of members of the government. The governmental agenda, in turn, consists of the issues classified as essential to public administration, which may vary according to the location, and may be municipal, state and federal, however, presented to the circumstances and volume of this issue, only some will be used in the governmental agenda for a certain period. This assessment of which issues deserve the attention of the public power is what consists of the decision-making agenda, since they are already ready to become public policies. Highlighting specialized agendas, such as health, education, security, etc. (CAPELLA, 2018).

It is understood that public policy deals with decision-making, because it results in different interests, of different social classes that require action of the public power, respecting fundamental rights.

In this way, these actions are fragments that aim to harmonize the public and private services of the State to pursue their main and relevant objectives. Thus, the choice of objectives takes place through the public administration, considering the guarantee of collective interests (DE FREITAS, CASSOL, RODRIGUES, 2021). In the relationship between evaluation and implementation of public policies, according to the authors, there is a disharmony in this relationship, because, while in the evaluation it is intended to contribute to the implementation of public policy by producing data and information that can favor the identification of strengths and weaknesses, the implementation presents obstacles and impediments to evaluation, due to its changing nature, highly dependent on the structures and dynamics of local contexts of action (LOTTA, 2019).

The implementation of public policies is a necessary prerequisite for the administrative activity of the State and consists of a means of action not only indicated, but also legally required. Law 12.593/2012 is an example of this, it was the text itself that outlined the forms of implementation of public policies and stipulated that government planning should prioritize sustainable development and



the guidelines adopted aiming at guaranteeing human and social rights, regional reducing ethnic-racial and gender-specific inequalities, promoting goods and services for society (BRASIL, 2012; DE FREITAS, CASSOL, RODRIGUES, 2021).

The use of public policies in the conduct and management of the interests of social duties by the entities of the State is indispensable for the security of fundamental rights and guarantees essential to life in society. However, it is essential to highlight the indispensable character of these actions, of which it is understood as the passage from the duty to be to the actual being in relation to the existence of the Social Welfare State itself (DE FREITAS, CASSOL, RODRIGUES, 2021).

Each aspect of the State's action through public policies is an important factor of the welfare State, which deals with the implementation of normative principles through the direct action of public entities in the field of social dynamics.

2.2 HEALTH POLICIES AND MENTAL HEALTH POLICIES

Public policies are aimed at the interest of the community, so they have a very wide scope because they involve issues of public order. There are many complex variables that make up the structuring of processes that impact reality.

Public policies influence and are influenced by values and ideals that guide the relationship between State and society. Organized groups take turns as conditioning factors of these variables, participating directly and indirectly in the decision-making process that sustains them (CASTRO; GEORGE; AMABILE, 2012, p. 390).

In the study of public policies, four essential stages are considered didactically which are the formulation, execution, monitoring and evaluation. The implementation of public policies is the most current aspect of public policy analysis (LOTTA, 2019). "In the 1960s, with the boom in the evaluation systems of welfare states, and with high investment by multilateral agencies, there was a great effort in the literature to invest in public policy evaluation processes" (BARRETT, 2004, p.14).

Studies on the implementation of public policies have already passed 40 years, surpassing the fourth generation (LOTTA, 2019). The first generation, still in the 1970s, came from these initial concerns in understanding what happened when public policies were put into practice that subverted the previously designed results. By looking from the top down, this is the so-called top-down implementation analysis. With several researches the authors of this perspective conclude, that the policies fail because the implementation does not follow the formulation, either because the objectives are too comprehensive, or because there are many different actors and values in the implementation.

In the 1970s and 1980s another current emerged, which understands that implementation is only a part of the process and is therefore also subject to decisions that occur due to the fact that not everything is predicted, controlled or standardized. This second generation of studies was known as



bottom up. These authors understand that public policy analyses should be looked at from the bottom up, focusing on what actually happens. With a look at the actors involved in the implementation, the so-called "street-level bureaucrat" emerges, which by the studies reinforce the thesis that there are many processes involved. "In the 1990s, several alternative models of analysis were proposed, which seek to leave the bottom up and top down binomial and propose other analytical models" (BARRETT, 2004, p.18).

This is the so-called third generation of studies, whose central concern is the synthetic models of implementation analysis (SABATIER, 1988; BARRETT, 2004). "What is common between these models is an attempt to get out of the opposition between formulation and implementation, understanding continuous decision-making processes that involve public policies and their results" (LOTTA, 2019, p.18). The fourth generation of these studies is the current moment, marked by multiple models and distinct forms of analysis in several countries, with the participation of other sectors in the implementation phase, especially sociology. In Brazil since 2010 this field has grown and in 2018 the I National Seminar on Studies on Public Policies was held, under the organization of the National School of Public Administration (Enap), the Federal University of ABC (UFABC) and the Pontifical Catholic University of Rio de Janeiro (PUC/RJ) in Brasilia. Event that brought together hundreds of participants and was a historical milestone in the advancement of the agenda on the implementation of public policies (D'ÁVILA; SALIBA, 2017).

2.2.1 Mental Health Policies

In the history of psychiatry there are centuries of interventions, for in Ancient Greece 2,000 years B.C. madmen possessed "divine powers." In the Middle Ages, "demons" spent their days chained and exposed to cold and hunger. In the twentieth century, madmen, when they presented a different behavior and in the nineteenth century with Philippe Pinel madness became a medical issue being seen as a disease and that should be treated. In the twentieth century with Freud, psychoanalysis becomes popular around the world and imposes itself as a landmark in mental health (FIGUEIREDO, 2019).

In 1852 was inaugurated in Brazil the Hospício Pedro II in Rio de Janeiro, the first institution that by imperial decree turned completely to the treatment of the insane of the capital of the country. In 1901 in Franco da Rocha, São Paulo was built the great Juqueri Asylum with the aim of collecting and treating therapeutically the alienated recovering them for work. In 1936 the first lobotomy surgery in Brazil was performed. From 1950 to 1970 the lack of beds in hospices allowed the expansion of private beds.

In the 60s, Franco Basaglia in Italy questioned the existence of psychiatric hospitals. In Brazil, with the law prohibiting new hospices in 1978, the day hospital and psychiatric beds in general hospitals emerged, among other measures. The Brazilian Health Reform initiated with the theme



Health and Democracy in 1970 evolved with great mobilization that culminated in the National Conferences on Mental Health in 1987, 1992 and 2001.

The National Conferences on Mental Health held in 1992 and 2001 were important in advancing the training of human resources, in addition to financing and social control, since asylum institutions should be replaced, with a focus on comprehensive care, through work in interdisciplinary teams. This new space had as its proposal to expand and diversify the Psychosocial Care (NATIONAL CONFERENCE OF MENTAL HEALTH, 2001).

With the implementation of 500 CAPS in Brazil in 2004 when the First Brazilian Congress of Psychosocial Care Centers (CAPS) was held, this important milestone was celebrated (BRAZILIAN CONGRESS OF PSYCHOSOCIAL CARE CENTERS, 2004). In 2018 there were almost 2000 thousand CAPS according to reports from the Ministry of Health. Another event during this event was the creation of the School of Supervisors with the objective of training professionals to develop an institutional and also clinical work in the consolidation of each CAPS.

Other important advances such as the regulation of Therapeutic Residential Services in 2000, the institution of psychosocial rehabilitation aid for patients with mental disorders discharged from hospitalizations, the "back home" program in 2003 and in 2011 through ordinance 3088 the creation of the Psychosocial Care Network (RAPS), were decisive for the redirection of mental health care.

The process of transformation of psychiatric care is dynamic and brings some conflicts due to its complexity, above all because it goes beyond the field of health. In this amplitude, there are many tensions and crossings that evidence different elements, one of them being gender, among others.

2.2.2 Integrality in Health

When we talk about public health policies from the SUS, it is mandatory that universality, equity and integrality be highlighted as doctrine.

At the same time, the principle of integrality presupposes the articulation of health with other public policies, as a way to ensure an intersectoral action between the different areas that are related in the health and quality of life of individuals. However, through the theoretical tools proposed by Foucault (1995) in terms of axes of investigation, discourse, power and subject, the social field should be treated as a problem, and not as evidence. Thus, Foucauldian tools allow us to analyze how certain practices were historically producing ruptures, demarcations of discursive fields and knowledge about subjects, from exercises of power. Therefore, it is not a matter of operating with the concept, but of looking at how the notions are constructed, not taking them as an independent reality (FOUCAULT, 1995).

Although mental disorders cause just over 1% of mortality, they account for more than 12% of disability due to disease. This percentage increases to 23% in developed countries. Of the ten main



causes of disability, five of them are psychiatric disorders, with depression accounting for 13% of disabilities, alcoholism for 7.1%, schizophrenia for 4%, bipolar disorder for 3.3% and obsessive-compulsive disorder for 2.8% (ANDRADE, MALUF, 2017).

In 2017, SESA recorded 724 compulsory hospitalizations for mental health reasons. Of these, 684 were for the use of PAS, which allows us to conclude that, although hospitalizations for mental and behavioral disorders in general are in a downward trend, the same is not true for hospitalizations for mental and behavioral disorders due to the use of alcohol and other PAS (ESPÍRITO SANTO, 2018).

Ruben Mattos (2004), places integrality as one of the main objectives of the health movement and responsible for the formulation of the concept of health in force since the Constitution of 1988. It is emphasized that, from integrality, the field of health in Brazil articulates other areas of knowledge beyond Medicine, since these other areas of knowledge are considered dimensions of the subject, and not only the biological one.

2.3 COVID-19 AND PUBLIC HEALTH POLICIES

The first notification about Covid-19 to the World Health Organization (WHO), happened on December 31, 2019 by China. Following a meeting of the Emergency Committee, WHO declared a Public Health Emergency of International Importance on 30 January 2021, and a pandemic on 11 March 2020 (WHO, 2020 *apud* LIMA *et al.*, 2020).

At the time, on March 11, more than 118,000 cases were reported in 114 countries, and there were nearly 4,300 deaths. The number of those infected had increased 13-fold, three times as many countries had citizens affected, and more significant increases were expected in the following weeks. The Director-General of the WHO, Thedos Ghebreyesus, reported that this was the first pandemic declared by the action of a coronavirus and, at the same time, it was a situation that could be controlled with effective actions: "If countries detect, test, treat, isolate, track and mobilize people, those with few cases can prevent these cases from becoming clusters of cases and these conglomerates from leading to community transmission" (GHEBREYESUS, 2020 apud LIMA et al., 2020).

In his speech, Ghebreyesus stressed that the challenge for countries is to find the balance between protecting health, minimizing social and economic impacts and respecting human rights, and recommended that actions be guided by four stages: first, to prepare, communicating to society about the risks and about the proper protection; second, detect, protect and treat all cases and contact tracing; third, to reduce contagion; Finally, to learn and innovate. Two weeks after the announcement, the number of cases and deaths had nearly quadrupled. Part of this aggressive advance of the pandemic is due to the delay of countries in adopting measures to control the contagion, especially social isolation, in which people remain in confinement and avoid contact with other people. This measure is critical



because the incubation period of the new coronavirus can be quite long – up to fourteen days – and during this time the infected individual may be asymptomatic, or with very mild symptoms and thus transmit the virus without being aware of being a carrier.

Thus, on February 3, 2020, the Brazilian Ministry of Health declared a Public Health Emergency of National Importance (ESPIN) due to Covid-19 (BRASIL, 2020). The Covid-19 pandemic as it is declared comes with new and old health concerns. Previous vulnerabilities are aggravated and the transmission of the virus surprises everyone on a fast and large scale.

The first case of the disease in Brazil was confirmed in São Paulo on February 26, but the pandemic had required repatriation actions of 34 Brazilians who were in China and had returned to the country a fortnight earlier. On the day of the pandemic's declaration, March 11, Brazil had 52 confirmed cases and 907 suspected cases. The curve of the pandemic in Brazil has evolved rapidly: according to the Covid-19 BR Observatory, the number of deaths in mid-April doubled every 9 days and 14 hours (PIERRE, 2020 apud LIMA, et al. 2020, p.7).

In Brazil, with the cultural diversity, the economic inequality and the great variability of health equipment, the challenges that permeate Public Health are amplified. "Since the beginning of the SARS-CoV-2 pandemic, there has been a growing tension caused, among other factors, [...] causing severe epidemiological impact and equivalent sociocultural and political developments" (VASCONCELOS-SILVA, CASTIEL, 2020, p. 2).

The lack of investments and the precariousness of the Unified Health System (SUS), after the inclusion of the new fiscal regime in the scope of the Fiscal Budget and Social Security of the Union, through the approval of Constitutional Amendment 95, have been putting to the test the organization and structure of the Brazilian system of surveillance and assistance (LACAZ *et al.*, 2019 *apud* BARROSO *et al.*, 2020).

Concern about mental health has an intensified level of concern during a social crisis. The Covid-19 pandemic is characterized as such, because in the face of the international public health problem it is considered as the greatest health crisis worldwide (WHO, 2020 apud FARO et al., 2020). The Ministry of Health of Brazil (2020) pointed out that an event of this size can cause problems in society, including psychological and social disorders, presenting difficulties in the ability to cope broadly.

It is a fact that a significant fraction of individuals with suspected Covid-19 demand immediate assistance, thereby overloading health services. This sudden demand in health services influences all levels of care, especially the tertiary (hospital, intensive care), producing a chain reaction of crisis in public health, going through the international scope, including developed countries (WHO, 2020 apud *FARO* et al., 2020).

When it comes to mental health, it's important to understand that the effects of a pandemic go beyond the death toll. Faced with the whole scenario of weakening and collapse of health services, the



exhaustion and overload of health professionals, and especially the most effective method of prevention of the disease, which is social distancing, shakes the mental health of individuals (BROOKS *et al.*, 2020 apud *FARO* et al., 2020). Thus, it is understood how pertinent it is to ensure society the right to adequate mental health care.

3 FINAL CONSIDERATIONS

It is concluded that public policies in the present day are inseparable from society, because it is through them that constitutional rights are concretized in the daily life of the population, much more than that, they are mechanisms that lead to the Welfare State.

It is hoped that this work can contribute to a broader evaluation of the context in public health policies, especially mental health. This article had the opportunity to gather scientific knowledge, exposing considerations for a greater understanding of public health policies as well as the scenario triggered by Covid-19.

Given the possibility that an epidemic could become a health catastrophe, and the fact that the new coronavirus is spread by people who are still asymptomatic and there are no clear perspectives as to when it will be possible to control the spread, we cannot have an adaptation to this notion of catastrophe, because the pandemic presents itself with different characteristics in countries.

The current scenario requires special attention from the government, and even so, it will only be properly known when the pandemic period passes. The adequate investment in health care and, mainly, in science is the bottleneck that must be prioritized, so that this period is minimized and that health professionals and public power are trained to deal with the challenges imposed by this event.

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