



4TH INTERNATIONAL CONFERENCE ON PRIMARY HEALTH CARE/FAMILY HEALTH

3RD NATIONAL EXHIBITION ON FAMILY HEALTH PRACTICES

3RD NATIONAL CONTEST ON FAMILY HEALTH EXPERIENCES

**30 years of Alma Ata
20 years of Unified Health System
15 years of Family Health
“Changing Brazilian’s Health”**

*Aug. 5th to Aug. 8th, 2008
Ulysses Guimarães Convention Centre
Brasília/DF, Brazil*

This technical note presents and justifies the attainment of the above events.

In 2008, Brazil has reasons to celebrate its health status: after 20 years since the establishment of the Unified Health System (SUS) and 15 years of the implementation of the Family Health (FH), more than 88 million Brazilians are followed closely by 28,000 Family Health Teams and 16,000 Family Oral Health Teams in most of the Brazilian municipalities.

In 2006, the National Primary Health Care Policy (PNAB) in conjunction with the Pact for Health in its three branches: Pact For Life, Pact in defense of the SUS and Pact of governance, reaffirmed the commitment of the Brazilian government in the expansion and consolidation of the Health Care Network in SUS on the basis of a broad base of Family Health Teams (FHT) linked to the population of adscript territories.

The Family Health is a permanent strategy for the consolidation of the Unified Health System, which was reaffirmed at the 13th National Conference on Health in 2007.

The Family Health Teams are multidisciplinary and work in Primary Care Units (UBS). They are responsible for monitoring a specific number of families inhabiting delimited geographical areas. These teams work with various aspects of health promotion, prevention, restoration and rehabilitation of frequent diseases and disorders. This design goes beyond the limits previously established for the primary care in the context of SUS, resulting in a significant improvement in health care and in the quality of life of the Brazilian people, which reflects directly on the organization of the whole health care system.

In recent years, experiences in the three governance levels of the SUS have been accumulated and recorded by the health services and educational and research institutions.

The **3rd National Exhibition on Family Health Practices** has the purpose of uniting efforts to systematize the Brazilian configuration to qualify Primary Health Care. The diversity of lessons learned and registered as experience reports or studies performed by groups of professionals, managers and researchers will certainly be an important stimulus to the debate of the limits and possibilities of Primary Care / Family Health (AB/SF) as pivotal structures of the health care organization in the SUS.

More than 1500 articles are expected in two forms of presentation: oral or posters, addressing the following theme areas: Assistance in PHC/Family Health, Health Promotion in PHC/Family Health, Health Surveillance in the PHC/Family Health, Technologies of Health Assistance in PHC /Family Health, Procedures for Education and Training in Health in PHC /Family Health, Health Management in PHC / Family Health, Citizenship and Social Control in PHC /Family Health, Health Care Integrality in PHC/Family Health, Health Care Inter sector and Evaluation and Monitoring of PHC/Family Health.

The **3rd National Contest on Family Health Experiences** will award articles enrolled in the 3rd National Exhibition of Production on Family Health in the following categories: Experience Report of Communities Health Agents , Experience Report of Family Health Teams, Experience Reports of Municipal Management, Experience Report of State Management, and studies and researches in the PHC/FH.

Three International Conferences on Primary Care have already been organized. The first was held in Belo Horizonte, Brazil, from December 11th to December 14th, 2005, highlighting the “Primary Health Care in Major Urban Centers”. The second occurred in Fortaleza, CE, from September 3th to September 05th, 2006, focusing on “Building a more comprehensive Primary Health Care”. The third one was in Recife, PE from December 13th to December 15th, 2007, emphasizing the “Expansion with quality and valorization of results in APS / Family Health”.

The **4th International Conference on Primary Health Care / Family Health** contemplates the exchange of successful experiences of primary care models developed in other countries. These exchanges would lead to new ways on how to improve the Primary Care system in Brazil and contribute with new ideas and processes, benefiting all involved. This year we celebrate 30 years of Alma Ata and, beginning with the International Conference 30/15 in Buenos Aires: "From Alma Ata to the Millennium Declaration — Facts Rights and Reality" held in August 2007, we have opened up the debate about the process of strengthening and renewing of the Primary Health Care as a strategy that allows better health and therefore promotes equity in health. The present event will provide continuity for these actions and discussions that will enrich the definitions of health strategies to be outlined in the near future.

Six thousand participants are expected to attend the events with target audience being: Health Ministers from all regions, Representatives from International Agencies, Technical and Experts from International Organization, Health Authorities, Associations and Scientific Societies, Teachers, Researchers and Students from Educational Institutions of Health, Technical Teams from the three spheres of management, Municipal and State Health Coordinators, Community Health Agents, the nursing Staff, dental office Assistants, Oral hygiene Technicians, Nurses, Doctors, Dentists and other professionals who constitute various teams of Family Health.

Key Concepts:

Family Health Team (FHT): is composed of a doctor, one nurse, one or two nursing assistants, and five to six community health agents, being accountable for a maximum of 4,000 people.

Oral Health Team: 'mode 1' is composed of a surgeon-dentist and a dental office assistant, (ACD), while 'mode 2' is composed of a surgeon-dentist, a dental office assistant, (ACD) and a dental hygiene technician (THD). In both cases, the work developed is integrated to one or two FHT.