Humanization in the Unified Health System (SUS): Advances, Challenges and Perspectives

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Summary

The humanization of health care in the Unified Health System (SUS) is one of the fundamental pillars for the consolidation of more equitable, ethical and effective care. The National Humanization Policy (PNH), established by the Ministry of Health in 2003, aims to transform care and management practices, valuing the subjects involved in the health-disease process. This article discusses the principles of humanization in the SUS, its relevance in improving the quality of health services, as well as the challenges faced for its full implementation. Through a theoretical review and critical analysis, it is evident that humanization is essential to guarantee the right to health in a comprehensive and respectful manner, although it still encounters structural, cultural and political barriers to its consolidation.

Keywords: Unified Health System, Humanization, National Humanization Policy, Health Care, Public Health.

Abstract

The humanization of health care in the Unified Health System (SUS) is one of the fundamental pillars for the consolidation of more equitable, ethical and effective care. The National Humanization Policy (PNH), established by the Ministry of Health in 2003, aims to transform care and management practices, evaluating the subjects involved in the health-disease process. This article discusses the principles of humanization in the SUS, its relevance in improving the quality of health services, as well as the challenges faced for its full implementation. Through a theoretical review and critical analysis, it is evident that humanization is essential to guarantee the right to health in a comprehensive and respectful manner, although it still encounters structural, cultural and political barriers to its consolidation.

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1. Introduction

The 1988 Federal Constitution established health as a right for all and a duty of the State, with the **Unified Health System (SUS)** being the main structure to guarantee this right in Brazil. Since its creation, the SUS has faced the challenge of ensuring not only universal access, but also quality and comprehensive care.

In this context, the **National Humanization Policy (PNH)** was created in 2003 with the aim of promoting changes in care and management practices in the SUS, valuing the

subjects – users, workers and managers – as protagonists of the care process.
This article aims to reflect on the advances and obstacles of humanization in the SUS, as well as highlight the importance of more ethical, welcoming and resolute practices in the field of public health.

2. The National Humanization Policy: foundations and guidelines

The National Humanization Policy is based on ethical and political principles that seek to reconfigure interpersonal and institutional relationships in the SUS. Its pillars are:

- **Reception:** qualified listening to users' demands and organization of services based on their needs;
- **Participatory management and co-management:** inclusion of workers and users in decision-making processes;
- **Ambience:** concern with the physical and relational space of health services;
- **Bond and co-responsibility:** valuing the relationship between professionals and users;
- **Appreciation of work and health workers.**

The PNH aims to be transversal, that is, it must be present at all levels of care and in all SUS policies, not being an isolated action, but a guideline for permanent action.

3. Importance of humanization in the SUS

Humanization is an essential instrument to guarantee the **quality of health care,** promoting greater adherence to treatment, reducing conflicts and increasing satisfaction among both users and health workers.

Furthermore, humanization seeks to combat dehumanizing practices, such as neglect, mechanized care, obstetric violence and institutional racism. By strengthening the protagonism of individuals, the PNH contributes to the empowerment of citizens and the democratization of relationships within the SUS.

4. Challenges for the implementation of humanization

Despite the relevance of the PNH, its implementation faces numerous challenges, such as:

- **Precarious working conditions** and overload of professionals health;
- **Lack of adequate infrastructure,** especially in peripheral regions;
- **Discontinuity of public policies,** often interrupted by management changes;

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- **Resistance to change on the part of managers and professionals,** accustomed to biomedical and hierarchical models of care;
- **Bureaucratization and fragmentation of services,** making access and delivery difficult resolution of services.

Overcoming these obstacles requires continuous investment in training, professional development and strengthening of social participation.

5. Final considerations

The humanization of care and management in the SUS is an ethical, political and technical guideline that is essential for the consolidation of a fairer, more welcoming and efficient public health system. The PNH represents an important strategy for promoting changes in care practices; however, its full implementation still depends on political will, adequate resources and collective engagement.

It is necessary to reaffirm the centrality of the human being in the health-disease-care process, combating exclusionary practices and promoting listening, acceptance and respect for diversity. Only in this way will it be possible to guarantee the right to health in its entirety, as provided for in the Brazilian Constitution.

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