Health Councils: Effective Management for Social Organizations in Goiás and Mato Grosso do Sul Municipalities

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Objectives: This article has two main objectives. The first is to examine the effectiveness of Municipal Health Council participation in health policy administration, and the other is to evaluate their potential in the process of restructuring health care according to a family health strategy.

Methodology: The study was carried out in nine municipalities, of which seven were in the state of Goiás and two in Mato Grosso do Sul. Questionnaires were applied to user representatives in the Council executive, and a document review was conducted of constitutive and restructuring bylaws, internal regulations and resolutions taken during 2004 and 2005.

Results: The authors begin by explaining what Municipal Health Councils are; their origins, composition and current situation in Brazil. They analyze the composition of the Councils, which are civic associations represented by the users, and the regulations issued from Council meetings. The authors point out some of the problems arising within the Councils, such as under-representation of workers in three of the Councils studied. Three others are led by presidents who also serve as health secretaries of their municipalities, which could compromise the autonomy of the Councils. They observed little councilor turnover, the majority being in their second or third terms, or even up to their fourth term. The authors see this as a failure of democracy and a distancing between representatives and their constituencies. According to the authors, the Councils have little impact on the restructuring of health services.

Conclusions: Health Councils operating under the Brazilian National Health System (SUS) face an institutionalization process that is of little help and restricts direct participation by the people because, among other reasons, participatory management practices are recent and fragile. The authors propose that new stakeholders should be included in discussions on medical services, allowing legitimate decisions, consistent with SUS (National Health System) discourse, to be made.