

The Brazilian Psychiatric Reform: paths and challenges

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THE BRAZILIAN PSYCHIATRIC REFORM was one of the most expressive transformations in the field of health in the country in the last four decades. Inspired by thinkers who were critical of the prevailing psychiatric care model and by experiences with innovative care practices in the field, at national and international levels, the anti-asylum struggle mobilized numerous actors in academia, public agencies, health services and social movements. The democratization of society and the health reform in the 1980s spurred ideas and initiatives for changes in the field, as well as being favored by them, given the relevance of the anti-asylum movement in the context of the processes of struggle for the expansion of rights and the notion citizenship.

The 1988 Constitution and the creation of the Unified Health System (SUS), based on the principles of the right to health, universality, and comprehensive care, would offer the legal and institutional bases for advances in the field. The necessary transformations, however, transcended the administrative-formal scope, provoking profound changes in the conceptions of madness, in the practices to deal with the different conditions classified as mental illness or psychological suffering and, above all, in the recognition of full rights of the people identified with those conditions (within the framework of social and human rights). Such changes would require intense social mobilization, occupation of new spaces and confronting economic and political interests.

Over 30 years of the implementation of the SUS, initiatives for dehospitalization have advanced, for the expansion of new non-hospital care strategies – such as the Psychosocial Care Centers (Caps) –; and programs aimed at rescuing emotional ties and integrating people with mental disorders into families, communities and territories, such as the ‘Back home’ program. Care practices have been transformed, in search of a displacement of a process of social medicalization¹ to incorporate other forms of promoting mental health, for example, with the appreciation of the arts, music, and culture. People have also been transformed, who now occupy their place of reaction to the exercise of power practiced in total institutions².

The reflection on these transformations is timely and fundamental, especially when advances achieved over decades are put at risk, sometimes, due to political-economic interests and setbacks in terms of understanding about science and health-disease processes. They are also especially important in the scenario of the Covid-19 pandemic, which

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puts the topic of mental health and isolation at the center of the international debate.

The strengthening of the SUS to deal with the impacts of the Covid-19 pandemics on the mental health of the population may seek, in the paths taken by the Brazilian Psychiatric Reform – and depicted here – , good directions for community and territorial based care, promoting rights and sensitive to the needs of the population.

Collaborator

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