

3-30-2009

Autonomy as a Central Category in the Concept of Health Promotion

P Fleury-Teixeira

F A. Vaz

F C. De Campos

J Alvarez

R A. Aguiar

See next page for additional authors

Follow this and additional works at: https://digitalrepository.unm.edu/lasm_cucs_en

Recommended Citation

Fleury-Teixeira, P; F A. Vaz; F C. De Campos; J Alvarez; R A. Aguiar; and V Oliveira. "Autonomy as a Central Category in the Concept of Health Promotion." (2009). https://digitalrepository.unm.edu/lasm_cucs_en/157

This Article is brought to you for free and open access by the Latin American Social Medicine at UNM Digital Repository. It has been accepted for inclusion in English by an authorized administrator of UNM Digital Repository. For more information, please contact disc@unm.edu.

Authors

P Fleury-Teixeira, F A. Vaz, F C. De Campos, J Alvarez, R A. Aguiar, and V Oliveira

DOCUMENTO CUCS # 52B

C&S2008(Supl2)Fleury-Teixeira

Fleury-Teixeira P, Vaz FA, De Campos FC, Álvarez J, Aguiar RA, Oliveira V. Autonomia como categoría central no conceito de promoção de saúde. [Autonomy as a Central Category in the Concept of Health Promotion.] Ciencia & Saúde Coletiva (Rio de Janeiro, Brasil) 2008 Diciembre; 13 (Sup 2): 2115-2122.

Objectives: To describe the central concepts of health promotion in primary care in Brazil, through a review of case studies.

Methodology: Theoretical review, conceptual and empirical understanding of health promotion. A total of 12 studies were reviewed. These were conducted in four regions of Rio de Janeiro, Brazil, during 2005.

Results: The authors found that health promotion is defined as a series of actions that increase or improve individual health. These actions are independent of any previous pathology, which shows that the people control their own health care. Their theoretical support is based on the search of wellness and disease prevention through primary health care. Their practice is based on the hegemonic medical model. In this lies the neoliberal ideology that recognizes autonomy and apparent freedom of individuals as their core concepts. But this does not mean the lack development of capabilities for defining and carrying out collective actions for improving health conditions. These actions are carried out through social interaction between individuals that define social groups. Such interactions have been identified by the studies reviewed in several areas: networks of care and specific protection; in the respect for the diversity of behaviors; in social inclusion; in popular participation and community involvement to increase access to goods, services and health education.

Conclusions: Autonomy is the central concept of health promotion. It is a positive, comprehensive and protective health action. The concepts presented are applicable to the practice of primary health care. The conclusion is that collective actions promote free and active participation among individuals.