



**II SIMPÓSIO INTERNACIONAL  
DE POLÍTICAS PÚBLICAS E  
DESENVOLVIMENTO SUSTENTÁVEL**

**Conectando Metas Globais:  
ODS, Políticas Públicas,  
Desenvolvimento Local e  
Movimentos Sociais**

**ANAIS DO EVENTO**

REALIZAÇÃO



**EMESCAM**

**FAPES**  
FUNDAÇÃO DE APOIO À PESQUISA E INOVAÇÃO DO ESPÍRITO SANTO

APOIO

GOVERNO DO ESTADO  
DO ESPÍRITO SANTO  
*Secretaria da Ciência, Tecnologia,  
Inovação e Educação Profissional*



**CNPq**



**SIMPÓSIO INTERNACIONAL DE POLÍTICAS PÚBLICAS E  
DESENVOLVIMENTO SUSTENTÁVEL**

**November 21 to 23 2024**

**EMESCAM**

**Comissão de organização**

**SIMPOSIUM PRESIDENT**

Profa. Dra. Italla Maria Pinheiro Bezerra

**ORGANIZING COMMITTEE PRESIDENT**

Prof. Dr. Alan Patrício da Silva

**SCIENTIFIC COMMITTEE PRESIDENT**

Prof. Dr. Fernando Rocha Oliveira

**MARKETING COMMITTEE PRESIDENT**

Prof. Dr. César Albenes de Mendonça Cruz



**FUNDING**



**GOVERNO DO ESTADO  
DO ESPÍRITO SANTO**  
*Secretaria da Ciência, Tecnologia,  
Inovação e Educação Profissional*



Simpósio Internacional de Políticas Públicas e  
Desenvolvimento Sustentável (2. : 2024 :  
Vitória, ES)

Anais II Simpósio Internacional de Políticas  
Públicas e Desenvolvimento Sustentável [livro  
eletrônico] : conectando metas globais ODS,  
políticas públicas, desenvolvimento local e  
movimentos sociais. -- 2. ed. -- Vitória, ES :  
CDH, 2024.

PDF

Vários autores.

Vários colaboradores.

Bibliografia.

ISBN 978-65-981431-2-1

1. Desenvolvimento econômico - Aspectos sociais
2. Desenvolvimento sustentável 3. Objetivos de  
Desenvolvimento Sustentável (ODS) 4. Movimentos  
sociais - Brasil 5. Políticas públicas I. Título.

25-246522

CDD-338.9

Índices para catálogo sistemático:

1. Desenvolvimento sustentável : Economia 338.9

Aline Grazielle Benitez - Bibliotecária - CRB-1/3129



## II SIMPÓSIO INTERNACIONAL DE POLÍTICAS PÚBLICAS E DESENVOLVIMENTO SUSTENTÁVEL

# Conectando Metas Globais: ODS, Políticas Públicas, Desenvolvimento Local e Movimentos Sociais

Thank you to our supporters and sponsors



## **FACULTY ORGANIZING COMMITTEE**

Prof. Dr. Alan Patricio Da Silva

Profa. Dra. Beatriz de Barros

Souza

Prof. Dr. César Albenes de Mendonça

Cruz Profa. Dra. Fabiana Rosa Neves

Smiderle Prof. Dr. Fernando Rocha

Oliveira

Profa. Dra. Italla Maria Pinheiro Bezerra

Profa. Dra. Janice Gusmão Ferreira de Andrade

Profa. Dra. Luciana Carrupt Machado Sogame

Profa. Dra. Monica Cattafesta

Prof. Dr. Pitiguara de Freitas Coelho

Profa. Dra. Roberta Ribeiro Batista

Barbosa Profa. Dra. Tassiane Cristina

Morais

Prof. Dr. Paulo André Stein Messetti

## **TECHNICAL COMMITTEE:**

Laysla Maria de Oliveira dos

Santos Nátally Ferreira Costa

Lampier Valéria Lopes Costa

Ribeiro

## **STUDENT ORGANIZING COMMITTEE**

Amanda Pizetta

Ana Beatriz Trindade

Ramalho Ana Paula Bayerl

Ramiro

Ana Paula da Silva Oliveira

Áurea Barcelos Sperandio

Beatriz Faustini Baglioli de

Loyola Brunella Bissoli Margon

Caio Badiani prando

Daniela Marques

Freire Danilo Brito

Sousa Eloiza Toledo Bauduina

Giovanna Werneck Leite

Isadora Mantovani Freitas

Jamilly Nogueira de Oliveira João Pedro Frizzeira  
Lopes Jordana Cansian Fioreze Júlia Falqueto de  
Souza

Julia Mayse Soares Gonçalves

Jussara de Azevedo Pereira

Karina Brandenburg Vieira da

Silva Lais de Oliveira Traichel

Luiza Norbim Rones

Lyvia Elena Klawa

Cau Maressa da

Silva Felici

Maria Clara Sossai de Almeida

Maria Eduarda Rust Barreta Cavalcante

Maria Gabriella Vasconcelos Gava

Santos Maria Victoria Cardoso Reis

Mariana Rocha Medici

Mariana Santos de Sá

Galina Milena Martins

Pinheiro

Nathalya das Candeias Pastore Cunha

Pamela Rodrigues Pereira

Ramona Dutra Uliana

Sabrina Lamas Costa

## **CREDENTIALING COMMITTEE:**

Maria Gabriella Vasconcelos Gava

Santos Nathalya das Candeias Pastore

Cunha Pamela Rodrigues Pereira

Sabrina Lamas Costa

## **SCIENTIFIC PRESENTATION COMMITTEE:**

Flaviane Cristina de Oliveira Ferreira  
Delanos

Laércio da Silva Paiva Luiz Carlos de  
Abreu

Luiz Vinícius de Alcantara Sousa



**TABLE OF CONTENTS**

1. THE APPLICATION OF ARTIFICIAL INTELLIGENCE IN PUBLIC HEALTH: PROMOTING EFFICIENCY IN CARE IN ALIGNMENT WITH SDG 3
2. THE ASSOCIATION OF SOCIOECONOMIC FACTORS WITH SELF-MEDICATION: A SYSTEMATIC REVIEW
3. PERSONALIST BIOETHICS
4. DENGUE AND SUSTAINABLE DEVELOPMENT: FACING THE EPIDEMIC THROUGH PUBLIC POLICIES AND SOCIAL INTERVENTIONS IN BRAZIL
5. THE CONFIGURATION OF THE STATE'S ROLE IN HEALTHCARE FOR USERS WITH LONG COVID.
6. THE IMPLEMENTATION OF THE MUNICIPAL FORUM FOR INTEGRATIVE AND COMPLEMENTARY PRACTICES IN THE MUNICIPALITY OF VITÓRIA: AN EXPERIENCE REPORT
7. INTEGRATIVE COMMUNITY THERAPY AS A POSITIVE MENTAL HEALTH STRATEGY: AN EXPERIENCE REPORT
8. INTEGRATED APPROACH IN THE PSYCHOSOCIAL REHABILITATION OF A PATIENT WITH SCHIZOPHRENIA: CASE REPORT
9. HEALTHCARE ACCESS AND INEQUALITY: A LOOK AT IMMIGRANT COMMUNITIES IN THE USA FROM BRINKERHOFF (2024)
10. HEALTHCARE ACCESS AND INEQUALITY: A LOOK AT IMMIGRANT COMMUNITIES IN THE USA FROM BRINKERHOFF (2024)
11. TRAFFIC ACCIDENTS INVOLVING CHILDREN: EDUCATIONAL PRACTICES FOR THE USE OF SAFETY SEATS
12. CHILD TRAFFIC ACCIDENTS: KNOWLEDGE AND EDUCATIONAL PRACTICES OF NURSES
13. THE CONTRIBUTION OF THE DISCHARGE MANAGEMENT OFFICE TO REDUCE HOSPITALIZATION TIME IN A HOSPITAL IN THE METROPOLITAN REGION OF THE STATE OF ESPÍRITO SANTO: AN EXPERIENCE REPORT
14. FAMILY FARMING AND HEALTH POLICIES: THE STATE'S ROLE IN PROTECTION AGAINST PESTICIDES
15. REACHING LDL-CHOLESTEROL GOALS IN A REFERENCE SERVICE IN BRAZIL'S PUBLIC HEALTH SYSTEM: AN ANALYSIS AFTER 2 YEARS
16. ANALYSIS OF THE STATE'S ROLE IN THE HEALTH TREATMENT OF PEOPLE LIVING WITH HIV/AIDS
17. COMPARATIVE ANALYSIS OF ARBOVIROSIS EPIDEMIOLOGICAL BULLETINS: EVOLUTION BETWEEN 2020 AND 2024 IN THE STATE OF CEARÁ



18. PEDAGOGICAL PRACTICES AND THEIR INFLUENCE ON THE ACCESS AND RETENTION OF STUDENTS WITH DISABILITIES IN THE EDUCATIONAL SYSTEM: AN INTEGRATIVE REVIEW
19. ASSOCIATION OF CLINICAL CHARACTERISTICS AND THE HOSPITALIZATION PROCESS WITH THE FUNCTIONALITY OF CRITICALLY ILL PATIENTS LESS THAN TWO YEARS AFTER DISCHARGE FROM THE INTENSIVE CARE UNIT
20. ASSOCIATION BETWEEN OBESITY AND LIFE CHARACTERISTICS OF WOMEN IN VITÓRIA/ES
21. PHYSIOTHERAPEUTIC CARE FOR HOSPITALIZED CHILDREN: AN EXPERIENCE REPORT
22. SELF-IMAGE IN THE PRE- AND POST-OPERATIVE PERIODS OF PATIENTS WITH ADOLESCENT IDIOPATHIC SCOLIOSIS UNDERGOING ARTHRODESIS
23. SELF-PERCEPTION OF CAREGIVERS OF ELDERLY PEOPLE ASSISTED BY A FAMILY HEALTH UNIT IN VITÓRIA – ES
24. ASSESSMENT OF RESPIRATORY FUNCTION IN NEWBORNS FROM VAGINAL AND CESAREAN DELIVERIES IN A PUBLIC MATERNITY HOSPITAL IN GREATER VITÓRIA
25. BENEFITS OF THE PULMONARY REHABILITATION PROGRAM ON PATIENT WELL-BEING AND QUALITY OF LIFE
26. CHARACTERIZATION OF EXCLUSIVE BREASTFEEDING, BREASTFEEDING, AND EARLY FOOD INTRODUCTION IN CHILDREN UNDER 6 MONTHS IN THE SOUTHEAST REGION: AN ANALYSIS OF THE 2019 PNS
27. ELECTRONIC CIGARETTES AND ENVIRONMENTAL POLLUTION: IMPACTS ON HEALTH AND SUSTAINABILITY
28. FETAL SURGERY FOR MENINGOMYELOCELE CORRECTION: AN INTEGRATIVE LITERATURE REVIEW
29. AWARENESS ABOUT TOBACCO USE FOR ADOLESCENTS IN A PUBLIC SCHOOL IN VITÓRIA-ES: AN EXPERIENCE REPORT
30. PHYSICAL ASSESSMENT CRITERIA FOR THE DIAGNOSIS OF ADOLESCENT IDIOPATHIC SCOLIOSIS: AN INTEGRATIVE REVIEW
31. CHALLENGES IN ACCESSING TREATMENT FOR PATIENTS WITH RARE DISEASES
32. SENSORY DESIGN AND SUSTAINABILITY: AN ESSENTIAL CONNECTION
33. RACIAL AND SOCIOECONOMIC INEQUALITIES IN BREAST CANCER IN BRAZIL: IMPACT ON THE MORTALITY OF BLACK WOMEN
34. WAGE INEQUALITY BETWEEN MEN AND WOMEN IN THE LABOR MARKET
35. DETERMINANTS OF IMMIGRANTS' MENTAL HEALTH: A PRELIMINARY REVIEW
36. RIGHT TO HEALTH



37. RIGHTS OF THE LGBTQIAP+ POPULATION: ACHIEVEMENTS, BARRIERS TO ACCESSING RIGHTS, AND PERSPECTIVES FOR AN INCLUSIVE SOCIETY IN BRAZIL
38. SPATIAL DISTRIBUTION OF ELDERLY VICTIMS OF STROKE TREATED BY SAMU 192/ES
39. SPATIAL DISTRIBUTION AND THE INFLUENCE OF SEX ON PSYCHIATRIC EMERGENCIES TREATED BY SAMU 192 IN ESPÍRITO SANTO
40. BETWEEN FALLS AND RESCUES: A LOOK AT THE ELDERLY TREATED BY SAMU 192/ES AND THE CHALLENGES OF HEALTH POLICY
41. POPULATION AGING: ARE THERE DIFFERENCES BETWEEN THE MACRO-REGIONS OF BRAZIL?
42. EVOLUTION OF DENTAL PRODUCTION IN THE SUS: ANALYSIS OF ORAL HEALTH ACTIONS AND PROCEDURES IN ESPÍRITO SANTO (2013-2023) WITH DATA FROM DATASUS
43. EVOLUTION OF HEALTH COSTS WITH HOSPITALIZATIONS OF ELDERLY PEOPLE IN THE STATE OF ACRE, BRAZIL (2018-2023)
44. EVOLUTION AND DIAGNOSIS OF MPOX IN CEARÁ: AN UPDATED OVERVIEW
45. RISK FACTORS FOR PREECLAMPSIA: A PATHOLOGICAL, CLINICAL, AND SOCIOECONOMIC ANALYSIS
46. VITAMIN B12 DEFICIENCY: A REVIEW OF THE CAUSES OF COBALAMIN DEFICIENCY IN THE ADULT POPULATION
47. ADDICTIONS AND MENTAL HEALTH: THE INFLUENCE OF GAMBLING ON ADULTS
48. OBSTACLES IN THE HEALTH OF INDIVIDUALS LIVING WITH SYSTEMIC LUPUS ERYTHEMATOSUS IN BRAZIL
49. THERAPEUTIC MEASURES USED IN THE MANAGEMENT OF AMYOTROPHIC LATERAL SCLEROSIS: AN INTEGRATIVE REVIEW
50. ANABOLIC ANDROGENIC STEROIDS: AN INTEGRATIVE REVIEW OF THE NEGATIVE EFFECTS IN ADULTS
51. THE IMPACTS OF CIRCADIAN RHYTHM ALTERATIONS ON THE QUALITY OF LIFE OF WORKERS
52. EPIDEMIOLOGICAL PROFILE OF GESTATIONAL SYPHILIS IN BRAZIL: AN INTEGRATIVE REVIEW
53. MOTIVATIONAL FACTORS FOR THE PRACTICE OF JIU-JITSU IN A SOCIAL PROJECT IN RIO BRANCO-AC
54. PHYSIOTHERAPY IN PRIMARY CARE: THE EXPERIENCE OF STUDENTS AND THE IMPORTANCE OF PUBLIC POLICIES IN STRENGTHENING COMPREHENSIVE CARE





55. PROVISION OF MEDICINES THROUGH JUDICIAL MEANS AND THE NEW REGULATION ESTABLISHED BY THE FEDERAL SUPREME COURT
56. GENDER, MENTAL HEALTH, AND PANDEMIC: A SCOPING REVIEW
57. HOUSING AND PUBLIC POWER: THE ROLE OF THE STATE IN GUARANTEEING THE RIGHT FOR POPULATIONS IN SITUATIONS OF SOCIAL VULNERABILITY
58. IMPACTING THE MORTALITY AND QUALITY OF LIFE OF PATIENTS WITH HEREDITARY ANGIOEDEMA
59. IMPACTS OF CLIMATE CHANGE ON HEALTH IN THE STATE OF CEARÁ
60. SOCIAL IMPACT AND IMPROVEMENT OF HEALTH SERVICES THROUGH CHARITY INITIATIVES: REPORT OF THE CAMBRIDGE HEALTH ALLIANCE FOUNDATION
61. IMPLEMENTATION OF THE SOCIAL REINTEGRATION STRATEGY FOR PEOPLE WITH PROBLEMS ARISING FROM THE USE OF ALCOHOL AND OTHER DRUGS WITHIN THE SCOPE OF THE REDE ABRAÇO PROGRAM IN ESPÍRITO SANTO
62. ADOLESCENT SEXUAL HEALTH INDICATORS: INCIDENCE OF SYPHILIS IN ESPÍRITO SANTO AND SUSTAINABLE DEVELOPMENT GOAL 3 OF THE 2030 AGENDA
63. ARTIFICIAL INTELLIGENCE AND MENTAL HEALTH: AN ETHICAL AND SUSTAINABLE APPROACH
64. ARTIFICIAL INTELLIGENCE AND MENTAL HEALTH: AN ETHICAL AND SUSTAINABLE APPROACH BASED ON NICOLÁS OBIGLIO (2024)
65. MICRO AND SMALL BUSINESS LAW: ANALYSIS OF THE IMPLEMENTATION AND RESULTS OF LC N° 123/2006 IN THE MUNICIPALITY OF ANCHIETA – ES
66. DENGUE CONTROL METHODS CARRIED OUT BY THE COMMUNITY: A LITERATURE REVIEW
67. PRAXICAL MODEL AS A TOOL FOR THE DEVELOPMENT OF SUSTAINABLE TECHNOLOGIES IN THE HEALTHCARE AREA
68. FETAL MORTALITY IN ACRE, BRAZIL, 2000-2023
69. MORTALITY FROM TRAFFIC ACCIDENTS IN ADOLESCENTS RESIDING IN THE STATE OF ESPÍRITO SANTO
70. MORTALITY FROM TRAFFIC ACCIDENTS IN THE EARLY YEARS OF LIFE OF CHILDREN RESIDING IN THE STATE OF ESPÍRITO SANTO
71. MORTALITY FROM AVOIDABLE CAUSES IN THE POPULATION IN ACRE, BRAZIL, 2000-2023
72. MORTALITY FROM EXTERNAL CAUSES IN THE EARLY YEARS OF LIFE OF CHILDREN RESIDING IN THE STATE OF ESPÍRITO SANTO
73. THE APPEAL OF FLAVORS: THE RISE OF ELECTRONIC CIGARETTES AMONG CHILDREN AND YOUTH



74. THE IMPACT OF ELECTRONIC CIGARETTES ON ADOLESCENT HEALTH AND THE NEED FOR PREVENTIVE POLICIES
75. THE ROLE OF PUBLIC HEALTH POLICIES IN THE PREVENTION OF CONGENITAL SYPHILIS
76. THE ROLE OF THE STATE IN GUARANTEEING ACCESS TO HEALTH FOR PATIENTS AFFECTED BY CONGENITAL SYPHILIS
77. THE ROLE OF THE STATE IN PROMOTING PUBLIC POLICIES FOR PEOPLE LIVING WITH HIV/AIDS: PATHWAYS TO FULFILLING THE 2030 AGENDA
78. ALCOHOL USE BY HIGH SCHOOL ADOLESCENTS IN THE METROPOLITAN REGION OF GREATER VITÓRIA, ESPÍRITO SANTO
79. THE USE OF STIMULANT DRUGS AMONG ADOLESCENTS IN GREATER VITÓRIA, ESPÍRITO SANTO
80. LIFETIME DRUG USE AMONG SCHOOLCHILDREN IN THE METROPOLITAN REGION OF VITÓRIA, ESPÍRITO SANTO
81. SDG 3 AND PUBLIC HEALTH POLICIES IN BRAZIL: ADVANCES, WEAKNESSES, AND CHALLENGES FOR UNIVERSAL HEALTH
82. THE ROLE OF THE STATE IN THE ASSISTANCE AND PREVENTION OF POISONING BY SNAKEBITE: AN INTEGRATIVE REVIEW
83. THE ROLE OF THE STATE IN PROMOTING RIGHTS OF ACCESS TO HEALTH DURING TEENAGE PREGNANCY
84. ORGANIZATION OF ACCESS TO HOSPITAL BEDS IN THE SOUTHERN REGION OF THE STATE OF ESPÍRITO SANTO
85. THE ROLE OF THE STATE IN GUARANTEEING HUMAN RIGHTS IN MENTAL HEALTH CARE
86. ENVIRONMENTAL PERCEPTION OF THE ELDERLY: MOBILITY IN URBAN SPACE
87. ANTHROPOMETRIC AND SOCIODEMOGRAPHIC PROFILE OF CHILDREN AND ADOLESCENTS PARTICIPATING IN THE SCOLIOSIS SCREENING ACTION PROMOTED BY THE BRAZILIAN SCOLIOSIS SOCIETY
88. ANTHROPOMETRIC PROFILE OF MILITARY FIREFIGHTERS FROM ESPÍRITO SANTO IN THE SERGEANTS' ADVANCEMENT COURSE (CAS)
89. PROFILE OF ELDERLY PEOPLE IN THE METROPOLITAN HEALTH REGION OF ESPÍRITO SANTO WHO WERE VICTIMS OF FALLS AND TREATED BY SAMU 192 IN 2020 AND 2021
90. EPIDEMIOLOGICAL PROFILE OF CONGENITAL SYPHILIS IN BRAZIL AND IN CASTELO
91. SOCIODEMOGRAPHIC PROFILE OF ADOLESCENT PATIENTS UNDERGOING SCOLIOSIS CORRECTION SURGERY



92. PUBLIC POLICY ON DRUGS IN ESPÍRITO SANTO: A REPORT ON THE REDE ABRAÇO PROGRAM
93. PUBLIC POLICIES AND THE JUDICIALIZATION OF HEALTH IN BRAZIL: IMPACTS AND CHALLENGES FOR STATE MANAGEMENT
94. PUBLIC POLICIES AND THE ABANDONMENT OF CHILDREN AND ADOLESCENTS DURING THE COEXISTENCE STAGE IN ADOPTION PROCESSES: AN EXPERIENCE REPORT
95. PUBLIC POLICIES IN THE ADOPTION OF CHILDREN AND ADOLESCENTS: UNDERSTANDING OF THE PROCESS BY APPLICANTS AND ITS IMPACTS
96. PUBLIC POLICIES TO COMBAT HUNGER IN BRAZIL: AN INTEGRATIVE REVIEW
97. PUBLIC HEALTH POLICIES AND THE ROLE OF NURSING IN MENTAL HEALTH CARE
98. FOR A JUST AND EQUITABLE SOCIETY: THE STATE PLAN OF POLICIES FOR WOMEN OF ESPÍRITO SANTO AND THE FIGHT FOR FEMALE AUTONOMY AND EQUAL RIGHTS
99. INTEGRATIVE PRACTICES AND WOMEN'S EMPOWERMENT: CONTRIBUTIONS TO MENTAL HEALTH AND THE 2030 AGENDA
100. PREVALENCE OF OSTEOMUSCULAR PAIN IN PEOPLE WHO HAD COVID-19 IN GREATER VITÓRIA, ESPÍRITO SANTO: A DESCRIPTIVE ANALYSIS.
101. DRUG PREVENTION IN SCHOOLS: A PRACTICE REPORT
102. MAIN PREDISPOSING FACTORS FOR THE DEVELOPMENT OF STROKE: A LITERATURE REVIEW
103. PULMONARY REHABILITATION PROGRAM AS A PROPOSAL FOR HEALTH AND WELL-BEING
104. DOOR-TO-DOOR PROGRAM: CHALLENGES AND LIMITATIONS OF THE SERVICE
105. INCLUSION PROGRAM FOR PEOPLE WITH VISUAL DISABILITIES IN COLATINA-ES: PROMOTING HEALTH AND WELL-BEING IN LINE WITH SDG 3
106. PROMOTION OF MENTAL HEALTH: GUIDANCE ON THE USE OF HERBAL TEAS FOR A GROUP OF WOMEN
107. PROMOTION OF FOOD AND NUTRITIONAL SECURITY WITH A GROUP OF FAMILIES: INTEGRAL USE OF FOODS
108. FUNCTIONAL RECOVERY OF THE UPPER LIMB OF HEMIPARETIC PATIENTS POST-STROKE BEFORE AND AFTER AN EXOSKELETON PROTOCOL
109. EXPERIENCE REPORT: A PROPOSAL FOR HEALTH EDUCATION IN THE PULMONARY REHABILITATION PROJECT



110. SOCIAL REPRESENTATIONS: ANALYSIS OF THE PERCEPTION OF LEPROSY IN THE DUALITY OF THOUGHT BETWEEN THE VICTIM AND THE HEALTH PROFESSIONAL
111. HEALTH AND IMMIGRATION: ANALYSIS OF DISPARITIES IN BRAZIL AND IN DEVELOPED COUNTRIES
112. TOOTH LOSS IN ADULTS: AN ASSESSMENT OF THE PREVALENCE IN THE SOUTHEAST REGION OF BRAZIL WITH DATA FROM THE NATIONAL HEALTH SURVEY (PNS - 2019)
113. SOCIAL SUPPORT FOR CAREGIVERS OF THE ELDERLY IN THE MUNICIPALITY OF VITÓRIA
114. SUSTAINABILITY IN THE HOSPITAL ENVIRONMENT, IS IT POSSIBLE?
115. SUSTAINABILITY IN THE LIVED TERRITORY: THE TRAINING OF ECO-EDUCATORS FROM A LIVING LABORATORY
116. NON-PHARMACOLOGICAL TECHNIQUES, PAIN INTENSITY, AND TYPE OF DELIVERY IN PARTURIENTS AT A PHILANTHROPIC MATERNITY HOSPITAL IN VITÓRIA-ES.
117. MORTALITY TRENDS IN WOMEN OF CHILDBEARING AGE IN ACRE, BRAZIL, 2000-2023
118. MATERNAL DEATH IN ACRE, BRAZIL, 2000-2023
119. TRENDS IN HOSPITALIZATIONS FOR DISEASES OF THE NERVOUS SYSTEM IN ACRE, BRAZIL, 2000-2023
120. MORTALITY FROM EXTERNAL CAUSES IN ACRE, BRAZIL, 2000-2023
121. TEMPORAL TREND OF MORTALITY FROM CHRONIC NON-COMMUNICABLE DISEASES IN THE POPULATION IN ACRE, BRAZIL, 2000-2022
122. TREND OF INFANT MORTALITY IN ACRE, BRAZIL, 2000-2023
123. OVERCOMING BARRIERS: THE STIGMA IN HEALTHCARE ACCESS FOR WOMEN WHO ABUSE ALCOHOL AND DRUGS
124. MARIJUANA USE AMONG ADOLESCENTS IN THE METROPOLITAN REGION OF VITÓRIA, ES
125. USE OF ANOREXIGENIC AND STIMULANT MEDICATIONS BY ADOLESCENTS: A SCHOOL-BASED STUDY IN THE METROPOLITAN REGION OF VITÓRIA
126. USE OF TRANQUILIZERS AND NARCOTIC DRUGS BY HIGH SCHOOL STUDENTS IN THE METROPOLITAN REGION OF A BRAZILIAN CAPITAL
127. VAPORIZERS IN FOCUS: A COMPREHENSIVE ANALYSIS ON THE USE OF ELECTRONIC CIGARETTES
128. SILENCED VOICES: COMBATING VIOLENCE AS A MECHANISM TO PROMOTE THE DIGNITY OF THE LGBTQIA+ POPULATION



129. VULNERABILITIES FACED BY HEALTH PROFESSIONALS IN A CONTINUING EDUCATION PROCESS ON THE 2030 AGENDA IN THE AMAZON REGION: A QUALITATIVE STUDY
130. THE USE OF NEW TECHNOLOGIES IN EPIDEMIOLOGICAL SURVEILLANCE SYSTEMS: PROMOTING TRANSPARENCY AND JUSTICE IN EPIDEMIC CONTROL IN ALIGNMENT WITH SDG 16
131. CHARACTERIZATION OF BEAN CONSUMPTION BY THE ADULT POPULATION OF THE SOUTHEAST REGION ACCORDING TO VIGITEL 2023
132. ANALYSIS OF THE PROFESSIONAL PROFILE OF HEALTH WORKERS IN THE MUNICIPALITY OF CRATO
133. ROLE OF PUBLIC POLICIES IN THE ENVIRONMENT OF INSTITUTIONALIZED ELDERLY IN LONG-STAY INSTITUTIONS: AN INTEGRATIVE REVIEW STUDY
134. DIGITAL EXCLUSION IN HEALTHCARE ACCESS: CHALLENGES AND PERSPECTIVES FOR PROMOTING EQUITY IN THE CONTEXT OF SDG 3
135. GOTA DE VIDA APP: TECHNOLOGY AS A TOOL FOR RECRUITING AND RETAINING BLOOD DONORS
136. MENTAL HEALTH: A PUBLIC HEALTH ISSUE
137. KERATOCONUS AND VULNERABILITY: CHALLENGES FOR HEALTH AND CITIZENSHIP FROM THE PERSPECTIVE OF SDG 3
138. THE ALLOCATION OF FINANCIAL RESOURCES DURING COVID-19 IN THE MUNICIPALITY OF PRESIDENTE KENNEDY – ES, BRAZIL
139. THE EXPERIENCE OF EXTENSION COURSES FOR STRENGTHENING AND EXPANDING THE OBESITY CARE PATHWAY
140. PREMATUREITY IN THE STATE OF ESPÍRITO SANTO: PERINATAL OUTCOMES AND OPPORTUNITIES FOR PUBLIC POLICIES
141. THE RELEVANCE OF THE BALANCE BETWEEN SUSTAINABLE DEVELOPMENT, ECONOMIC GROWTH, AND ENVIRONMENTAL PROTECTION
142. UNIVERSITY EXTENSION ACTIONS: EXPERIENCE REPORT OF THE EXTENSION PROJECT TO STRENGTHEN AND EXPAND THE OBESITY CARE PATHWAY IN THE PUBLIC HEALTH NETWORK OF ESPÍRITO SANTO
143. ANALYSIS OF DOMESTIC VIOLENCE CASES IN THE STATE OF ESPÍRITO SANTO FROM 2020 TO 2023
144. EPIDEMIOLOGICAL ANALYSIS: A SEARCH FOR INDICATORS OF EXOGENOUS POISONING WITH AN OCCUPATIONAL LINK IN CEARÁ
145. THE POSSIBILITIES AND CHALLENGES IN THE WORK OF SOCIAL WORKERS IN SOCIO-EDUCATIONAL CARE IN AN OPEN SETTING
146. HEALTHCARE FOR PATIENTS IN PALLIATIVE CARE IN BRAZIL AND THE ROLE OF THE NUTRITIONIST



147. MEN'S HEALTH CARE AND PROSTATE CANCER: INTEGRATION OF HEALTH POLICIES WITH SDG 3
  148. EARLY ASSESSMENT OF PULMONARY FUNCTION AND FUNCTIONAL CAPACITY IN PATIENTS WITH PARKINSON'S DISEASE AS A PREVENTION OF MORBIDITY AND MORTALITY
  149. CONSUMPTION OF SUGARY DRINKS BY ELDERLY PEOPLE WITH DIABETES AND HYPERTENSION
  150. CHALLENGES OF THE PARTICIPATION OF BLACK WOMEN IN POLITICS IN THE STATE OF ESPIRITO SANTO
  151. MILITARY POLICE WORK VALORIZATION STRATEGY: LISTENING TO MILITARY POLICE OFFICERS FROM THE PMES TRAFFIC BATTALION
  152. IMPACT OF SMOKE EXPOSURE ON PUBLIC HEALTH
  153. MONITORING OF DRINKING WATER IN CAPIXABA MUNICIPALITIES: CHALLENGES FOR UNIVERSAL AND EQUITABLE ACCESS
  154. MONITORING OF THE UNIFIED SOCIAL ASSISTANCE SYSTEM AND THE COVID-19 PANDEMIC
  155. THE WORK OF SOCIAL SERVICES IN BASIC EDUCATION IN A MUNICIPALITY OF GREATER VITÓRIA, ESPÍRITO SANTO
  156. THE WORK OF SOCIAL WORKERS IN STUDENT ASSISTANCE POLICY IN THE CONTEXT OF THE HIGHER EDUCATION COUNTER-REFORM
  157. GROUPS AS A WORKING TOOL FOR SOCIAL WORKERS WHO WORK WITH SOCIO-EDUCATIONAL MEASURES
-



## 1. THE APPLICATION OF ARTIFICIAL INTELLIGENCE IN PUBLIC HEALTH: PROMOTING CARE EFFICIENCY IN ALIGNMENT WITH SDG 3

Amanda Calzi Roldi<sup>1</sup>, Lyvia Elena Klawka Cau<sup>2</sup>, Geovanna Vermelho da Silva<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>3</sup>.

<sup>1</sup>Master's student in the Public Policies and Local Development Program - Emescam, Vitória, Espírito Santo, Brazil <sup>2</sup>Undergraduate Nursing student - EMESCAM, Vitória, Espírito Santo, Brazil <sup>3</sup>Professor in the Master's Program in Public Policies and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

**Corresponding author:** amanda.roldi@edu.emescam.br

**Introduction:** With the advancement of Artificial Intelligence (AI), public health has been affected by the incorporation of technologies aimed at improving care efficiency and promoting equitable access. SDG 3 of the United Nations' 2030 Agenda ensures health and well-being for all, and AI emerges as a promising tool to achieve this goal in overburdened healthcare systems. **Objective:** To investigate how Artificial Intelligence can promote equity in access to public health and improve care efficiency in alignment with SDG 3. **Method:** An integrative review was conducted, searching the Pubmed, Lilasc, and Scielo platforms with the following descriptors and Boolean operators: ("Artificial Intelligence" OR "Digital Technology") AND ("Health Equity" OR "Vulnerable Populations"). Inclusion criteria were: full text and publications in the last 5 years in English, Portuguese, and Spanish. **Results:** 94 articles were found, and after applying the search and reading criteria, 5 articles were selected for this study. The results indicate that AI can improve care efficiency and promote equity, as in the case of automated breast cancer screening and remote monitoring systems, which ensure access to care in remote areas. However, barriers persist, such as a lack of internet access. Furthermore, algorithmic bias can perpetuate inequalities, which calls for regulation to ensure transparency and fairness in the use of AI. **Conclusion:** The effectiveness of AI in public health depends on inclusive public policies that prioritize infrastructure, digital inclusion, and continuous training. Initiatives like the Brazilian Digital Health Strategy (e-Saúde) are important for expanding access and overcoming barriers. Collaboration between the public and private sectors is necessary to develop sustainable solutions and ensure equity.

**Keywords:** Artificial Intelligence. Digital Health. Health Equity. Vulnerable Populations.



## 2. THE ASSOCIATION OF SOCIOECONOMIC FACTORS WITH SELF-MEDICATION: A SYSTEMATIC REVIEW

Kevin da Silva Xavier Saleme<sup>1</sup>

<sup>1</sup> Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, Espírito Santo, Brazil

**Corresponding author:** kevinxsaleme@gmail.com

**Introduction:** Self-medication, the practice of using drugs without a prescription or medical supervision, is a global phenomenon with significant implications for public health. Although it offers potential benefits such as immediate symptomatic relief and short-term cost reduction, self-medication presents considerable risks, including adverse reactions, drug interactions, masking of serious diseases, development of bacterial resistance, and dependence. The literature shows an association between socioeconomic factors and the prevalence of self-medication, however, the complexity of this relationship requires further investigation. **Objective:** This study aims to investigate the association of socioeconomic factors in self-medication, seeking to identify patterns and gaps in current knowledge. **Method:** This is a systematic literature review using the PubMed, Virtual Health Library, and Scielo databases. The search strategy used was "Self Medication" AND "Socioeconomic Factors" NOT review, considering articles published in the last 5 years that were complete, original, and free. **Results:** The initial search identified 24 articles. After excluding duplicates and screening the remaining works by title and abstract, 13 articles were selected for full reading. Of these, 10 studies met the inclusion criteria and were included in the systematic review. The results showed a complex association between socioeconomic factors and self-medication. Factors such as low income, lower education, limited access to health services, residence in rural areas, and unemployment were shown to be related to a higher prevalence of self-medication. The practice of using drugs without medical supervision was also significantly higher among individuals who reported a poorer perception of their own health and who do not have access to health plans. **Conclusion:** This systematic review confirmed that self-medication is a common practice, influenced by a complex interaction of socioeconomic, demographic, and behavioral factors. Individuals in a situation of socioeconomic vulnerability, with limited access to health services, tend to resort to self-medication more frequently. Low education and misinformation about the correct use of medicines contribute to this practice, exposing individuals to health risks. Public policies should address the social determinants of health to improve access to quality health services, promote health education, and develop strategies to reduce self-medication, especially in vulnerable groups. Actions targeting women, young people, people with low income, and lower education are essential. Future studies should investigate effective interventions to reduce self-medication in vulnerable populations, considering cultural and contextual specificities.

**Keywords:** Self-Medication, Socioeconomic Factors, Association.





### 3. PERSONALIST BIOETHICS

Maria do Perpétuo Socorro Oliveira de Souza<sup>1</sup>, Alan Patrício da Silva<sup>2</sup>.

<sup>1</sup>Student of the Master's course in Public Policies and Local Development - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM.

<sup>2</sup>Full Professor in the Stricto Sensu Master's Program in Public Policies and Local Development at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM.

**Corresponding author:** socorro.sou@hotmail.com

**Introduction:** Ontologically Founded Personalism or Personalist Bioethics was created by Dom Elio Sgreccia, an Italian cardinal, at the Istituto de Bioetica of the Università Cattolica Del Sacro Cuore in Rome. An important bioethicist, his theoretical assumptions are based on the provisions of the Catholic Church. **Objective:** Its main objective is to defend the intrinsic and inviolable dignity of each person, regardless of their characteristics or conditions, offering a comprehensive and humanistic vision of the person and society, always seeking to promote a more just and solidary world. **Method:** Critical textual analysis of content focused on the terms and concepts related to human dignity according to the author's vision, deepened with historical and philosophical contextualization, centered on Sgreccia's most relevant works, such as the "Manual of Bioethics" and "Life as a gift and task." **Development:** The primary foundation is the human person as the center of reflection between modern science and Christian metaphysics, their individuality, subjectivity, personality, and interpersonal relationships. In SGRECCIA's humanistic ethics, the human person is a uni-totality of body and spirit and a spiritual, physical, moral, psychic, and social whole, whose realistic and constructivist roots have two bases: the developmental one of anthropological hypotheses and the principles: defense of physical life, freedom and responsibility, totality or therapeutic, and sociality and subsidiarity. **Conclusions:** Personalist bioethicists were tasked with founding a philosophy that treats the vision of man in line with the principle of human dignity, creating spaces for debate on the themes of person-individual, and the dilemmas arising in this context. The contributions of Personalism to Bioethics are unquestionable in the field of freedom, communication, understanding and defense of human dignity, and especially, of ethics, not only of acts, but above all of personal ethics, with virtues and new ways of thinking that respect, preserve, and promote human dignity.

**Keywords:** Bioethics; Ethics; Humanity; Ontological Personalism; Personalist.



#### 4. DENGUE AND SUSTAINABLE DEVELOPMENT: ADDRESSING THE EPIDEMIC THROUGH PUBLIC POLICIES AND SOCIAL INTERVENTIONS IN BRAZIL

Eloiza Toledo Bauduina<sup>1</sup>, Agda da Silva Souza<sup>2</sup>, Larissa Trindade Magnago<sup>2</sup>, Natália Marques Pimenta<sup>2</sup>, Raiane Oliveira dos Santos Pereira<sup>2</sup>, Italla Maria Pinheiro Bezerra<sup>3</sup>

<sup>1</sup> Master's student in Public Policies and Local Development at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, Espírito Santo, Brazil;

<sup>2</sup> Medical student at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, Espírito Santo, Brazil;

<sup>3</sup> Coordinator and Professor of the Public Policies and Local Development Course at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, Espírito Santo, Brazil.

**Corresponding author:** eloiza.bauduina@gmail.com

**Introduction:** There are several viral diseases transmitted today. Among them, arboviruses stand out, a group of diseases transmitted by arthropods. Dengue stands out as one of the main arboviruses. Transmitted by the *Aedes aegypti* mosquito, it presents with acute febrile conditions and is endemic in Brazil. It is observed that each year, the incidence of dengue has been increasing. There is a need to understand which public policies and social interventions are effective in combating dengue, in order to verify the implementation of actions that contribute to sustainable development. **Objective:** to describe how public policies can contribute to combating dengue. **Method:** This is a reflective analysis carried out through a bibliographic review of the literature. This work is part of the Human Resources Training Program in Postgraduate Studies - Master's. **Result:** Sustainable development, as emphasized by the 2030 Agenda and its Sustainable Development Goals (SDGs), seeks a balance between economic growth, environmental protection, and social well-being. The conditions that promote and aggravate the emergence of cases of the disease show that combating dengue is not just a public health issue, but an imperative that requires integrated policies aligned with sustainability. In the case of dengue, the formulation of effective public policies is crucial for the protection of public health and the improvement of the population's quality of life. It is important to recognize the role of local communities as agents of change and to promote their active participation in the development and implementation of dengue control strategies. **Conclusion:** Based on the epidemics that have taken hold, public policies must be adapted to respond quickly to dengue outbreaks and their social consequences. Cooperation between the different sectors of society is essential in this scenario, creating effective and lasting solutions.

**Keywords:** Dengue. Sustainable Development. Public Policies.



## 5. THE STATE'S ROLE IN HEALTHCARE FOR PATIENTS WITH LONG COVID

Kamila Gomes Marvila<sup>1</sup>, Alan Patrício da Silva<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Roberta Ribeiro Batista<sup>2</sup>, Elyecleyde Katiane da Silva Oliveira<sup>3</sup>.

<sup>1</sup> Master's Student, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

<sup>2</sup> Professor, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

<sup>3</sup> Federal University of Acre, Rio Branco, Acre, Brazil.

**Corresponding author:** kamila.marvila@edu.emescam.br

**Introduction:** Since 2019, the coronavirus has triggered a rapidly spreading pandemic, causing economic, social, and health impacts. Four years after the onset of the COVID-19 pandemic, the impact of SARS-CoV-2 infection extends beyond the acute phase of the disease. Patients recovering from COVID-19 present symptoms that affect their health and quality of life, resulting from Long COVID or post-COVID-19 conditions. This is characterized by symptoms that persist or appear for the first time up to three months after the COVID-19 infection, also occurring in non-hospitalized or asymptomatic cases. **Objective:** To analyze the role of the state in healthcare assistance for users with Long COVID. **Method:** This is an integrative review study in which searches were conducted in the PubMed, Lilacs, SciELO, and PePSIC databases, using the following DeCS descriptors: (“Long Covid OR Post-Acute COVID-19 Syndrome”) AND (“Public Power OR State Government”) AND (“Human Rights OR Right to Health”). This research was expected to answer the following question: “How is the state's role in healthcare for users with Long COVID configured?”. **Results:** 484 studies were identified, and 09 were selected; articles not related to the theme were excluded. It was observed that over 200 symptoms were associated with Long COVID, not just respiratory manifestations. Treatment involves multiple organs and systems, increasing the demand for specialists and multidisciplinary teams (clinicians, specialists, psychologists, physiotherapists, among others). Diagnosing Long COVID remains a challenge due to the lack of consensus on a definitive diagnostic criterion, similar to chronic diseases, within healthcare networks and regulatory complexes. **Conclusion:** Access to health services is crucial. A call to action is proposed to investigate and address inequalities through a robust Long COVID (LC) research agenda that speaks convincingly to policymakers and decision-makers. We need investment in research and evidence-based practical policies to mitigate the worst effects of the condition and address the inequalities in experience, treatment, and support, which are more frequently and acutely experienced by vulnerable and disadvantaged individuals in society. The absence of a specific plan for Long COVID compromises the right to health, leading to a lack of assistance for health service users. This scenario reflects a failure of the State to ensure adequate care, highlighting the urgency of inclusive and specific policies.

**Keywords:** Long COVID, Public Health Policies, Public Power, Right to Health.



## 6. THE IMPLEMENTATION OF THE MUNICIPAL FORUM OF INTEGRATIVE AND COMPLEMENTARY PRACTICES IN VITÓRIA: AN EXPERIENCE REPORT

Henriqueta Tereza do Sacramento<sup>1</sup>; Marluce M. de Siqueira<sup>2</sup>

<sup>1</sup> Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM)

<sup>2</sup> Federal University of Espírito Santo - UFES

**Introduction:** The National Policy on Integrative and Complementary Practices (PICS) was established by the Ministry of Health in 2006 and supplemented by two ordinances that expanded the number of ICPs that can be implemented in the Unified Health System (SUS). In the municipality of Vitória, managers committed to the principles of the SUS have encouraged the inclusion of phytotherapy, homeopathy, and acupuncture since 1991, in the first public examination for the health sector. Since then, the population of Vitória has had access to phytotherapy consultations in primary care and is invited to participate in the construction of medicinal (therapeutic) gardens and community urban gardens. Continuing education and popular health education were adopted to promote the protagonism of SUS users and health workers in making healthy and sustainable choices. Homeopathy and acupuncture are offered at the Vitória Specialties Center. In 2013, the SUS management in Vitória created the technical area for ICPs, aiming to expand care and the provision of these practices. **Objective:** To present the advances and challenges in the implementation of the Municipal Policy on ICPs (PMPICS) in Vitória-ES. **Method:** This is an experience report on the implementation of the PMPICS aimed at expanding the offer of integrative practices in primary health care. It began with a situational diagnosis of ICPs, a survey of the perception of doctors and managers about the national ICP policy, and the establishment of the Municipal Forum of ICPs for dialogue and training of health professionals on various practices, with the aim of expanding care and offerings in primary health care. **Results:** The Municipal Forum of ICPs has become part of the agenda of the SUS Technical Health School and has been held annually for 12 years, featuring lectures; mini-courses on Phytotherapy, Auriculotherapy, and Gardening with medicinal plants; workshops on the artisanal preparation of recipes with medicinal herbs; and experiences with Liang Gong, meditation, Circular Dance, Music Therapy, Art Therapy, and Storytelling. To encourage the exchange of experiences, the State Exhibition of Successful Experiences in ICPs and the Meeting of Therapeutic Gardens were established. **Conclusion:** To date, 1,080 health professionals have been trained; 70 successful experiences in various ICPs such as auriculotherapy, phytotherapy, music therapy, Liang Gong, Do-in, circular dance, and art therapy have been presented. The offering of ICPs in health services has been increasing each year, demonstrating that it is feasible and results in benefits for health promotion and the reduction of medicalization.

**Keywords:** Integrative and Complementary Practices, Unified Health System, Continuing Education.



## 7. INTEGRATIVE COMMUNITY THERAPY AS A POSITIVE MENTAL HEALTH STRATEGY: AN EXPERIENCE REPORT

Joaquim Luiz da Silva Filho<sup>1</sup>, Douglas Miranda<sup>1</sup>, Caroline Rodrigues Thomes<sup>1</sup>, Karla Mayerling Paz Ledesma<sup>1</sup>, Marcos Vinicius Ferreira dos Santos<sup>1</sup>, Rubens José Loureiro<sup>1</sup>, Carlos Alberto da Cruz Sequeira<sup>2</sup>, Fabiana Gonring Xavier<sup>1</sup>, Marluce Mechelli de Siqueira<sup>1</sup>

<sup>1</sup> Federal University of Espírito Santo - UFES <sup>2</sup> Porto School of Nursing - ESEP

**Introduction:** Integrative Community Therapy (ICT) was developed in 1987 by the Brazilian psychiatrist and anthropologist Dr. Adalberto Barreto. Since 2017, it has been utilized during visits to the Pirambu community in Fortaleza, in collaboration with residents of the Social Medicine course at the Federal University of Ceará (UFC). ICT is part of the National Policy on Integrative and Complementary Practices (PNPIC) and was also included in 2004 in training courses for drug use prevention promoted by the National Secretariat for Drug Policies (Senad). Used in 24 countries across South America, Europe, and Africa, it was certified as a social technology by the Banco do Brasil Foundation in 2024. Its theoretical framework is based on five fundamental pillars: systemic thinking, communication theory, cultural anthropology, resilience, and the pedagogy of Paulo Freire. This last pillar suggests possible interfaces between ICT and the field of formal or informal education. **Objective:** To report the experience of using ICT as a strategy for welcoming, integration, exchange of experiences, and sharing of feelings in the Positive Mental Health course offered in a postgraduate program. **Method:** This is a qualitative approach, in the form of an experience report (ER). **Results:** In the 2024/2 semester, the Positive Mental Health course was offered by the Postgraduate Program in Collective Health at the Federal University of Espírito Santo (PPGSC/UFES), a pioneering initiative linked to the principles of the Research Group on Integrative and Complementary Practices in Health (IPICS) and the Multicenter Project entitled Promotion of Positive Mental Health of University Students in the Health Area (PROSMUS). In this context, ICT and its foundations permeated activities aimed at welcoming and strengthening interpersonal bonds, connecting with the themes: "positive appreciation of the good things in life" and "letting emotions flow." During the dynamics, ICT was observed as a potentiating strategy for pedagogical support for teachers and students, promoting integration, strengthening of bonds, exchange of experiences, knowledge, desires, and dreams, and also enabling the sharing of feelings related to the academic moment. **Final Considerations:** Based on this experience, the intention is to maintain ICT as a strategy in the Postgraduate Program in Collective Health, also expanding its format to the undergraduate level, in partnership with the Department of Health Care (DAS), since as a low-cost, light-care technology, it promotes the creation of solidarity networks and an increase in the quality of life.

**Keywords:** Community Therapy, Health, Collective Health.



## 8. INTEGRATED APPROACH IN THE PSYCHOSOCIAL REHABILITATION OF A PATIENT WITH SCHIZOPHRENIA: A CASE REPORT

Karoline Carneiro Ferreira da Silva<sup>1</sup>, Amanda Calzi Roldi<sup>1</sup>, Mariana Santos de Sá Galina<sup>2</sup>, Jordana Cansian Fioreze<sup>2</sup>, and Alan Patrício da Silva<sup>3</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil. <sup>2</sup> Scientific Initiation Students and Nursing Undergraduates at Escola Superior da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil. <sup>3</sup> Professor in the Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil.

**Corresponding author:** karoline.silva@edu.emescam.br

**Introduction:** J.S. is a 37-year-old black man with incomplete primary education and is unemployed, residing in the municipality of Vila Velha, where he lives with his 73-year-old mother. He is the father of two children with whom he has little contact. J.S. faced a psychiatric crisis after the separation from his last partner, which resulted in a diagnosis of paranoid schizophrenia. **Objective:** The objective of this work is to report the clinical course of J.S., highlighting the importance of an integrated therapeutic approach between mental health services and the psychosocial care network, aiming for the patient's psychosocial rehabilitation. The emphasis is on the use of the Singular Therapeutic Project (PTS), treatment adherence, and the benefits of services such as CAPS AD (Psychosocial Care Center for Alcohol and Drugs) and CRAS (Reference Center for Social Assistance). **Method:** The follow-up of J.S. was carried out by a multiprofessional team that promoted continuous care and psychosocial rehabilitation. After a psychotic crisis and a diagnosis of paranoid schizophrenia in 2020, J.S. had hospitalizations due to non-adherence to treatment. Referred to CAPS AD, he began his PTS with medication adjustments (Clozapine) and participation in therapies and workshops. Articulation with the social network, including CRAS, was essential for accessing the Continuous Cash Benefit (BPC). **Result:** After hospitalization and adjustment in treatment and medication stabilization, J.S. showed a significant improvement in his clinical condition, including the reduction of auditory hallucinations and delusional ideation. At CAPS AD, the patient benefited from a person-centered approach, with the development of new family and community bonds. J.S. began to feel that he was not being punished for his psychotic experiences, but rather cared for. The relationship with his mother improved, and she also joined the family support group. J.S. resumed contact with his children and felt more self-confident, including with the help of the BPC. **Conclusion:** The follow-up of J.S., through an integrated and multiprofessional approach, was fundamental for his psychosocial recovery. The network-based work, involving CAPS AD, CRAS, and other services, proved to be effective in promoting the patient's autonomy, improving family bonds, and preventing new crises. Adherence to treatment and participation in therapeutic and income-generating activities were crucial for the success of the rehabilitation process, promoting social inclusion and improving the quality of life of J.S.

**Keywords:** Psychosocial Rehabilitation, Schizophrenia, Mental Health Services.



## 9. HEALTHCARE ACCESS AND INEQUALITY: A PERSPECTIVE ON IMMIGRANT COMMUNITIES IN THE US BASED ON BRINKERHOFF (2024)

Sabrina A. Prado Lucas<sup>1</sup>, Cintia Lugão Dan<sup>1</sup>, Rafael Alves de Souza Meneguelli<sup>1</sup>, Flávia do Nascimento Silva<sup>1</sup>, Paulo André Stein Messetti<sup>2</sup>, Beatriz de Barros Souza<sup>2</sup>

<sup>1</sup> Master's Student, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil. <sup>2</sup> Professor, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

**Corresponding author:** [sabrina.lucas@edu.emescam.br](mailto:sabrina.lucas@edu.emescam.br)

**Introduction:** Health disparities for immigrants in the United States result from a combination of factors such as social exclusion, structural violence, and political and cultural barriers, as demonstrated by Cristina Brinkerhoff (2024) in the article "Immigrant health disparities in the United States: challenges, structural violence, and the role of Social Work." **Objective:** To highlight the main points raised by Brinkerhoff (2024) in her article on inequality in healthcare access for immigrant populations in the United States of America. **Method:** This is a review of the indicated scientific article, describing the author's topics, development, results, and conclusion on the subject. **Results:** The study indicates the precarious working conditions of immigrants, which increase their risks of accidents through daily exposure to harmful environments. Many are subjected to exploitation in the workplace, which aggravates their vulnerability. The absence of adequate immigration policies creates a climate of fear and insecurity, affecting the health conditions of those involved. The role of social workers is highlighted in the text to reduce the disparities suffered. The development of long-term strategies for social justice and ensuring access to adequate healthcare is crucial. Community support and the fight for structural reforms are important initiatives, and awareness campaigns, adaptation of health services, and health and public policy advocacy stand out. **Conclusion:** The article indicates indispensable actions for the social inclusion of immigrants and to ensure equity of access to healthcare for the American and immigrant populations. The urgency of implementing more inclusive public policies and overcoming structural barriers is evident. The active involvement of social workers is decisive for guaranteeing access to healthcare on equal terms, regardless of social or migratory status.

**Keywords:** Health disparities, Immigration, Structural violence, Social policies, Social work, Healthcare access, Social inclusion.



## 10. HEALTHCARE ACCESS AND INEQUALITY: A PERSPECTIVE ON IMMIGRANT COMMUNITIES IN THE US BASED ON BRINKERHOFF (2024)

Sabrina A. Prado Lucas<sup>1</sup>, Cintia Lugão Dan<sup>1</sup>, Rafael Alves de Souza Meneguelli<sup>1</sup>, Flávia do Nascimento Silva<sup>1</sup>, Paulo André Stein Messetti<sup>2</sup>, Beatriz de Barros Souza<sup>2</sup>

<sup>1</sup> Master's Student, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

<sup>2</sup> Professor, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

**Corresponding author:** [sabrina.lucas@edu.emescam.br](mailto:sabrina.lucas@edu.emescam.br)

**Introduction:** Health disparities for immigrants in the United States result from a combination of factors such as social exclusion, structural violence, and political and cultural barriers, as demonstrated by Cristina Brinkerhoff (2024) in the article "Immigrant health disparities in the United States: challenges, structural violence, and the role of Social Work." **Objective:** To highlight the main points raised by Brinkerhoff (2024) in her article on inequality in healthcare access for immigrant populations in the United States of America. **Method:** This is a review of the indicated scientific article, describing the author's topics, development, results, and conclusion on the subject. **Results:** The study indicates the precarious working conditions of immigrants, which increase their risks of accidents through daily exposure to harmful environments. Many are subjected to exploitation in the workplace, which aggravates their vulnerability. The absence of adequate immigration policies creates a climate of fear and insecurity, affecting the health conditions of those involved. The role of social workers is highlighted in the text to reduce the disparities suffered. The development of long-term strategies for social justice and ensuring access to adequate healthcare is crucial. Community support and the fight for structural reforms are important initiatives, and awareness campaigns, adaptation of health services, and health and public policy advocacy stand out. **Conclusion:** The article indicates indispensable actions for the social inclusion of immigrants and to ensure equity of access to healthcare for the American and immigrant populations. The urgency of implementing more inclusive public policies and overcoming structural barriers is evident. The active involvement of social workers is decisive for guaranteeing access to healthcare on equal terms, regardless of social or migratory status.

**Keywords:** Health disparities, Immigration, Structural violence, Social policies, Social work, Healthcare access, Social inclusion.





## 11. TRAFFIC ACCIDENTS INVOLVING CHILDREN: EDUCATIONAL PRACTICES FOR THE USE OF SAFETY SEATS

Franciele Foschiera Camboin<sup>1,6</sup>; Alline Kosanke e Silva<sup>2,6</sup>; Yasmin Ribeiro Marcelino<sup>2,6</sup>; Nathália Miguel Teixeira Santana<sup>3,6</sup>; Maria Dalva de Barros Carvalho<sup>4</sup>; Franciéle Marabotti Costa Leite<sup>5,6</sup>

<sup>1</sup> Professor, Nursing Program, State University of Paraná - Cascavel, Paraná, Brazil; <sup>2</sup> Physical Therapy Student, Federal University of Espírito Santo (UFES), Vitória, Espírito Santo, Brazil; <sup>3</sup> Postgraduate Student in Collective Health, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil; <sup>4</sup> State University of Maringá, Postgraduate Program in Health Sciences, Maringá, Paraná, Brazil; <sup>5</sup> Professor, Undergraduate Nursing and Postgraduate Collective Health Programs, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil. <sup>6</sup> Research Group on Health, Violence, and Accidents of UFES (LAVISA)

**Corresponding author:** smfran@hotmail.com.br

**Introduction:** Child safety in traffic is a global concern, especially due to the high rate of accidents involving children. This scenario highlights the importance of preventive measures, such as the proper use of child safety seats. Child safety seats are essential devices for protecting children in vehicles. Thus, the actions of driving instructors, police officers, and traffic agents promote the use of child safety seats. **Objective:** This study aimed to assess the knowledge and guidance activities regarding the use of child safety seats by Driving Instructors, traffic police, and traffic agents. **Method:** Descriptive and exploratory, with the application of a structured questionnaire containing 35 questions. The study population was intentionally selected, with subjects being: Instructors from 20 Driver Training Centers, traffic police, and traffic agents. The research was approved by the Research Ethics Committee with Human Beings, under Opinion 045.093.000-08. **Results:** The sample consisted of: 16 (43.24%) instructors from Driver Training Centers, 11 (29.72%) traffic agents, and 10 (27.02%) traffic police officers, totaling 37 participants. The results revealed that 15 (40.54%) of the individuals had a postgraduate degree, 11 (29.72%) had a high school education, 9 (24.32%) had a higher education degree, and 02 (5.4%) had technical-vocational training. Of the subjects, 20 (54.06%) were female and 17 (45.94%) were male. More than half of the women, 17 (85%), in this study had partial knowledge or were unaware of information about the correct use of child safety seats, while 10 (58.82%) of the men were unaware. Less than half of the subjects, 16 (43.24%), were able to identify the correct age for using the child safety seat, and more than 18 (48.64%) individuals did not know the indicated weight for the correct use of the child safety seat. Instructors spend more time providing guidance on the correct restraint of children in cars compared to other professionals who claim to conduct educational activities. The majority of professionals, 19 (51.35%), dedicate 15 minutes daily to providing guidance on the use of child safety seats, while 15 (40.54%) use 15 minutes to 2 hours. Only 3 (8.11%) reported using more than 2 hours for guidance. **Considerations:** The findings reveal that although the child safety seat is part of the routine guidance for most of the professionals studied, they sometimes have partial and/or incorrect information about its use.

**Keywords:** Traffic accidents, Education, Accident prevention.



## 12. CHILDHOOD TRAFFIC ACCIDENTS: NURSES' KNOWLEDGE AND EDUCATIONAL PRACTICES

Franciele Foschiera Camboin<sup>1,6</sup>; Alline Kosanke e Silva<sup>2,6</sup>; Yasmin Ribeiro Marcelino<sup>2,6</sup>; Isaura Barros Alves Pinto<sup>2,6</sup>; Maria Dalva de Barros Carvalho<sup>4,6</sup>; Franciéle Marabotti Costa Leite<sup>5,6</sup>

<sup>1</sup> Professor, Nursing Program, State University of Paraná - Cascavel, Paraná, Brazil; <sup>2</sup> Physical Therapy Student, Federal University of Espírito Santo (UFES), Vitória, Espírito Santo, Brazil; <sup>3</sup> Postgraduate Student in Collective Health, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil; <sup>4</sup> State University of Maringá, Postgraduate Program in Health Sciences, Maringá, Paraná, Brazil; <sup>5</sup> Professor, Undergraduate Nursing and Postgraduate Collective Health Programs, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil. <sup>6</sup> Research Group on Health, Violence, and Accidents of UFES (LAVISA)

**Corresponding author:** smfran@hotmail.com.br

**Introduction:** The leading causes of death among children and young people are no longer diseases of biomedical origin but are caused by lifestyle. Thus, guiding, educating, and informing about the proper transportation of children in vehicles are multiprofessional actions, involving health professionals, educators, driving school instructors, traffic police, traffic agents, managers, traffic engineers, and other professionals. **Objective:** The objective of this study was to evaluate nurses' knowledge and guidance activities regarding the use of child safety seats. **Method:** A descriptive, exploratory study using a questionnaire. The population was intentionally chosen, consisting of nurses who performed or should perform educational activities for the prevention of traffic accidents. Approved by the Research Ethics Committee with Human Beings under Opinion 045.093.000-08. **Results:** The subjects of this research were 33 nurses: 14 who worked in Basic Health Units, 8 nurses from a pediatric rooming-in unit, and 11 nurses from the Maternity ward. 28 (84.84%) were female and 5 (15.16%) were male. Almost half of the women, 14 (42.4%), in this study had partial knowledge or were unaware of information on the correct use of child safety seats, while 1 (20%) of the men were unaware. Less than half of the subjects were able to identify the correct age for using a child safety seat, and more than 16 (48.4%) individuals did not know the indicated weight for its correct use. The nurses reported having received information about the infant car seat 5 (15.15%), car seat 23 (69.69%), booster seat with backrest 12 (36.36%), backless booster seat 2 (6.06%), safe driving 15 (45.45%), received no information 11 (33.33%), and 2 (6.06%) did not answer. Regarding educational activities, the majority of professionals, 17 (51.51%), dedicate 15 minutes daily to providing guidance on the use of child safety seats, while 16 (48.49%) use 15 minutes to 2 hours, and no subject reported using more than 2 hours for guidance. However, many professionals, 15 (45.5%), did not offer any information to parents about the safe vehicular transport of children. **Considerations:** It is necessary to rethink how professionals are being trained and informed to carry out educational practices in the prevention of traffic accidents, as well as the correct use of child safety seats and safe behaviors in traffic, aiming at the prevention and promotion of the population's health.

**Keywords:** Nurses, Traffic Accidents, Education, Accident Prevention.



### 13. THE CONTRIBUTION OF THE DISCHARGE MANAGEMENT OFFICE TO REDUCING LENGTH OF STAY IN A HOSPITAL IN THE METROPOLITAN REGION OF ESPÍRITO SANTO: AN EXPERIENCE REPORT

Sabrina Lamas Costa<sup>1</sup>, Bruna Chiabai do Nascimento<sup>2</sup>, Lorena Barros Furieri<sup>3</sup>, Italla Maria Pinheiro Bezerra<sup>4</sup>.

<sup>1</sup> Master's Student in the Postgraduate Program in Public Policy and Local Development at Emescam. <sup>2</sup> Master's Student in the Professional Nursing Postgraduate Program at UFES and supervisor of the Hospital Medicine Project at the Capixaba Institute of Teaching, Research, and Innovation in Health (ICEPi). <sup>3</sup> Coordinator of the Postgraduate Program in Nursing at UFES. <sup>4</sup> Coordinator of the Postgraduate Program in Public Policy and Local Development/Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM/Vitória/Espírito Santo/Brazil.

**Corresponding author:** [sabrina.costa@edu.emescam.br](mailto:sabrina.costa@edu.emescam.br)

**Introduction:** The Discharge Management Office (EGA) is an innovative initiative implemented in Espírito Santo, with the objective of ensuring the safe discharge of hospitalized patients and improving the quality of care provided. It is the responsibility of the EGA to expedite processes that hinder patient flow, both in terms of diagnosis and treatment processes and the hospital's relationship with the healthcare network. **Objective:** To report the contribution of the EGA in reducing the length of stay in a hospital in the Metropolitan Region of the State of Espírito Santo. **Method:** This is an experience report on the evaluation of the intervention of the discharge management office implemented in a state network hospital in Espírito Santo, located in the metropolitan region, from June 2021 to June 2022. The institution has 261 beds, of which 176 are for clinical, surgical, and palliative care wards. The period analyzed was chosen because it was the period in which the methodology was consolidated after its implementation in the hospital. The service's efficiency indicators, percentage of resolved issues, time to resolve the issue, and time between the resolution of the issue and the patient's hospital discharge were analyzed, linked to the typology of services performed, categorized by the patient's issue, and measured from a table filled out by the team. **Results:** Between June 2021 and June 2022, the participation of the multiprofessional team in the development and implementation of the Discharge Management Office service was evident, as was cooperation in the search for management tools for structuring and improving the counter-referral of patients hospitalized in the institution. It was observed that 100% of the issues were resolved and that the time to resolve an issue in June 2021 was 5.9 days. After the implementation of tools such as multidisciplinary rounds and with the identification of the issue at the beginning of hospitalization (within 48 hours of admission), the time was significantly reduced to 0.2 days in June 2022. The median time between the resolution of the issue and the effective hospital discharge was 3.4 days, which represents a reduction in the length of stay of almost 7 days. The most prevalent issues were external exams (33%) and internal exams (23%). **Final Considerations:** We can affirm that the Discharge Management Office service is contributing to the reduction of the length of stay, an increase in bed turnover, and an improvement in the quality of care processes.

**Keywords:** Hospital Discharge; Continuity of Patient Care; Health Management.



#### 14. FAMILY FARMING AND HEALTH POLICIES: THE STATE'S ROLE IN PROTECTION AGAINST PESTICIDES

Cynara Pessôa Fontes da Silva<sup>1,3</sup>, Alan Patrício da Silva<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Elyecleyde Katiane da Silva Oliveira<sup>3</sup>, Italla Maria Pinheiro Bezerra<sup>2</sup>

<sup>1</sup> Master's Student, Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

<sup>2</sup> Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

<sup>3</sup> Federal University of Acre, Rio Branco, Acre, Brazil.

**Corresponding author:** cynara.silva@edu.emescam.br

**Introduction:** The National Policy for Family Farming and Rural Family Enterprises defines a family farmer as a small-scale farmer who owns a rural area not exceeding four fiscal modules, where the family manages the enterprise, and production is predominantly carried out by the family. The State has an essential role in social protection and support for family farming, ensuring both access to productive resources and safe working conditions. **Objective:** To analyze the role of the State in protecting against pesticides through health policies in family farming. **Method:** This is an integrative review study in which searches were conducted in the PubMed, LILACS, SciELO, and BVS databases, using the following DeCS descriptors: (“Urban Agriculture” OR “Sustainable Agriculture”) AND (“Social Protection” OR “Social Justice”) AND (“Public Policy” OR “Access to Healthy Foods”) and (Social Protection OR Social Justice) AND (Sustainable Agriculture) AND (Public Policy OR Access to Healthy Foods). This research was expected to answer the following question: What is the role of the State in social protection and guaranteeing access to the resources of Family Farming? Studies not directly related to family farming, that do not discuss pesticides, or that do not focus on policies were excluded. **Results:** Forty-seven studies were analyzed. Five studies were included, two of which were qualitative, one was a documentary analysis study, and two were quantitative-qualitative studies. The analyzed publications were published from 2014 to 2020. It was observed that despite the existence of public policies aimed at health and the environment, small rural producers suffer and face precarious conditions, which makes agricultural work one of the most dangerous occupations today. Furthermore, the studies showed that the lack of adequate technical assistance, basic sanitation, primary health care, and a scarcity of knowledge about preventive public policies significantly contribute to the risks of pesticide poisoning. **Conclusion:** The study demonstrated that the State has current Public Health Policies, but they do not corroborate with protection to combat the use of pesticides in family farming.

**Keywords:** Urban Agriculture, Sustainable Agriculture, Social Protection, Social Justice, Public Policy, Access to Healthy Foods.



## 15. ACHIEVEMENT OF LDL-CHOLESTEROL GOALS IN A REFERENCE SERVICE IN THE BRAZILIAN PUBLIC HEALTH SYSTEM: AN ANALYSIS AFTER 2 YEARS

Lucas Destefani Natali<sup>1</sup>, Julia Gava Tolentino<sup>1</sup>, Marcelo Scardua Frizzera<sup>1</sup>, Vitor Marques De Martim<sup>1</sup>, Roberto Ramos Barbosa<sup>1</sup>

<sup>1</sup> Santa Casa de Misericórdia de Vitória Superior School of Science, Vitória, Espírito Santo, Brazil

**Corresponding author:** lucas.d.natali@gmail.com

**Introduction:** Guidelines recommend that low-density lipoprotein cholesterol (LDL-c) levels in patients at high cardiovascular risk should be reduced. However, the achievement of these goals is low. Knowing the success rate of lipid control is fundamental to improving therapy and reducing cardiovascular events. **Objective:** To evaluate the effectiveness of lipid-lowering therapy in achieving LDL-c goals for each cardiovascular risk group in a public outpatient clinic in Brazil, conducting a comparative analysis with a previous study from 2022. **Methods:** A cross-sectional, observational, retrospective study was conducted at the Cardiology outpatient clinic of a reference hospital in Brazil. All patients with a history of dyslipidemia seen between September and December 2023 were included. Those who had their first consultation at the time of recruitment were excluded. Data were obtained from medical records, and the success rates for LDL-c goals were analyzed in all cardiovascular risk groups. Statistical analyses were performed using Pearson's chi-square, unpaired Student's t-test, and One-Way ANOVA tests. Differences between groups were considered statistically significant if p-values were less than 0.05. The results were compared with a study of the same methodology conducted at the same center 2 years earlier. **Results:** We included 583 patients; 288 (49.4%) were classified as very high cardiovascular risk, 221 (37.9%) high risk, 59 (10.1%) intermediate risk, and 15 (2.6%) low risk. 91.6% received statins, 60.5% used high-potency statins, compared to 30.4% in the previous study (p=0.0001). 22.5% received ezetimibe, and a single patient used a PCSK9 inhibitor. The overall goal achievement was 38.3%, compared to 28.3% (p=0.0009). In the very high-risk group, achievement was 27.8%, compared to 15.9% (p=0.002), and the high-risk group reached the goal in 44.3% of cases, compared to 31.4% (p=0.01). **Conclusion:** Our study showed a significant improvement in the success rates of achieving LDL-c goals when compared to the previous study. The use of high-potency statins can be attributed to better achievement of levels in the high and very high cardiovascular risk groups. Although the results still show challenges, overcoming therapeutic inertia and optimizing medication have proven to be a functional path for these patients in the real world.

**Keywords:** LDL-cholesterol, Coronary artery disease, Unified Health System.



## 16. ANALYSIS OF THE STATE'S ROLE IN THE HEALTHCARE TREATMENT OF PEOPLE LIVING WITH HIV/AIDS

Sandra Fernandes Maciel<sup>1</sup>, Mônica Rocha Teixeira Narcizo<sup>1</sup>, Alan Patricio da Silva<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Tassiane Cristina Morais<sup>2</sup>

<sup>1</sup> Student, Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, ES, Brazil.

<sup>2</sup> Professor, Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, ES, Brazil.

**Corresponding author:** sandra.faraujo@edu.emescam.br

**Introduction:** The human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) are a constant concern for global Public Health, with significant repercussions for the social and economic development of the population. Aligned with the sustainable development goals of the United Nations' 2030 Agenda, addressing this problem requires coordinated strategies and effective public policies to ensure accessible and equitable treatment and prevention. **Objective:** To describe the role of the State in addressing and providing treatment to people living with HIV/AIDS. **Method:** This is an integrative review, following the recommendations of the methodological structure developed in the PRISMA checklist. Searches were conducted in the MEDLINE/PubMed, LILACS, Web of Science, Scopus, Cochrane Library, Embase databases, and the SciELO virtual library. The following health sciences descriptors were used: HIV, public power, public policy, state, anti-retroviral agents, and policy, in conjunction with the Boolean operators AND and OR, to construct the search strategies. The research question was: What is the role of the State in promoting public policies directed at the healthcare treatment of people living with HIV/AIDS? **Results:** A total of 112 studies were initially found. After applying the eligibility criteria, 09 articles were read in their entirety, and of these, a total of 05 articles were included in this review, all of which were qualitative research. The analyzed articles were published between 2018 and 2022, with studies conducted in Uganda, Ethiopia, Botswana, and Zimbabwe. Public policies aimed at youth, adults, and women who use substances were explored, as well as the impact and linkage to treatment and use of antiretroviral therapy. The results showed reflections on economic empowerment from a health perspective, addressing and preventing infection, the use of antiretroviral therapy, and treatment efficacy. These factors, associated with others, are crucial for closing the global gap as a threat to public health. **Conclusion:** Public policies have shown progress over these four decades in combating the infection. The countries of Uganda, Botswana, and Zimbabwe, according to the UNAIDS 2023 Global Report, have achieved the 95-95-95 Targets. Ethiopia has also made encouraging progress. However, more research and policy dialogues on the intersections of financial security and coping strategies for prevention and management are needed to reduce the global gap and mitigate the impacts of HIV/AIDS on collective health and sustainable development.

**Keywords:** HIV, Public Power, Public Policies, State, Antiretroviral Therapy, Policy.



## 17. COMPARATIVE ANALYSIS OF ARBOVIROSIS EPIDEMIOLOGICAL BULLETINS: EVOLUTION BETWEEN 2020 AND 2024 IN THE STATE OF CEARÁ

Cicera Hellen da Silva<sup>1</sup>, Geizimayra Campos Pereira<sup>1</sup>, Isley de Sousa Sales<sup>1</sup>, Livia Teixeira de Sousa<sup>1</sup>,  
Olivia de Almeida Duarte<sup>1</sup>, Emery Ciana Figueiredo Vidal<sup>1</sup>

<sup>1</sup> Regional University of Cariri. Crato, CE, Brazil

**Corresponding author:** cicerahellen.dasilva@urca.br

**Introduction:** Arboviruses are viral diseases transmitted by mosquitoes, such as dengue, chikungunya, and zika, transmitted by *Aedes aegypti*. The discussion presented shows a comparative analysis between the 2020 and 2024 bulletins on the trends and changes in the epidemiological landscape of these arboviruses in the state. **Objective:** To compare the incidence of arboviruses in the years 2020 and 2024 in the state of Ceará, in order to identify changes in transmission and the effectiveness of control strategies. **Method:** A descriptive and comparative study on urban arboviruses in Ceará was conducted, with data extracted from epidemiological bulletins of the State Health Secretariat. The research evaluated indicators of dengue, chikungunya, and zika, including notified and confirmed cases, incidence, mortality rate, severe cases, and entomological surveillance results. **Results:** The incidence of arboviruses in Ceará between 2020 and 2024 indicates a positive analysis, with a decrease in cases, suggesting an increase in prevention and control projects. In 2024, cases of dengue and chikungunya decreased, and there were no reports of deaths or confirmed cases of Zika. The control of the *Aedes aegypti* mosquito in the municipalities was verified, confirming the effectiveness of the actions. Analyzing these results indicates the benefit of public health strategies; however, the continuation of these projects is essential for the safety of the population. **Conclusion:** The analysis showed significant reductions in cases of dengue, chikungunya, and zika virus between 2020 and 2024, with improvements in vector control conditions. Research and surveillance strategies are effective, despite areas with high infestation. The continuation of research and the improvement of strategies are essential to control arboviruses in the state.

**Keywords:** Arboviruses, Vector Control, Epidemiological Surveillance, Public Health.



## 18. PEDAGOGICAL PRACTICES AND THEIR INFLUENCE ON THE ACCESS AND RETENTION OF STUDENTS WITH DISABILITIES IN THE EDUCATIONAL SYSTEM: AN INTEGRATIVE REVIEW

Kárem Vieira Fonseca<sup>1</sup>; Alan Patrício da Silva<sup>2</sup>; Fabiana Rosa Neves Smiderle<sup>2</sup>; Lilian Cristiane Moreira<sup>3</sup>; Italla Maria Pinheiro Bezerra<sup>2</sup>

<sup>1</sup> Student, Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória

<sup>2</sup> Professor, Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória

<sup>3</sup> Professor, Undergraduate Program, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória

**Corresponding author:** [karem.fonseca@emescam.br](mailto:karem.fonseca@emescam.br)

**Introduction:** The inclusion of students with disabilities in education is increasingly necessary for the construction of a more just and egalitarian society. Public policies can influence the promotion of inclusion in the educational environment by examining both government guidelines and institutional practices aimed at ensuring equal access for all students. The study conducts an integrative review of pedagogical practices and their implications for the access and retention of students with disabilities in school. The relevance of the topic supports the need to improve public policies and educational practices to ensure effective inclusion. **Objective:** To analyze how current pedagogical practices influence the access and retention of students with disabilities in inclusive educational environments. **Method:** This is an integrative review that seeks to build an understanding of the state of the art on the topic, as well as to study its meanings and define its relationships. The PRISMA guidelines direct the organization of the review stages, which consider the purpose and selection of studies, such as theme definitions, criteria, data structuring, study evaluation, and interpretation of results. We used the Lilacs, Medline/PubMed, and Scielo databases, using specific descriptors. The analysis of the studies included screening titles and abstracts and selecting those compatible with the objectives of this work. **Results:** Of the 86 papers found, 7 met the inclusion criteria, and 5 presented relevant data to answer the guiding question. These 5 articles, published between 2006 and 2022, address challenges and strategies for the inclusion of students in inclusive education. From the results, we highlight: the impact of the involvement of students with and without disabilities on stigma and their career aspirations, as, given their social disadvantage, students attending regular schools report greater stigmatization and broader professional aspirations; success factors in the school transition for students with disabilities in European contexts, emphasizing the importance of autonomy development, family involvement, and participatory planning; the relevance of facilitating environments for the cognitive development of students with special needs, observing improvements in language and school performance. **Conclusion:** These studies point to the challenges of educational inclusion, especially in supporting the specific needs of students with disabilities, suggesting that, despite advances in inclusive education, gaps persist in access and the effectiveness of pedagogical practices for students with disabilities.

**Keywords:** Inclusive Education, Social Inclusion, Learning Disabilities.





**19. ASSOCIATION OF CLINICAL CHARACTERISTICS AND THE  
HOSPITALIZATION PROCESS WITH THE FUNCTIONALITY OF CRITICALLY  
ILL PATIENTS LESS THAN TWO YEARS AFTER DISCHARGE FROM THE  
INTENSIVE CARE UNIT**

Anne Lara Ribet Kill<sup>1</sup>, Marcelo Haase da Silva<sup>1</sup>, Maria Eduarda Mendes da Silva<sup>1</sup>, Letícia Guimarães Peyneau<sup>2</sup>

<sup>1</sup> Undergraduate Student, Physical Therapy Program, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória-ES. Brazil.

<sup>2</sup> Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** annelara\_anne@hotmail.com

**Introduction:** The process of hospitalization in an ICU is responsible for triggering problems capable of reverberating for up to 5 years after the individuals' hospital discharge. In this sense, there is a need to monitor the socioeconomic and clinical condition and evaluate the functionality of patients some time after hospital discharge, thus fostering the creation of policies that address this population group in a more comprehensive and effective manner. **Objective:** To associate the clinical characteristics and the hospitalization process with the functionality of patients less than two years after discharge from the ICU. **Methods:** This is a Retrospective Cohort Longitudinal Observational Study, which interviewed 29 of the 87 previously collected medical records, via telephone call, of patients up to 2 years after their discharge, evaluating their socioeconomic and clinical condition, characteristics of the hospitalization, and current functionality, using the Functional Independence Measure (FIM) Scale to grade it. **Results:** The data suggest a sample that is predominantly elderly, with low education and economic status, who chose not to report on smoking and drinking habits, and of those who did report, the majority declared having such habits. Furthermore, most of the sample reported having more than one comorbidity associated with the clinical condition that led to hospitalization. Regarding functionality, the vast majority of the sample did not show a significant decline. **Conclusion:** It was concluded that there was no association between the clinical characteristics and the hospitalization process with the functionality of the analyzed patients. However, two important findings were made: the first suggests a relationship between longer hospitalization time and lower functionality, and the second refers to the high rate of physiotherapy performed by the analyzed participants.

**Keywords:** Functionality, ICU, Physiotherapy, Hospital Discharge.



## 20. ASSOCIATION BETWEEN OBESITY AND LIFE CHARACTERISTICS OF WOMEN IN VITÓRIA/ES

Nathália Miguel Teixeira Santana<sup>1</sup>; Franciéle Marabotti Costa Leite<sup>1</sup>

<sup>1</sup> Lavisa/Center for Health Sciences/Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil.

**Corresponding author:** nathalia.miguel@hotmail.com

**Introduction:** Obesity is a major public health concern due to its increasing prevalence in several countries worldwide. A study showed that women have a higher chance of becoming obese compared to men. In Brazil, the adult population has been showing progressive weight gain over the years. Due to its multifactorial nature, it has different pathways for its development, including genetic, socioeconomic, behavioral, and environmental factors. **Objective:** To associate obesity with socioeconomic, clinical, behavioral characteristics, and life experiences of women residing in Vitória-ES. **Method:** This is a cross-sectional, population-based study conducted in the city of Vitória, Espírito Santo, Brazil. Women over 18 years of age were eligible. Obesity was measured from self-reported weight and height, characterizing as obese individuals with a body mass index (BMI) equal to or greater than 30 kg/m<sup>2</sup> according to the World Health Organization (WHO) classification. Logistic regression was used to calculate crude and adjusted odds ratios (OR). All analyses were performed in the Stata® 14.0 program. **Results:** 1,073 women were studied. In the analysis adjusted for socioeconomic and clinical variables, obesity was associated with all age groups, except for those 60 years or older (p=0.003), compared to those aged 18-29. The lowest categories of education and family income had about twice the chance of developing obesity (OR: 2.09; 95% CI 1.33-3.28; p=0.006 and OR: 2.36; 95% CI 1.49-3.74; p<0.001, respectively) compared to the highest categories. Women with 3 or more pregnancies had a higher chance of developing obesity (3-4 pregnancies: OR: 1.79; 95% CI 1.07-2.98 and 5 or more pregnancies: OR: 2.03; 95% CI 1.02-4.06; p=0.002) compared to those who had not been pregnant. The presence of diabetes and hypertension was associated with a BMI > 30 (p<0.05). **Conclusion:** Obesity is associated with age, family income, years of study, number of pregnancies, and chronic diseases, such as diabetes and hypertension, regardless of other factors.

**Keywords:** Obesity, BMI, Women.



## 21. PHYSIOTHERAPEUTIC CARE FOR HOSPITALIZED CHILDREN: AN EXPERIENCE REPORT

Camila Marques Magnago<sup>1</sup>, Giovanna Costa de Oliveira<sup>2</sup>, Lilian Louise Dias<sup>2</sup>, Patrícia de Oliveira Costa<sup>2</sup>, Leticia Guimarães Peyneau<sup>3</sup>, Richardson Morais Camilo<sup>4</sup>.

<sup>1</sup> Undergraduate Student, Physical Therapy Program, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil;

<sup>2</sup> Physical Therapist at the Serra Maternal and Child Hospital (HMIS), ES, Brazil;

<sup>3</sup> Professor, Undergraduate Physical Therapy Program, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil.

<sup>4</sup> Physical Therapist Responsible for the Physical Therapy Service at the Serra Maternal and Child Hospital (HMIS), ES, Brazil;

**Corresponding author:** camila.magnago@edu.emescam.br

**Introduction:** Physiotherapy is increasingly present in the hospital environment, as its implementation is essential for the patient's well-being. When dealing with children, this scenario becomes more challenging, as they may not always understand the fundamental nature of physiotherapeutic management. **Objective:** To describe the perception of a physiotherapy student about the physiotherapeutic care provided at the Serra Maternal and Child Hospital (HMIS). **Method:** This is an experience report based on the experience of a student from the EMESCAM Physical Therapy course, who was present in the Neonatal Intensive Care Unit (NICU) and the ward during the months of September, October, and November 2024, observing the physiotherapeutic care provided to children hospitalized at HMIS. **Results:** The experience of observing physiotherapeutic care for hospitalized children in the ward and the NICU provided an insight into the importance of this care in promoting and recovering the health of these individuals, with a noticeable improvement in the patient's respiratory condition after manipulation. Physiotherapy, both respiratory and motor, through procedures such as bronchial hygiene maneuvers, respiratory exercises, lung expansion maneuvers, nasal hygiene with saline solution, aspiration, nasal O<sub>2</sub> catheter, invasive and non-invasive ventilation, and active mobilization, aims to reduce the length of hospitalization with the early start of rehabilitation, thus ensuring a better quality of life. It is also worth noting that for the care of the pediatric population, it is not only necessary to put knowledge and techniques into practice, but it is also essential to win over the patient, which can be achieved through playful approaches and therapeutic play, thus promoting an environment where the child feels at ease and enjoys performing physiotherapy. **Conclusion/Final Considerations:** It is extremely relevant to hire professionals who are prepared and qualified for the care of the pediatric population, in order to ensure the best care through the union of a multidisciplinary team. Furthermore, the importance of this extracurricular experience of observing physiotherapeutic care for the training and future professional life of students is perceived. Finally, the need for playfulness in an environment where patients need attention, care, and affection is emphasized.

**Keywords:** Physiotherapy, Child, Hospital.



## 22. SELF-IMAGE IN THE PRE- AND POST-OPERATIVE PERIOD OF PATIENTS WITH ADOLESCENT IDIOPATHIC SCOLIOSIS UNDERGOING ARTHRODESIS

Áurea Barcelos Sperandio<sup>1</sup>, Cinara Thamires da Costa Silva<sup>1</sup>, Igor Machado Cardoso<sup>2</sup>, José Lucas Batista<sup>3</sup>, Priscila Rossi de Batista<sup>4</sup>, Charbel Jacob Junior<sup>4</sup>

<sup>1</sup> Students, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, ES, Brazil

<sup>2</sup> Head of the Spine Surgery Service at the Medical Hospital Center of Vila Velha and Santa Casa de Misericórdia de Vitória, Vitória, ES, Brazil

<sup>3</sup> Assistant Physician of the Spine Surgery Service at the Medical Hospital Center of Vila Velha and Santa Casa de Misericórdia de Vitória, Vitória, ES, Brazil

<sup>4</sup> Professors, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, ES, Brazil

**Corresponding author:** cinara.silva@edu.emescam.br

**Introduction:** Adolescent Idiopathic Scoliosis (AIS) is characterized by a spinal deformity that affects 1% to 3% of individuals from the age of 10, with a higher incidence in females. The changes caused by AIS include deformities in the rib cage, changes in body configuration, and a rib hump, which can impair biopsychosocial well-being and, consequently, the quality of life of patients. Among the therapeutic possibilities, surgical correction aims to stop the progression of the curve, as well as to improve the balance and alignment of the spine. **Objective:** To compare the psychosocial well-being of patients undergoing surgical correction of AIS by arthrodesis. **Method:** This is a longitudinal, observational, descriptive study with a quantitative approach, conducted between March 2009 and December 2018 at the Hospital Santa Casa de Misericórdia de Vitória. 32 patients with AIS aged 12 to 17 years who underwent spinal arthrodesis participated. The inclusion criteria included patients of both sexes, diagnosed with AIS, who underwent arthrodesis for the correction of the scoliotic curvature, between 10 and 17 years of age. Participants with a previous history of spinal surgery were excluded. A self-administered questionnaire was applied before and six weeks after surgery to assess self-image, interpersonal relationships, discomfort with the rib hump, and also the perception of the difference in shoulder height. The data were analyzed using the McNemar test, through the SPSS statistical software. The study is in accordance with the guidelines and regulatory norms for research involving human beings of Resolution 466/12 of the National Health Council/Ministry of Health. **Results:** The sample consisted of 32 patients with a mean age of  $14.2 \pm 1.76$  years. A significant increase in satisfaction with self-image was observed, going from 90.6% dissatisfaction in the pre-operative period to 96.9% satisfaction in the post-operative period ( $p < 0.0001$ ), with a significant reduction in discomfort with the rib hump (75% vs 50%,  $p = 0.008$ ). In addition, there was a significant improvement in the perception of the impact of scoliosis on interpersonal relationships (50% vs 93.8%,  $p < 0.0001$ ). Finally, the perception of the difference in shoulder height was maintained ( $p = 0.564$ ). **Conclusion/Final Considerations:** Overall, the surgery had a positive effect on the psychosocial well-being of the patients, indicating that the correction of the deformity improved aspects related to self-perception, which can generate a positive impact on their quality of life.

**Keywords:** Adolescent, Scoliosis, Self-image, Psychosocial Impact.



### 23. SELF-PERCEPTION OF CAREGIVERS OF ELDERLY PEOPLE ASSISTED BY A FAMILY HEALTH UNIT IN VITÓRIA – ES

Maressa da Silva Felici<sup>1,3</sup>, Sara Moraes Muniz<sup>1,3</sup>, Maria Carolina Pereira e Silva<sup>2,3</sup>, Luciana Carrupt Machado Sogame<sup>2,3</sup>

<sup>1</sup> Undergraduate Student, Physical Therapy Program, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM, Vitória, Espírito Santo, Brazil. <sup>2</sup> Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM, Vitória, Espírito Santo, Brazil. <sup>3</sup> Center for Studies in Public Health, Life Cycles and Interdisciplinary Care (NESPCI), Vitória, Espírito Santo, Brazil.

**Corresponding author:** maressa.felici@edu.emescam.br

**Introduction:** The care of the elderly, provided by a caregiver, encompasses multiple responsibilities that can give rise to the self-perception of emotional, psychological, and physical dysfunctions resulting from the burden of care. **Objective:** To describe the self-perception of caregivers of elderly people assisted by a Family Health Unit (USF) in Vitória – ES. **Method:** This is an exploratory and qualitative research conducted in a USF located in the Jesus de Nazareth neighborhood. A saturation sample of up to 30 caregivers was established based on important qualitative studies. Caregivers of both sexes, whose elderly were registered in the Bem-Estar Network and were assisted by the Family Health Strategy, were included. Caregivers who were not located, whose elderly person had died or changed address, caregivers who had cognitive impairments to answer the questionnaire, and who did not accept the recording of their speech were excluded. The address and telephone number of the elderly person were collected through the Bem-Estar Network, and upon calling, it was asked if they had a caregiver. In affirmative answers, the contact was directed to the caregiver who, after agreeing to participate in the research, was interviewed. The caregiver's permission to record the speeches was requested, aiming to minimize memory bias on the part of the interviewers. The semi-structured interview was conducted from November 2023 to February 2024 and included open-ended questions regarding responsibility for the health care of the elderly and the demands and challenges in providing care. Bardin's Thematic Analysis was used to analyze the reports. **Results:** 21 caregivers were interviewed, of whom 66.67% were women, 57.14% were elderly people, 85.71% had comorbidities and took daily medication, 33.33% practiced physical activity, 38.10% had a leisure activity, all were informal/family caregivers, and 52.38% had an individual income of up to 1 minimum wage. Challenges in providing care related to the health demands of the elderly were identified through the reports. Caregivers reported difficulties in dealing with behavioral changes and symptoms experienced by elderly people with neurological diseases. It was observed that the increase in care demands, due to the psychological changes of the elderly, culminated in a self-perception of stress, frustration, a feeling of inability to care, as well as greater physical and mental exhaustion of the caregiver, causing a multidimensional burden. **Conclusion:** The limitations of the elderly impact the health self-perception of caregivers, highlighting the need to strengthen multiprofessional health services to reduce the burden.

**Keywords:** Caregiver, Elderly, Self-perception, Caregiver burden.



## 24. EVALUATION OF THE RESPIRATORY FUNCTION OF NEWBORNS FROM VAGINAL AND CESAREAN DELIVERY IN A PUBLIC MATERNITY HOSPITAL IN GREATER VITÓRIA

Dayara Louzada Campos<sup>1</sup>, Juliane Costa dos Santos<sup>1</sup>, Laís Calvi Marchioro<sup>1</sup>, Letícia Guimarães Peyneau<sup>2</sup>

<sup>1</sup> Undergraduate Student, Physical Therapy Program, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória-ES. Brazil. <sup>2</sup> Master's Professor, Adjunct to the Undergraduate Physical Therapy Program, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** dayaralouzada18@gmail.com.

**Introduction:** In the neonatal period, the newborn (NB) is usually subject to developing respiratory disorders, since at birth, it goes through a process of adaptation to the external environment. Such complications tend to appear in the first hours after birth and can be three times greater in NBs from cesarean section when compared to those born by vaginal delivery. In this context, public policies play a fundamental role in the development of strategies that seek to reduce maternal-fetal mortality, reduce cesarean rates, and encourage normal delivery. **Objective:** To evaluate the respiratory dysfunctions found in term newborns in the first hours of life associated with the mode of delivery. **Methods:** This is a cross-sectional, analytical, observational study with a quantitative approach, conducted at the Pró-Matre Maternity Hospital, located in Greater Vitória and approved by the Research Ethics Committee. A specific data collection form was applied to characterize the profile of the participants and evaluate respiratory function, obtaining a convenience sample of 49 newborns. The descriptive analysis of the data was carried out using the Microsoft Excel program, and the association between the variables was analyzed using the Chi-square or Fisher's exact test. **Results:** The NBs had a life span of 6 to 49 hours, with the majority being born by vaginal delivery, male, with adequate weight, gestational age with an average of 38.9 weeks, and APGAR indicating a good prognosis. About 85.7% had no type of respiratory affection; however, 14.2% had a clinical diagnosis, presenting Respiratory Distress, Transient Tachypnea, Pneumomediastinum, and Neonatal Jaundice. In the association of respiratory function with the mode of delivery, values below the level of significance ( $p > 0.05$ ) were obtained in all associations. **Conclusion:** No significant associations were found between the mode of delivery and respiratory dysfunctions; however, during the descriptive analysis, respiratory alterations were observed in NBs born by cesarean section as well as by vaginal delivery. Thus, the need for new research that deepens the investigation of these correlations in larger samples in different profiles of maternity hospitals becomes evident, in order to ensure better assistance and consequently better maternal and neonatal outcomes, ensuring that public policies are truly effective.

**Keywords:** Respiratory function, Newborns, Vaginal Delivery, Cesarean Section, Public Policies.



## 25. BENEFITS OF THE PULMONARY REHABILITATION PROGRAM ON THE PATIENT'S WELL-BEING AND QUALITY OF LIFE

Beatriz Gazzoni Caetano<sup>1</sup>, Gabriela Demoner Guisso<sup>1</sup>, Kamila de Oliveira Cazagrande<sup>1</sup>, Leandra Carolina Paganini Gottardo<sup>1</sup>, Leticia Guimarães Peyneau<sup>2</sup>, Giovana Machado Souza Simões<sup>2</sup>

<sup>1</sup> Students of the physiotherapy course at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória. Vitória, Espírito Santo, Brazil.

<sup>2</sup> Professors at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória. Vitória, Espírito Santo, Brazil.

**Corresponding author:** Leticia.Peyneau@emescam.br

**Introduction:** Pulmonary rehabilitation is a comprehensive therapeutic approach that includes structured programs of education, prevention, and health promotion, designed to improve the clinical outcomes of patients with chronic respiratory diseases and post-Covid 19 sequelae. These interventions aim to provide a better quality of life through the integration of respiratory control techniques and supervised physical exercise. Pulmonary rehabilitation allows patients to regain control of their respiratory health, strengthening respiratory muscles, improving physical endurance, and reducing dyspnea and fatigue. In addition to the physical benefits, it is known that pulmonary rehabilitation also contributes positively to the emotional and psychological well-being of patients, providing them with greater independence and self-confidence. **Objective:** To evaluate the perception of patients participating in a Pulmonary Rehabilitation Program at a philanthropic teaching clinic in Vitória/ES. **Method:** This is an observational, cross-sectional, and quantitative study, conducted through an electronic questionnaire, developed using Google Forms, to investigate the perception of patients participating in a Pulmonary Rehabilitation Program at a philanthropic teaching clinic in Vitória/ES. The questions were designed in a Likert model, with alternatives ranging from "strongly agree," "agree," "indifferent," "disagree," and "strongly disagree." The data were then collected in a spreadsheet using Microsoft Excel software and analyzed descriptively, being expressed in percentages. This research has been approved by the Research Ethics Committee. **Results:** The sample consisted of 30 patients participating in the Pulmonary Rehabilitation Program, of whom 70% (n=21) responded to the research questionnaire. Of this participating sample: 38.1% strongly agree and 61.9% agree that they perceived a significant improvement in respiratory capacity during daily activities; 33.3% strongly agree, 61.9% agree, and only 4.8% are indifferent that they feel more confident to perform physical activities after participating in the Pulmonary Rehabilitation Program; 47.6% strongly agree and 52.4% agree that the guidance received in the project contributed to a better understanding of health care; 85.7% strongly agree and 14.3% agree that the physiotherapy team was accessible and committed to meeting their health needs; 57.1% strongly agree and 42.9% agree that the Pulmonary Rehabilitation Program contributed to the reduction of the sensation of dyspnea. **Conclusion:** The Pulmonary Rehabilitation Program proved to be beneficial for the respiratory health and quality of life of the patients. The satisfaction with the physiotherapy team reinforces the value of humanized care, evidencing the effectiveness of the program in both physical recovery and patient well-being.

**Keywords:** Pulmonary Rehabilitation, Well-being, Quality of Life.



**26. CHARACTERIZATION OF EXCLUSIVE BREASTFEEDING, BREASTFEEDING,  
AND EARLY INTRODUCTION OF COMPLEMENTARY FEEDING IN CHILDREN  
UNDER 6 MONTHS IN THE SOUTHEAST REGION: AN ANALYSIS OF THE 2019  
PNS**

Tamires dos Santos Vieira<sup>1,4</sup>, Iago Sales Orlandi<sup>4</sup>, Jair Rios Neto<sup>4</sup>, Luiz Carlos de Abreu<sup>1-4</sup>

<sup>1</sup> Postgraduate Program in Nutrition and Health, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil.

<sup>2</sup> Department of Integrated Health Education, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil.

<sup>3</sup> Postgraduate Program in Collective Health, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil.

<sup>4</sup> Laboratory for Study Design and Scientific Writing, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil.

**Introduction:** Infant nutrition is essential for healthy development and the prevention of diseases throughout life. Breastfeeding and a balanced introduction to complementary foods are fundamental in the first two years of life, a critical period for growth and development. The characterization of these dietary patterns in children under two years of age provides valuable insights for evaluating public policies and directing specific interventions. This study aims to characterize continued breastfeeding and the introduction of complementary foods in the Southeast region of Brazil. **Objective:** To describe exclusive breastfeeding and the introduction of complementary foods in children under 6 years of age in the Southeast region. **Method:** This is a descriptive study of secondary data from the 2019 National Health Survey (PNS) by the Ministry of Health. Data collection occurred between August 2019 and March 2020, with questionnaires administered by trained interviewers to one resident over 15 years old per household, following a methodology already adopted in similar surveys. Data from residents aged 20 or older responsible for the households were analyzed. The feeding of infants was characterized based on reports from those responsible regarding: consumption of breast milk (yes/no), healthy foods (fruits, vegetables, legumes, beans, rice, meat/eggs, potatoes/cassava, and cereals), and unhealthy foods (soft drinks, artificial juices, cookies, and sweets). Analyses and stratifications by states in the Southeast region were performed using IBM SPSS Statistics® software (version 25.0). **Results:** In the Southeast, São Paulo had the highest percentages of exclusive breastfeeding (51.3%; 95% CI: 51.1%–51.5%) and its absence (47.4%; 95% CI: 47.1%–47.7%). The consumption of unhealthy foods was most evident in Rio de Janeiro and Minas Gerais, both with 31.3% (95% CI: 30.9%–31.7%). In Espírito Santo, this consumption represented 8% (95% CI: 7.7%–8.2%), standing out as the state's main contribution in this category. Apart from São Paulo, the other states had a higher prevalence of unhealthy foods compared to healthy ones. **Conclusion:** The study revealed variations in the patterns of exclusive breastfeeding and the introduction of complementary foods in the Southeast, with São Paulo leading in exclusive breastfeeding and other states showing higher consumption of unhealthy foods. These data show that Brazil is far from the WHO recommendation of exclusive breastfeeding until six months, highlighting the need for regional public policies aligned with the Sustainable Development Goals, aimed at promoting breastfeeding, infant food education, and sustainable practices.

**Keywords:** Population Surveys, Exclusive Breastfeeding, Introduction of Complementary Feeding.





## 27. ELECTRONIC CIGARETTES AND ENVIRONMENTAL POLLUTION: IMPACTS ON HEALTH AND SUSTAINABILITY

Nathalya das Candeias Pastore Cunha<sup>1</sup>, Italla Maria Pinheiro Bezerra<sup>2</sup>, Flaviane Cristina de Oliveira Ferreira Delanos<sup>3</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM

<sup>2</sup> Coordinator and Professor of the Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM

<sup>3</sup> Professor at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória-ES. Brazil. PhD student in Collective Health – UFES.

**Corresponding author:** nathalya.candeias.pastore@gmail.com

**Introduction:** The growth in the use of electronic cigarettes in recent decades has brought to light concerns not only related to human health but also to the environmental impact caused by these devices. While many consume electronic cigarettes, driven by the idea of them being a "cleaner and safer" alternative to traditional cigarettes, the waste generated by their electronic and chemical components presents harmful environmental risks. The lack of proper disposal and the toxic substances present in their batteries and cartridges are dangerous for atmospheric pollution, affecting ecosystems and public health. **Objective:** To describe the environmental impact caused by the electronic and chemical waste generated by electronic cigarettes. **Method:** This is an integrative review based on a search in PubMed, using the descriptors: Vaping AND Environmental Pollution AND Environment and Public Health. Inclusion criteria were: free full texts, available in Portuguese and English, published in the last 5 years. Articles that, after reading the title and abstract, were not related to the topic or were literature reviews were excluded. This research is part of the project funded by FAPES Call 28/2022 – UNIVERSAL, "Educational Technology focusing on the risks and harms of using Electronic Cigarettes: Caring for Oneself and Others," T.O No. 878/2023. It also includes a Master's scholarship from Call 69/2022 – National Council for Scientific and Technological Development (CNPq). **Results:** Electronic cigarettes generate large amounts of electronic waste and toxic chemical substances, such as batteries and liquids containing nicotine, which pollute the air, soil, and water, contributing to environmental contamination and affecting human health. The improper disposal of these devices aggravates the problem, exposing workers and communities to the risks of heavy metals and chemical products. This scenario highlights the incompatibility with SDG 12, which requires sustainable consumption and production patterns. **Conclusion:** The use of electronic cigarettes generates electronic waste and toxic chemical substances that pollute the environment and harm human health, contaminating ecosystems and water sources. The industry needs to adopt more sustainable practices, such as recycling and safe disposal programs, to align with SDG 12, which aims to ensure responsible consumption and production. Public policies are essential to mitigate environmental impacts and promote sustainable alternatives, reducing the damage of this new form of pollution.

**Keywords:** Vaping, Environmental Pollution, Environment and Public Health.



## 28. FETAL SURGERY FOR MENINGOMYELOCELE CORRECTION: AN INTEGRATIVE LITERATURE REVIEW

Rafaela Sobreira La Rocca<sup>1</sup>, Jair Rios Neto<sup>1,2</sup>, Susanne Rodrigues de Faria Dantas<sup>1</sup>, Luana Ribeiro Dantas<sup>1</sup>, Emily da Conceição Sarcinelli<sup>1</sup>, William José da Silva Messias, Naeme José de Sá Filho<sup>1,3</sup>.

<sup>1</sup> Multivix University Center. Vitória, ES, Brazil.

<sup>2</sup> Laboratory for Study Design and Scientific Writing of the Health Sciences Center. Federal University of Espírito Santo. Vitória, ES, Brazil.

<sup>3</sup> Department of Gynecology and Obstetrics. Federal University of Espírito Santo. Vitória, ES, Brazil.

**Corresponding author:** rafaelasobreiralarocca@gmail.com

**Introduction:** Meningomyelocele (MMC) is a severe form of spina bifida resulting from the failure of the neural tube to close during embryogenesis. This condition leads to the protrusion of the spinal cord and meninges through an opening in the spine, causing neurological and systemic complications such as paralysis, motor dysfunctions, hydrocephalus, and Arnold-Chiari II malformation. The exposure of nervous tissue to amniotic fluid causes progressive neurological degeneration, impacting quality of life and increasing treatment costs. Fetal surgery is a promising intervention to reduce neurological complications. **Objective:** To review the literature on the clinical manifestations, diagnostic methods, and surgical approaches for MMC, with a focus on fetal surgery, which corrects the lesion before birth, improving neurological outcomes and reducing the need for ventricular shunting, despite risks such as premature birth. **Method:** An integrative literature review was conducted in databases such as PubMed, SciELO, and Google Scholar, covering articles from 2010 to 2023, with an emphasis on clinical manifestations and surgical approaches, especially fetal surgery. **Results:** Neurological deficits include lower limb paralysis and loss of sensation. Lesions above L2 generally require the use of a wheelchair; lesions below S1 allow some patients to walk with assistance, although with deformities and postural dyscontrol. Urinary and intestinal dysfunctions are common due to the compromise of the sacral roots, resulting in a neurogenic bladder and bowel. Between 60% and 90% of patients develop hydrocephalus, caused by the Arnold-Chiari II malformation, which affects the circulation of cerebrospinal fluid. The traditional treatment consists of postnatal repair, closing the lesion in the first 24 to 48 hours after birth, preventing infections and minimizing additional damage, but without reversing the damage caused by exposure to amniotic fluid. Fetal surgery, performed between 19 and 25 weeks of gestation, corrects the lesion in utero, preventing neurological degeneration. Studies indicate that this approach reduces the need for ventricular shunting and improves mobility, but it presents risks such as premature birth and maternal complications, like rupture of membranes and infections. **Final Considerations:** Fetal surgery shows promise in the treatment of MMC, reducing neurological complications and improving quality of life. However, the risks of premature birth and maternal complications are relevant challenges. The advancement of minimally invasive techniques, such as fetoscopy, may minimize these risks, maximizing the benefits of early intervention.

**Keywords:** Meningomyelocele, Fetal surgery, Congenital abnormalities, Neurological dysfunction.



## 29. AWARENESS ABOUT TOBACCO USE FOR ADOLESCENTS IN A PUBLIC SCHOOL IN VITÓRIA-ES: AN EXPERIENCE REPORT

Alice Gomes Brumatti<sup>1</sup>, Emanuele Pansini Mazocco<sup>1</sup>, Nathália Rangel Nogueira<sup>1</sup>, Nathielle Pereira Pimenta<sup>1</sup>, Letícia Guimarães Peyneau<sup>2</sup>

<sup>1</sup> Undergraduate Students in Physiotherapy. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

<sup>2</sup> Professor at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** emanuele.mazocco@edu.emescam.br

**Introduction:** The use of cigarettes represents a serious public health problem, with a direct impact on the physical and economic health of populations. Thus, smoking is one of the main risk factors for a series of chronic diseases that affect millions of people worldwide. In addition to the health consequences, cigarettes are associated with the impoverishment of the population, as the costs of treating tobacco-related diseases and the loss of productivity are significant for both the health system and family economies. **Objective:** To describe the perception of physiotherapy students regarding the awareness of adolescents in a public school in Vitória - ES about the harms arising from the use of tobacco and other toxic substances that make up conventional and electronic cigarettes for health and quality of life. **Method:** This is an experience report based on the experience of physiotherapy students from EMESCAM, in a project to raise awareness about the risks and consequences of tobacco use for adolescents in the 8th grade of a public elementary school in Vitória-ES, during the month of October 2024. **Results:** The experience carried out with the group of adolescents proved to be essential, given the importance of making them aware of the harms of smoking and its derivatives, especially in an audience so susceptible to the biases of age, socioeconomic context, and spatial conditions. It is worth noting that the information transmitted to the project participants is intended to transcend the school space, also reaching individuals in their close circle. In this context, based on the feedback and reflections of the students on their own lifestyle, the intervention proved to be necessary, aiming to foster a broader awareness that promotes health and quality of life in the community. The preventive and informative interventions about the impact of smoking are aligned with the Sustainable Development Goals (SDGs), which aim to promote health, well-being, and reduce inequalities. **Conclusion/Final Considerations:** It is essential to share this knowledge with adolescents, as most start smoking in this age group. The objective is to guide them to make healthy decisions that positively impact their health and quality of life, both in the short and long term. For us, as students, this experience was enriching, as we were able to apply and disseminate the knowledge acquired, promoting health education and seeking to transform habits and environments for a more conscious and healthy future.

**Keywords:** Adolescence, Awareness, Smoking.



### 30. PHYSICAL ASSESSMENT CRITERIA FOR THE DIAGNOSIS OF ADOLESCENT IDIOPATHIC SCOLIOSIS: AN INTEGRATIVE REVIEW

Cinara Thamires da Costa Silva<sup>1</sup>, Ruan Turial Bissoli<sup>1</sup>, Vinícius da Costa Mathias<sup>1</sup>, Aébe Alves Torres<sup>2</sup>,  
Pâmela Reis Vidal<sup>2</sup>, Priscila Rossi de Batista<sup>2</sup>

<sup>1</sup> Students at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM,  
Vitória, ES, Brazil

<sup>2</sup> Professors at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM,  
Vitória, ES, Brazil

**Corresponding author:** cinara.silva@edu.emescam.br

**Introduction:** Adolescent Idiopathic Scoliosis (AIS) is a deformity characterized by an abnormal lateral curvature of the spine, which causes physical and psychosocial changes for the individual. Due to its progressive potential, early diagnosis is crucial to prevent the worsening of the curvature and reduce the negative impacts on patients' quality of life. In this context, it is important to define the physical assessment criteria that enable a precise and standardized clinical diagnosis of scoliosis. **Objective:** To identify in the literature the physical assessment criteria used to diagnose AIS. **Method:** This is an integrative review based on articles obtained from the Lilacs, Scielo, and PubMed databases, using the descriptors "idiopathic scoliosis," "child," "adolescent," "treatment," and "diagnosis" in combination with the Boolean operators AND and OR. Full-text review articles in Portuguese, Spanish, and English published in the last 10 years that address the diagnostic evaluation of AIS were included. Interventional studies, editorials, letters to the editor, studies that did not include the research subject, and duplicate studies in the databases were excluded. In total, 7,231 articles were found, and after screening, five were included in the analysis of the present study. **Results:** Of the five selected studies, three were indexed in PubMed and two in Lilacs. The articles show that the diagnosis of Adolescent Idiopathic Scoliosis focuses on checking for a rib hump and asymmetries in the scapulae, shoulders, and waist. The examination includes Adams' forward bend test, with the use of a scoliometer to measure trunk rotation, which, if it varies between 5° and 7°, an anteroposterior and profile panoramic radiograph of the spine is recommended, allowing the measurement of the Cobb angle and classification of the curvature according to its topography. **Conclusion/Final Considerations:** AIS is a condition that causes significant impacts on the physical health of individuals, as well as on their psychological and social well-being. The present study brings factors that should be considered to ensure an adequate early diagnosis based on scientific evidence, allowing for timely therapeutic interventions to minimize the growing detriments of AIS on patients' quality of life.

**Keywords:** Adolescent, Diagnosis, Scoliosis, Physical Examination.



### 31. CHALLENGES IN ACCESSING TREATMENT FOR PATIENTS WITH RARE DISEASES

Rodrigo Scoassante Tavares<sup>1</sup>, Beatriz Pralon Nascimento Casthologe Coutinho<sup>2</sup>, Rayane Soares de Oliveira Kuster Moura<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>3</sup>

<sup>1</sup> Student, Stricto Sensu Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM.

<sup>2</sup> Student, Undergraduate Nursing Course, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória/ES. Brazil.

<sup>3</sup> Professor, Stricto Sensu Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM.

**Corresponding author:** rodrigo.st.tavares@gmail.com

**Introduction:** Rare diseases are characterized by their low prevalence in the population, but they present significant challenges for patients, families, and the health system. It is estimated that there are thousands of identified rare diseases, many of which are chronic, progressive, and life-threatening, profoundly impacting patients' lives. These individuals often face considerable barriers in accessing specialized medical care, including difficulties in accessing adequate treatments and surgical procedures when indicated. **Objective:** To describe the challenges found in ensuring access to surgeries for patients with rare diseases. **Method:** This is a bibliographic review conducted in the electronic databases of the Latin American and Caribbean Literature on Health Sciences (LILACS), Medical Literature Analysis and Retrieval System Online (MEDLINE/PubMed), and Scientific Electronic Library Online (SciELO). The search strategy used in the databases employed the following descriptors in English, recognized by the Health Sciences Descriptors (DeCS) and Mesh systems: (General surgery) AND (Rare Diseases) AND (Human Rights OR Right to Health) and (General surgery) AND (Rare Diseases). Inclusion criteria were full-text articles, with text available online, published between 2014 and 2024. The search for studies was carried out between May and July 2024. **Results:** 87 publications were found in the databases, originating from the LILACS database (13), MEDLINE/PubMed (68), and SciELO (6). Of these, 17 studies were shown to meet the inclusion criteria, as well as possessing the necessary elements to answer the proposed guiding question. Regarding the main results, it was found that patients with rare diseases face considerable difficulties in accessing treatments, especially those of a surgical nature. One of the main obstacles is the scarcity of specialized professionals, which, combined with the high cost of treatments, makes access difficult. The lack of clinical studies on these diseases further aggravates the scenario, contributing to inadequate control of complications and limiting therapeutic options. **Conclusion:** The complexity of access to treatment and surgeries for patients with rare diseases is a significant problem, exacerbated by the absence of clear clinical protocols and the high cost of treatments. Public policies directed at rare diseases are fundamental and need to be expanded to ensure improvements in access to treatment. Measures such as the creation of adequate financing models are essential to overcome the currently existing barriers and provide quality care to these patients.

**Keywords:** General surgery, Rare diseases, Human Rights.



### 32. SENSORY DESIGN AND SUSTAINABILITY: AN ESSENTIAL CONNECTION

Sandra Regina Bastos<sup>1</sup>, David Ruiz Torres<sup>2</sup>

<sup>1</sup> Interarts and New Media/ Postgraduate Program UFES, Vitória, E.S, Brazil

<sup>2</sup> Interarts and New Media/ Postgraduate Program UFES, Vitória, E.S., Brazil

**Corresponding author:** sandrabastos65@gmail.com

**Introduction:** The approach to the theme "Sensory Design and Sustainability" seeks to associate the human experience with the environment, promoting a more resilient and responsible relationship. In an interdisciplinary way, we can combine principles of design with psychology, ecology, and technology, creating innovative and sustainable sensory experiences. We can cite several examples of applications for the theme in question, such as in Architecture (sustainable spaces and for experiments), in products (sustainable and sensory products), in services (innovative and sustainable experiences), in communication (environmental awareness campaigns), and in technological resources. **Method:** Regarding the methodology adopted for this research, we opted for a quantitative (descriptive and inferential statistics) and qualitative (content analysis) analysis in an exploratory and descriptive manner, combining approaches to provide a comprehensive view of the relationship between sensory design and sustainability. We will conduct interviews with an average of 100 professionals, including 30 design professionals, 20 sustainability experts, and 50 end-users. The literature review leads the procedures with data collection, and conclusively, the triangulation of data for validation. Training with public policies and regulations can also promote these ideas, as well as the integration of disciplines within educational institutions. All these considerations contribute to advancing knowledge on the subject, encouraging the creation of innovative and responsible solutions parallel to the diverse cultural and geographical contexts of contemporary times. **Final Considerations:** The motivation for this research arises from current demands such as climate change with environmental degradation, exhaustion of natural resources, and an increase in pollution, as well as the demand for sustainable products and services. This theme is fundamental to making the human experience effective in favor of the environment, adapting to the current scenario by combining disciplines with current needs and trends. The results show that sensory design can influence the reduction of environmental impact. We thus hope to add value to Design, promoting a more holistic and responsible vision, contributing to a more sustainable future where design, technology, and the environment are harmonized.

**Keywords:** Sensory, Sustainability, Project, Innovation, Design.



### 33. RACIAL AND SOCIOECONOMIC INEQUALITIES IN BREAST CANCER IN BRAZIL: IMPACT ON THE MORTALITY OF BLACK WOMEN

Graziella Almeida Salazar Veloso<sup>1</sup>, Júlia Mayse Soares Gonçalves<sup>2</sup>, Victoria Maria Vimercati Moreira Duarte de Souza<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>3</sup>

<sup>1</sup> Student, stricto-sensu Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória, ES.

<sup>2</sup> Student, Nursing course. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória, ES.

<sup>3</sup> Professor, stricto-sensu Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória, ES.

**Corresponding author:** graziellaveloso2000@yahoo.com

**Introduction:** Breast cancer represents a significant public health issue in Brazil, notable for its high incidence and mortality among women. Studies show that Black and Brown women are more affected by a severe type of breast cancer and that mortality among them is growing three times faster, highlighting racial disparity. Difficulties in access, especially for Black and Brown women, socioeconomic status, and level of education contribute to the failure of early detection and the progression of the disease. Ancestry, with more than 350 years of slavery, is another factor studied, correlating to the diagnosis of a more aggressive cancer, the triple-negative type. **Objective:** To highlight the racial and socioeconomic inequalities in breast cancer in Brazil and the impact on the mortality of Black women. **Method:** This is a summary prepared through a bibliographic survey. The research was conducted in the PUBMED and LILACS databases, using the search strategy: (Breast cancer AND Breast) AND (Racial inequalities OR social disparities OR Black vulnerability) AND (Mortality) AND (Public Policy OR Health Policy) in the month of October. **Results:** The initial search comprised a total of 89 articles from PUBMED (n=85) and LILACS (n=4). Subsequently, the inclusion criteria were applied: full text, English and Portuguese languages. After this filtering, 76 articles remained. From reading the titles, 67 articles were selected, and after analyzing the respective abstracts, 54 articles were identified to compose the final sample. The research was conducted by analyzing variables such as level of education, socioeconomic status, and access to treatment. The findings indicated that 60.1% of breast cancer diagnoses in Black women occur in advanced stages, compared to 50.6% among white women. Furthermore, mortality among Black women increased 3.83 times between 2000 and 2020. It is evident that Black women tend to live in less developed areas, have lower education, and face difficulties in accessing treatment, factors that contribute to late diagnoses due to social vulnerability. More aggressive tumors, such as the triple-negative type, were found in 20% of Black women, in contrast to 10% of white women. **Conclusion:** Racial disparities in breast cancer in Brazil reflect a combination of socioeconomic and historical factors that directly affect the health of Black women. It is necessary for public policies to address these inequalities, promoting screening and access to effective treatments for all patients.

**Keywords:** Breast cancer, Black vulnerability, Racial inequalities, Mortality, Public policies.



### 34. WAGE INEQUALITY BETWEEN MEN AND WOMEN IN THE LABOR MARKET

Ana Clara dos Santos Braga<sup>1</sup>, Daniel de Siqueira Nunes Reis<sup>1</sup>, Juliana da Silva Gomes<sup>1</sup>, Neuza Maria de Siqueira Nunes<sup>1</sup>

<sup>1</sup> Faculdade Metropolitana São Carlos – FAMESC, Bom Jesus do Itabapoana, RJ

**Corresponding author:** neuzamsnunes@gmail.com

**Introduction:** Brazil is characterized by having one of the highest inequalities in income distribution. Part of the wage dispersion is attributed to the heterogeneity of workers, mainly in terms of education, as well as the segmentation associated with the form of insertion into the labor market and discrimination by gender and color. Education is still the main means of access to knowledge and is also linked to competitiveness, the capacity to innovate, and insertion into the labor market. The way men and women are inserted into the labor market has occurred in significantly different ways. Comparing people with the same level of qualification, occupying similar job positions, and living in the same region, the existence of significant wage differentials between men and women is observed. **Objective:** To address the wage differences between men and women in the labor market. **Method:** A qualitative study, based on the deductive method, aided by a bibliographic review in a systematic format and empirical research on wage differences between men and women in the labor market. **Results:** The labor market generates inequality when it remunerates men and women of the same productivity and occupying similar job positions differently. Part of the differences in labor remuneration also depends on the educational level of the workers; those with higher education earn, on average, more than those with high school education. Wage inequality contributes to the existence of gender inequality, resulting in opportunities for access to education, political participation, and representation in leadership positions. **Conclusion/Final Considerations:** Combating wage inequality between genders requires efforts involving individual and governmental attitudes, such as showing the importance of education for gender equality, increasing investment in the human capital of women, as well as developing affirmative actions for the hiring of women and implementing and improving gender policies. Education as an accumulation of human capital contributes to the placement of individuals in the labor market, to the quality of employment, and to wage gains. Therefore, there is a need for public policies directed at people with a low level of qualification to prepare and readapt them to the labor market in favor of reducing wage inequality between men and women in the labor market.

**Keywords:** Wage inequality, Education, Labor Market.





### 35. DETERMINANTS OF IMMIGRANTS' MENTAL HEALTH: A PRELIMINARY REVIEW

Tainá Pereira de Andrade<sup>1</sup>, Khatrinia Moura Marques<sup>1</sup>, Patrícia Germain<sup>2</sup>, Beatriz de Barros Souza<sup>3</sup>

<sup>1</sup> Undergraduate. Nursing - Emescam, Vitória, Espírito Santo, Brazil. <sup>2</sup> Professor. Dept. of Nursing - Université du Québec à Trois-Rivières (UQTR), Québec, Canada. <sup>3</sup> Professor. Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

**Corresponding author:** beatriz.souza@emescam.br

**Introduction:** Among the main challenges of the migrant population, mental health is one of great relevance, as they face a series of barriers that directly impact their psychological well-being and adaptation in the destination country. **Objective:** This study analyzes the predominant mental health approach in systematic reviews on immigrants in the American continent and its relationship (or not) with the social determinants of health. **Method:** From a search in PROSPERO (International Prospective Register of Systematic Reviews) for the MeSH descriptor closest to the phenomenon of immigration (the root "immigr" and permutation by derivatives), reviews indexed for the following descriptors were identified: "Emigrants & Immigrants"; "Emigration & Immigration"; and "Undocumented Immigrants". After excluding repeated reviews, those in progress, those without explicit affinity to mental health in the title, and/or those related to other regions, seven works were selected for abstract analysis. **Results:** The preliminary analysis indicated, among others: a) the scarcity of interventions aimed at improving the mental health of immigrant women; b) the relationship between the cultural adequacy of interventions (such as therapies and psychoeducational programs) and their effectiveness or ethical standard (in the case of interventions with digital health); c) "acculturative stress," gender (female), age (younger), economic condition (unemployment; low income), and interpersonal relationships (low contact with other immigrants) as risk predictors for the mental health of this population. **Conclusion:** The predominant focus in the study's reviews still brings few social determinants of the health of this population in the destination country. More studies in this regard are highly recommended.

**Keywords:** Social determinants of health, Immigrants, Mental health.



### 36. RIGHT TO HEALTH

Alice Alves de Oliveira<sup>1</sup>, Eric Rolin Diniz<sup>2</sup>, Lidiana Barbosa de Andrade<sup>1</sup>, Maria Augusta Simões Oliveira<sup>1</sup>, Beatriz de Barros Souza<sup>1</sup>, Paulo Andre Stein Messetti<sup>1</sup>

<sup>1</sup>Postgraduate Program, Master's in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória- EMESCAM, Vitória – ES, Brazil.

**Corresponding author:** alice.oliveira@edu.emescam.br

**Introduction:** The Cambridge Health Alliance (CHA) is a foundation that acts in direct intervention and support for people living in situations of vulnerability and with a low quality of life. Diverse ethnic origins associated with language barriers that hinder communication are factors that, combined with the selective and stratified American healthcare system, reduce the human living conditions of the population in need. Philanthropy remains fundamental to CHA's success in improving the health of its community. **Objective:** To present some of the main programs and initiatives supported by donations, demonstrating how they are positively impacting the health and well-being of the community served by CHA. **Methods:** The research on the Right to Health was conducted through documentary analysis and interviews with the President of the CHA Foundation, where the actions, proposals, structures, operations, and prevention measures of CHA were described. Comprehensive health for the population below the poverty line is the main objective of CHA. **Results:** The CHA Foundation has improved the quality of life for people experiencing homelessness and immigrants, serving as a reference in social assistance for other American states. It has demonstrated the importance of philanthropy in filling the gaps in the health system. The results achieved by CHA highlight the importance of initiatives that seek to meet the needs of vulnerable groups, offering essential services and promoting social inclusion. **Conclusion:** The CHA Foundation is an institution that provides quality health services with a focus on inclusion, mental health, and primary care. It combats inequality through actions such as the distribution of food baskets and the translation of services, and advocates for public policies to ensure access to health and well-being for the population. CHA's work is exemplary and demonstrates the importance of philanthropy and the partnership between the public and private sectors to face social challenges. However, a significant improvement was noted in breastfeeding rates, a reduction in medical interventions, and more positive childbirth experiences with the implementation of the assistance system strategy. It is perceived that factors such as systemic racism and prejudice embedded in the public assistance system will be fought, resulting in better health conditions and a reduction in disparities in care and basic rights for such a diverse population.

**Keywords:** Basic Rights, Healthcare Assistance, Integral Health System.



### 37. RIGHTS OF THE LGBTQIAP+ POPULATION: ACHIEVEMENTS, BARRIERS IN ACCESSING RIGHTS, AND PERSPECTIVES FOR AN INCLUSIVE SOCIETY IN BRAZIL

Carla Loureiro Portuense Siqueira<sup>1</sup>, Eloiza Toledo Bauduina<sup>1</sup>, Nathalya das Candeias Pastore Cunha<sup>1</sup>,  
Maria Clara Sossai de Almeida<sup>1</sup>, Paulo André Stein Messetti<sup>2</sup>, Beatriz de Barros Souza<sup>2</sup>

<sup>1</sup> Student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de  
Misericórdia de Vitória – EMESCAM

<sup>2</sup> Professor, Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências  
da Santa Casa de Misericórdia de Vitória – EMESCAM

**Corresponding author:** maria.sossai@edu.emescam.br

**Introduction:** Understanding the fundamental rights of the LGBTQIAP+ population requires a comprehensive analysis that involves the historical context, achievements, and challenges that still remain in current society. The recognition of this population, in addition to the protection of rights and policies, is essential for a just and egalitarian society. **Objective:** To describe the achievements and barriers in accessing the rights of the LGBTQIAP+ population in the struggle for an inclusive society in Brazil and worldwide. **Method:** This is a qualitative and exploratory documentary analysis and an analysis of public policies for the LGBTQIAP+ population. **Results:** The trajectory of the population's rights was marked by a long history of repression, stigmatization, criminalization, and social marginalization. In Brazil, some achievements were laws, such as Resolution No. 175/2013 of the National Council of Justice; Bill PL 3.394/2021; and Law 7.716 of 1989 against discrimination, created to protect LGBTQIAP+ people, ensuring equal treatment. These Brazilian laws aim to guarantee some fundamental rights such as the right to identity, safety and life, work, education, and health. Some achievements were same-sex marriage, the rectification of name and gender, and the criminalization of homophobia and transphobia. Society plays a fundamental role in this issue, with family and social support, awareness and education, and anti-discriminatory actions being essential. **Conclusion:** Notorious advances were observed in relation to the rights of the LGBTQIAP+ community, involving these people in all environments and providing representation for the group. However, various challenges for this population are still verified in current times, especially regarding the prejudice experienced by this group. The study raises the need to respect and protect the rights of this population as essential human rights. Thus, a safe and egalitarian environment should be encouraged and promoted.

**Keywords:** Gender Rights, LGBTQIA+ People, Social Inclusion.



### 38. SPATIAL DISTRIBUTION OF ELDERLY VICTIMS OF CEREBROVASCULAR ACCIDENT SERVED BY SAMU 192/ES

Júlia Caldas Araujo<sup>1,4</sup>, Maria Eduarda Nemer Casagrande<sup>1,4</sup>, Mariana Andrade Rodrigues Alves<sup>1,4</sup>, Raissa Sartório Silva Rangel<sup>1,4</sup>, Simone Karla Apolônio Duarte<sup>2,4</sup>, Caio Duarte Neto<sup>2,4</sup>, Wagner Carrupt Machado<sup>3,4</sup>, Luciana Carrupt Machado Sogame<sup>2,4</sup>.

<sup>1</sup> Medical Student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória-ES. Brazil.

<sup>2</sup> Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória/ES. Brazil.

<sup>3</sup> Professor, Federal University of Uberlândia - UFU. Uberlândia/MG. Brazil.

<sup>4</sup> Interdisciplinary Research Nucleus of the Urgency and Emergency Network (NUPI-RUE), Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil.

**Corresponding author:** mariana.aalves@edu.emescam.br

**Introduction:** Stroke (Cerebrovascular Accident - CVA) is one of the main emergencies attended by SAMU 192, especially among the elderly, who have a higher risk due to chronic diseases. **Objective:** The objective of this study is to verify the profile of elderly victims of CVA attended by SAMU 192/ES. **Method:** This is a cross-sectional study with retrospective data collection, including a sample of 22,760 elderly people ( $\geq 60$  years) attended by SAMU 192/ES in 2020 and 2021, with 18,767 having clinical diseases, and an 8.7% occurrence of CVA. Data was collected from the SAMU 192/ES Regulation Center, recording information on the victims' profile (sex, age group) and attendance characteristics (period of the week, shift, type of resource, municipality, severity, transport, and referral location). The spatial distribution was identified considering the 18 municipalities served by SAMU 192/ES until December 2020. The data were organized in tables for descriptive analysis. **Results:** Of the clinical diseases present, totaling 18,767, 1,638 were CVA victims. Regarding the profile, the majority of victims were female (53.8%), aged 60-79 years (64.2%). Regarding the attendance, most occurred from Monday to Friday, during the day shift (74.2%), originating from home (97%), and were critical cases (71.7%). The majority were transported to a health service, mainly to hospitals (46.5%), using a Basic Support Unit (USB) (87.1%) and the public service (81.4%). Regarding spatial distribution, there was a prevalence in the cities of Vila Velha (26.9%), Cariacica (21.1%), Serra (18.3%), and Vitória (16.5%), demonstrating the unequal distribution in the territory served by SAMU 192/ES. **Conclusion:** It is concluded that the majority of victims are young-elderly, attended during the daytime and at home, mainly in Viana and Vila Velha, in Greater Vitória. They are critical cases that require rapid care and transport to public hospitals, with USB and Advanced Support Unit (USI). These data are important for adjusting protocols and training teams, aiming to reduce sequelae and mortality.

**Keywords:** Spatial Distribution, Elderly, Cerebrovascular Accident, Emergency Medical Services.



### 39. SPATIAL DISTRIBUTION AND INFLUENCE OF SEX IN PSYCHIATRIC EMERGENCIES ATTENDED BY SAMU 192 IN ESPÍRITO SANTO

Humberto Avellar Bebber<sup>1</sup>, Lara Machado de Oliveira<sup>1</sup>, Mariana Zamprogno Zottele<sup>1</sup>, Simone Karla Apolonio Duarte<sup>1</sup>, Caio Duarte Neto<sup>1</sup>, Hudson Pereira Pinto<sup>1</sup>, Leonardo França<sup>1</sup>, Lucia Helena Sagrillo Pimassoni<sup>1</sup>, Julianna Vaillant Louzada Oliveira<sup>1</sup>

<sup>1</sup> Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil. Interdisciplinary Research Nucleus of the Urgency and Emergency Network.

**Corresponding author:** humbertobebber@hotmail.com

**Introduction:** Psychiatric emergency services currently cover both urgencies and emergencies, which are defined by an alteration of thought, mood, or social behavior that shows a need for immediate intervention observed by the patient or a third party. A psychiatric emergency can also be defined by circumstances in which the patient's behavior can rapidly escalate to catastrophic events. Thus, the main definer of psychiatric emergencies is the lack of adequate resources to deal with mental alterations, with the emergency service being responsible for intervening to provide such resources. **Objective:** The association between psychiatric occurrences in the population served by the Mobile Emergency Care Service (SAMU) with sex was analyzed, and these data were mapped and tabulated. **Method:** This is a cross-sectional observational study, with data from the period of 2020 and 2021 from the Regulation System used by SAMU 192 of Espírito Santo. Patients classified as psychiatric, of both sexes and all ages, who were assisted by SAMU between 2020 and 2021 were included. The variables analyzed were: sex, age, type of psychiatric occurrence, municipality of occurrence, destination, origin of the call, resource sent, and level of urgency (critical or non-critical). The association between the variables was performed using the chi-square or Fisher's Exact test of independence. **Results:** 24.6% of the patients were aged between 25 and 34 years, 21.9% were from the Cariacica/Viana region, 36.7% were attended in the afternoon period, 69.5% from Monday to Friday, of home origin, 89.6% non-critical, 90.7% with dispatch of a Basic Support Unit (USB), 47.8% refused care followed by 44.6% who were destined for hospitals, 65.4% for agitation and situations of violence, and 0.5% with a record of death. The variables age group, municipality, time of request, origin, level of urgency, destination, record of death on site, and type of incident showed an association with sex. **Conclusion:** Young men were more frequently involved in situations of agitation and violence, while women, especially in the adult age group, predominated in cases of self-harm and suicide attempts. There was a greater severity of female cases, but with a lower incidence of deaths.

**Keywords:** Suicide, Psychiatry, SAMU, Psychiatric Emergency.



#### 40. BETWEEN FALLS AND RESCUES: A LOOK AT ELDERLY PEOPLE SERVED BY SAMU 192/ES AND THE CHALLENGES OF HEALTH POLICY

Érika Soares da Silva Andreatti<sup>1</sup>, Maressa da Silva Felici<sup>2</sup>, Caio Duarte Neto<sup>3</sup>, Gracielle Karla Pampolim Abreu<sup>4</sup>, Fernando Rocha Oliveira<sup>5</sup>, Luciana Carrupt Machado Sogame<sup>5</sup>

<sup>1</sup> Master in Public Policy and Local Development. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória. EMESCAM. Vitória-ES. Brazil

<sup>2</sup> Bachelor in Physiotherapy from the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória. EMESCAM. Vitória-ES. Brazil

<sup>3</sup> Professor of Undergraduate Medicine at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória- EMESCAM. Vitória-ES. Brazil.

<sup>4</sup> Professor of Undergraduate Physiotherapy at the Federal University of Pampa – UNIPAMPA. Uruguaiana- RS. Brazil.

<sup>5</sup> Professor of the PPG in Public Policy and Local Development at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória- EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** erika.andreatti@edu.emescam.br

**Introduction:** Falls are a serious public health problem and one of the main causes of injuries and deaths among the elderly. SAMU 192 is one of the access routes for attending to elderly victims of falls, covering the entire state territory since the implementation of the SAMU for All Policy in 2020. **Objective:** To analyze the factors associated with the occurrence of falls in elderly victims of external causes attended by SAMU 192 in the state of Espírito Santo in light of health policies. **Method:** This is a cross-sectional research with retrospective data collection from the SAMU 192 regulation system in Espírito Santo, conducted with 6,174 elderly people ( $\geq 60$  years). Information was collected regarding: life cycle, sex, and municipality of occurrence; period of the week, shift of the request, type of resource sent, origin of the call, presumed severity, types of external cause, distinguished as: fall (from one's own height, from a height less than six meters or greater than six meters) and other external causes (land accidents and aggression); and destination. The prevalence of falls was calculated and the Chi-square test was performed. **Results:** The prevalence of falls was 88.1%, and the majority of the elderly were in the age group between 60 and 79 years, female, with calls originating at home, during the week, in the afternoon shift, and in the municipalities of Vila Velha, Cariacica, and Vitória. A Basic Support Unit was sent, the presumed severity was yellow, and the elderly were transported to a health service, mostly to public hospitals. An association ( $p < 0.05$ ) was found between falls in the elderly aged 80 years or older, female sex, dawn shift, home call, presumed severity blue/green and yellow, Basic Support Unit resource, and transport to philanthropic and private hospitals. **Conclusion:** The associated factors and falls identified allow for optimizing the rapid response capacity of pre-hospital care and developing strategies to minimize the risks associated with falls, ensuring that the elderly receive immediate and adequate care as recommended by the National Policy for Emergency Care. These findings reinforce the need for the effective implementation of health policies focused on fall prevention and active aging. It is highlighted that investment in health, autonomy, and quality of life for the elderly is fundamental, in addition to strengthening their family and community support networks. This investment will be essential to ensure a dignified and active aging process, as advocated in the National Health Policy for the Elderly.

**Keywords:** Health policy, Fall, Elderly, SAMU.



#### 41. POPULATION AGING: ARE THERE DIFFERENCES BETWEEN THE MACRO-REGIONS OF BRAZIL?

Rafael Alves de Souza Meneguelli<sup>1</sup>, Mariana Santos de Sá Galina<sup>2</sup>, Alan Patrício da Silva<sup>3</sup>

<sup>1</sup> Master's student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil

<sup>2</sup> Nursing students at the Escola Superior da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil.

<sup>3</sup> Professor in the Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil.

**Corresponding author:** rafael.meneguelli@edu.emescam.br

**Introduction:** According to information from the Brazilian Institute of Geography and Statistics (IBGE), from 2004 to 2015, the number of elderly people in the country increased from 9.8% to 14.3%, being the fastest-growing age group in the country. According to the 2022 demographic census, approximately 9.3% of the Brazilian population was composed of non-long-lived elderly, aged between 60 and 79 years. On the other hand, approximately 1.5% were 80 years or older. The estimate for 2050 is that the proportion of elderly people over 80 years old will reach 6.7% of the population, potentially exceeding 19 million. Therefore, the elderly population today represents a significant and growing portion of Brazilian society, generating a series of new demands and requirements in relation to public health policies and increasing the active participation of the elderly in social life. **Objective:** To analyze the differences in the population aging process in the Brazilian macro-regions. **Method:** This is a simple summary conducted in November 2024 from a search of full articles published in the last 5 years in the Pubmed, BVS, Scielo, Lilacs, and Google Scholar databases. The following descriptors were used in this search: Aging, population dynamics, Brazil. **Result:** The Aging Index (AI) is a good option for monitoring the aging of a specific population. The AI is characterized as the number of people aged 60 or more for every 100 individuals under 15 years old, within a resident population in a specific geographic area, in a given year. From the analysis of the AI of the country's macro-regions, we observe an increase in this index in all regions in recent decades, with the North region being the youngest, followed by the Northeast region, while the Southeast and South regions have older structures, with the highest proportions of elderly people over 65 years old. The Center-West has an intermediate configuration. **Conclusion:** The aging of the Brazilian population is a relevant and contemporary demographic phenomenon that is changing the social dynamics in our country. Knowing the characteristics of this process and its differences in the various regions is necessary to respond assertively to the demands and ensure equity in the distribution of resources and in the creation of policies that ensure safe and dignified aging, preserving all their guaranteed rights.

**Keywords:** Elderly, Aging, Population dynamics, Epidemiological surveys.



#### 42. EVOLUTION OF DENTAL PRODUCTION IN THE SUS: ANALYSIS OF ORAL HEALTH ACTIONS AND PROCEDURES IN ESPÍRITO SANTO (2013-2023) WITH DATA FROM DATASUS

Lais Gomes Lopes<sup>1</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Alan Patricio da Silva<sup>2</sup>, Fernando Rocha Oliveira<sup>2</sup>

<sup>1</sup> Master's Student, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

<sup>2</sup> Professor, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

**Corresponding author:** [lais.lopes@edu.emescam.br](mailto:lais.lopes@edu.emescam.br)

**Introduction:** The analysis of dental production in the Unified Health System (SUS) offers a fundamental perspective on the evolution of oral health actions and procedures, especially at the regional level. Investigating the patterns and trends of improvement in strategies and public policies for promoting oral health and reducing inequalities in care and oral health policies in Espírito Santo is essential. **Objective:** To analyze the evolution of oral health actions and procedures in Espírito Santo between 2013 and 2023. **Method:** This is an integrative literature review, following the recommendations of the methodological structure developed in the PRISMA-ScR checklist. Searches were conducted in MEDLINE via PubMed, LILACS, Web of Science, Scopus, Cochrane Library, Embase, and SciELO. Three controlled health vocabularies, Health Sciences Descriptors (DeCS), were used in conjunction with Boolean operators AND and OR. **Results:** Of 1,721 studies, 29 were included in the review. The analyzed publications were published between 2014 and 2024, all being from Brazilian studies that reflect the different geographical regions of the country. The results showed that, at the national level, oral health actions and procedures in the SUS have shown advances, with the support of public policies and government efforts to expand dental access to the population, offering access to oral health and promoting the improvement of quality of life by preventing diseases, promoting physical and emotional well-being, and reducing risks to general health. **Conclusion:** Studying the regional particularities of Espírito Santo is essential to understand how socioeconomic inequalities and geographical barriers affect access to and the quality of oral health services, allowing public policies to be adapted to local needs and improving the oral health of the population.

**Keywords:** Oral Health, Public Power, State Government, Child Health, Human Right, Right to Health.





#### 43. EVOLUTION OF HEALTHCARE COSTS FOR HOSPITAL ADMISSIONS OF ELDERLY INDIVIDUALS IN THE STATE OF ACRE, BRAZIL (2018-2023)

Pedro Omar Batista Pereira<sup>1</sup>, Mateus Pinheiro de Souza<sup>1</sup>, Amanda Vitória Rodrigues dos Santos<sup>1</sup>, Eumar Soares Silva Filho<sup>1</sup>, Laura Beatriz Argôlo Moreira<sup>1</sup>, Ana Clara Ferreira Asbeque<sup>2</sup>, Francisco Naildo Cardoso Leitão<sup>3</sup>

<sup>1</sup> Undergraduate, Medical Course, Federal University of Acre, Rio Branco, AC, Brazil.

<sup>2</sup> Master, Center for Health and Sport Sciences, Federal University of Acre, Rio Branco, AC, Brazil.

<sup>3</sup> Ph.D., Professor, Center for Health and Sport Sciences, Federal University of Acre, Rio Branco, AC, Brazil.

**Corresponding author:** pedro.omar@sou.ufac.br

**Introduction:** Brazil is aging. Projections indicate that by 2030, the number of elderly people will surpass that of children aged zero to 14. As health is a fundamental right and a duty of the State, it is crucial that the public sector ensures the necessary resources to serve this growing population. In Acre, monitoring the expenses with hospital admissions of the elderly becomes essential, considering regional challenges and the distribution of health services, allowing for the evaluation and planning of the system's sustainability. **Objective:** To analyze the hospital costs associated with the admission of elderly people in the State of Acre, Brazil, between 2018 and 2023. **Method:** An ecological study with public data from the Hospital Information System (SIH/SUS). Admissions of people aged 60 and over were analyzed, with data extracted from Hospital Admission Authorizations (AIH) and organized in Excel. The variables sex and age group were chosen for their relevance in the allocation of health resources. A Pearson correlation analysis was performed to examine the relationship between the average costs per admission in the categories of greatest use of public resources. **Results:** Between 2018 and 2023, there were 46,120 admissions, with an annual average of 7,687 admissions. Men accounted for 55.09% of the cases and women, 44.91%. Male admissions increased by 54.92%, from 3,598 in 2018 to 5,574 in 2023, while female admissions grew by 59.02%, from 2,970 to 4,723. Considering both sexes, admissions were distributed as follows: 60 to 69 years (43.38%), 70 to 79 years (33.46%), and 80 years or more (23.15%). The total cost of admissions was R\$ 61,990,163.73. The highest average costs per admission were observed for men (R\$ 1,424.44) and in the 60 to 69 age group (R\$ 1,446.87). Pearson analysis showed a weak positive correlation between the average costs per admission and the number of admissions for men ( $r=0.21$ ) and an almost null correlation for the 60 to 69 age group ( $r=0.15$ ), suggesting that the number of admissions has little impact on the average costs in these categories. **Conclusion:** The increase in admissions and average costs among the elderly in Acre, especially among men and in the 60 to 69 age group, overburdens the health system, highlighting the need for prevention policies and personalized care to optimize resources and reduce hospital admissions.

**Keywords:** Elderly Person, Health Costs, Public Policies.



#### 44. EVOLUTION AND DIAGNOSIS OF MPOX IN CEARÁ: A CURRENT OVERVIEW

Camila Hemille Matias Morais<sup>1</sup>, Kawanny Viturino Rodrigues<sup>1</sup>, Lucas Pereira Inácio<sup>1</sup>, Ruânia Soares de Sousa<sup>1</sup>, Emery Ciana Figueiredo Vidal<sup>1</sup>, Olívia de Almeida Duarte<sup>1</sup>

<sup>1</sup> Regional University of Cariri - URCA, Crato, Ceará, Brazil.

**Corresponding author:** kawanny.viturino@urca.br

**Abstract Introduction:** Mpox, formerly known as "monkeypox," had its term reformulated to avoid discriminatory and stigmatizing language, and to prevent associating the disease with monkeys and with the African countries where the first cases of the disease occurred. It is a viral zoonosis caused by the Mpox virus (MPXV), which belongs to the Poxviridae family. This virus can be transmitted to humans through direct contact with bodily fluids, lesions, or contaminated surfaces of infected people or animals. Symptoms include fever, body aches, lymphadenopathy, and a skin rash that progresses to pustules and scabs. **Objective:** To gather updated data on Mpox cases in the state of Ceará, providing a broad view of the notifications of the disease's occurrence, since the GM/MS ordinance No. 3328, of August 22, 2022, establishes the obligation of immediate notification within 24 hours of the disease. **Method:** A descriptive study was conducted through analysis and investigation based on scientific data. Among them, the operational report of the Mpox epidemiological scenario, a document prepared by the government of the state of Ceará to describe the epidemiology of the disease in the state, and its epidemiological bulletin. **Results:** The data show that in Brazil, there was a decline in the number of cases from 2022 to 2023. In the state of Ceará, of the 2,190 suspected cases since 2022, about 592 were confirmed, concentrated in the Fortaleza region, with the diagnosis of the pathology especially among men aged 18 to 39. In 2024, up to epidemiological week 35, there was confirmation of 15 new cases and 11 are under investigation. Thus, the analysis shows that the number of municipalities with cases fell from 47 in 2022 to 3 in 2024, as of August. **Final Considerations:** It is concluded that the decrease in Mpox cases does not guarantee that the rates cannot rise again, due to the presence of cases that are still under investigation.

**Keywords:** Poxvirus, Environmental health, Data analysis.



#### 45. RISK FACTORS FOR PREECLAMPSIA: A PATHOLOGICAL, CLINICAL, AND SOCIOECONOMIC ANALYSIS

Guilherme Alberto de Souza Ségua<sup>1</sup>, Natália Portinho Miguel<sup>1</sup>, Laryssa Badaró Miranda<sup>1</sup>, Isabella Miranda de Almeida<sup>1</sup>, Antônio Andrade Simão Filho<sup>1</sup>, Nicole Holz<sup>1</sup>, Ana Luisa Moscon Casa Grande<sup>1</sup>, Loise Cristina Passos Drumond<sup>2</sup>, Marcela Souza Lima Paulo<sup>2</sup>

<sup>1</sup>Medical Student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

<sup>2</sup>Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** nataliportinhomiguel@gmail.com

**Introduction:** Preeclampsia (PE) is the second leading cause of maternal mortality worldwide and the first in Brazil, where one in four gestational deaths is attributed to this condition. PE particularly affects low and middle-income countries, accounting for about 16% of maternal deaths in these regions and exceeding 25% in some parts of Latin America. **Objective:** To identify the risk factors associated with preeclampsia. **Method:** This is an integrative review based on the guiding question: "What are the risk factors for preeclampsia?". Original and relevant articles on the topic, published between 2020 and 2024, were researched. For data collection, the Virtual Health Library (VHL) and Pubmed were used, from September to October 2024, employing a search strategy that combined Boolean operators and the descriptors: Preeclampsia AND "risk factor" AND Hypertension. Advanced filters were applied in the VHL, restricting the search to articles indexed in MEDLINE, focusing on pregnancy-induced hypertension and risk factors. Inclusion criteria covered original articles addressing causal or contributing factors to the development of PE, focused on the adult age group (19 to 44 years), as well as clinical cases, meta-analyses, and guidelines published between 2020 and 2024. Literature reviews, incomplete texts, articles not available for free, and those in languages other than English and Portuguese were excluded. After analysis, the articles were submitted to a reading of titles and abstracts, with those showing thematic deviation being discarded. The remaining ones were read in full and selected based on their relevance and contribution to the study. **Results:** The 10 selected articles identified several risk factors associated with PE, such as hypertension, diabetes, obesity, systemic lupus erythematosus, family history, genetic inheritance, nulliparity, advanced or early maternal age, multiple pregnancies, recurrence of PE, intergestational hypertension, hypothyroxinemia, epicardial adipose tissue thickness, as well as socioeconomic and ethnic-racial factors. **Conclusion:** The risk factors for preeclampsia are diverse and interconnected, covering pre-existing clinical conditions, demographic characteristics, and socioeconomic factors. These findings reinforce the importance of early screening and management strategies to reduce the impact of PE on maternal mortality.

**Keywords:** Pregnancy-induced hypertension, Socioeconomic factors, Obesity, Diabetes, Maternal death.



#### 46. VITAMIN B12 DEFICIENCY: A REVIEW OF THE CAUSES OF COBALAMIN DEFICIENCY IN THE ADULT POPULATION

Alice Müller Vereno<sup>1</sup>, Larissa Freitas Muritiba<sup>1</sup>, Ana Letícia Elias Alves<sup>1</sup>, Natália Passos Monteiro<sup>1</sup>, Fernando Sathler José Silva<sup>1</sup>, Alef da Cruz Teixeira<sup>1</sup>, Gabriel Flor Ferreira Sales<sup>1</sup>, Pedro Rodrigues Teixeira<sup>1</sup>, Loise Cristina Passos Drumond<sup>2</sup>, Marcela Souza Lima Paulo<sup>2</sup>.

<sup>1</sup>Medical Student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

<sup>2</sup>Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** natalia.monteiro@edu.emescam.br

**Introduction:** Vitamin B12 plays a fundamental role in human metabolism. However, the human body is unable to produce this vitamin, needing to obtain it through diet, especially through foods of animal origin. Its absorption occurs in the terminal ileum and depends on intrinsic factor. Vitamin B12 deficiency is a condition with significant impacts on the health and quality of life of the population. **Objective:** To identify the main causes of cobalamin deficiency in adults. **Method:** This is an integrative review in which searches were carried out in the PubMed database and the Virtual Health Library (VHL) between September and October 2024. The descriptors "vitamin B12 deficiency" AND adult\* AND causality were used, according to the terms defined by the DeCS/MeSH system. Inclusion criteria restricted the selection to articles published between 2021 and 2024, which addressed studies with adult humans (19 to 64 years) and were written in English or Portuguese. Review articles and studies with incomplete texts were excluded. The selection process included the following steps: reading titles and abstracts, discarding those that did not meet the study's objectives. The remaining articles were read in full, with the final selection based on the relevance of the studies. **Results:** Pernicious anemia was identified as the main cause of vitamin B12 deficiency in individuals over 60 years of age, being responsible for 20–50% of all reported deficiencies. After bariatric surgery, the prevalence of nutritional deficiencies, including vitamin B12 deficiency, was higher in women. Patients with diabetes mellitus under treatment with metformin had a higher incidence of vitamin B12 deficiency, especially among women. The risk was higher in patients using high doses of metformin (1000 mg/day or more) for periods longer than 48 months. In addition, a negative correlation was observed between abdominal fat and serum levels of vitamin B12. Patients deficient in vitamin B12 had significantly lower levels of total cholesterol, LDL, and triglycerides. **Conclusion:** Several factors contribute to vitamin B12 deficiency in adults, including prolonged use of metformin, intrinsic factor deficiency, bariatric surgeries, and aspects related to diet and lifestyle. These findings highlight the importance of preventive and therapeutic strategies aimed at risk groups, aiming for early diagnosis and appropriate intervention.

**Keywords:** Vitamin B12 Deficiency, Causality, Nutritional Deficiencies, Pernicious Anemia, Adult.



#### 47. ADDICTIONS AND MENTAL HEALTH: THE INFLUENCE OF GAMBLING ON ADULTS

Elisa Fornazier Silotti<sup>1</sup>, Sofia Rangel Paganotte dos Passos<sup>1</sup>, Izabela Breda Moulin de Alencar<sup>1</sup>, Valeska Siqueira Costa<sup>1</sup>, Guilherme Gomes Pagotto<sup>1</sup>, Jhonnata Ronaldo Oliveira da Silva<sup>1</sup>, Daniel Maia Soares<sup>1</sup>, Pedro Rodrigues Teixeira<sup>1</sup>, Loise Cristina Passos Drumond<sup>2</sup>, Marcela Souza Lima Paulo<sup>2</sup>.

<sup>1</sup>Medical Student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

<sup>2</sup>Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** [izabela.alencar@edu.emescam.br](mailto:izabela.alencar@edu.emescam.br)

**Introduction:** This study addresses the impacts of gambling on the physical and mental health of the adult population. The topic is of great relevance, as excessive involvement with gambling can generate several negative consequences. These consequences range from changes in emotional behavior, such as increased anxiety and stress, to more serious problems, including the development of addictions and gambling-related disorders. **Objective:** To identify the impacts of gambling addiction on the health of adults. **Method:** This is an integrative review of the literature, carried out by searching for original articles in the databases of the Virtual Health Library (VHL) and PubMed, with a focus on publications between 2022 and 2024. The search strategy used the combination of descriptors indexed in the Health Sciences Descriptors (DeCS/MeSH): “Mental Health” AND “Gambling” AND “Adult”. Exclusion criteria included literature reviews, studies without access to the full text, paid articles, and those related to COVID-19. **Results:** Of the 217 articles found, 161 were excluded after title analysis, 30 by reading the abstract, and 20 by reading the full text, totaling six articles included in the review. The analysis of these studies revealed that emotional problems, such as depression or anxiety, in addition to relationship difficulties, such as divorces, can act as both a cause and a consequence of gambling addiction. Gambling disorder also impacts the individual's family members, predisposing them to conditions such as post-traumatic stress disorder, depression, and panic disorder. People with gambling disorder are more prone to suicidal thoughts and/or attempts, in addition to developing significant emotional problems. Young adults were shown to be more vulnerable to the harms caused by the disorder, often using gambling as a way to escape problems typical of this stage of life. Treatment for gambling disorder presents challenges, especially due to the gambler's difficulty in recognizing the problem. However, financial losses tend to lead individuals to seek help. **Conclusion:** Gambling significantly impacts the mental health of adults, causing disorders such as anxiety, depression, suicidal tendencies, and a predisposition to post-traumatic stress disorder. In addition, it generates social and financial problems. Thus, it is necessary to promote public awareness about the risks of this disorder and offer adequate social and medical support to treat the addiction.

**Keywords:** Mental health, Gambling, Adult.



#### 48. CHALLENGES IN THE HEALTH OF INDIVIDUALS LIVING WITH SYSTEMIC LUPUS ERYTHEMATOSUS IN BRAZIL

Brenda Pugirá Scopel<sup>1</sup>, Ana Clara Schulz Pestana de Souza<sup>1</sup>, Eric Nolasco Zumak<sup>1</sup>, Fernando Cuzzuol Kopperschmidt<sup>1</sup>, Luana Madeira Célem<sup>1</sup>, Pedro Legora Tunholi<sup>1</sup>, Giovanna Werneck Leite<sup>1</sup>, Loise Cristina Passos Drumond<sup>2</sup>, Marcela Souza Lima Paulo<sup>2</sup>

<sup>1</sup>Medical Student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

<sup>2</sup>Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** [brenda.scopel@edu.emescam.br](mailto:brenda.scopel@edu.emescam.br)

**Introduction:** Systemic Lupus Erythematosus (SLE) is a chronic disease that affects about five million people worldwide, 90% of whom are female. Despite the significant number of affected individuals, the majority of the population has little knowledge about the disease, and discussions remain restricted to health professionals and people already diagnosed. **Objective:** To identify the factors that interfere with the quality of life of Brazilian adults with Systemic Lupus Erythematosus in Brazil. **Method:** This is an integrative review conducted between August and November 2024, addressing the factors that influence the quality of life of Brazilian adults living with SLE. Searches were performed in the electronic databases Virtual Health Library (VHL) and Pubmed, using the combination of descriptors "Lupus Erythematosus, Systemic" AND "Quality of Life" AND Brazil. Publications from the LILACS and MEDLINE databases, written in Portuguese or English, and published between 2014 and 2024 were included. Studies with incomplete texts, non-free articles, duplicates, and reviews were excluded. After reading the titles and abstracts, articles that did not fit the theme were discarded. **Results:** Among the selected articles, the majority confirmed the prevalence of SLE in women. The main factors that negatively impact the quality of life of patients include associated comorbidities, such as hypertension, obesity, arthritis, serositis, and cutaneous manifestations, which often lead to recurrent hospitalizations. Psychological disorders, such as depression and anxiety, also stood out, often related to the difficulty of dealing with the diagnosis and the social impact of the disease. SLE significantly impacted the education and work capacity of patients. Interruptions in studies due to hospitalizations and high rates of unemployment, early retirement, and work inactivity were observed. The lack of knowledge about the disease by the patients themselves and by society was identified as a relevant factor, since the fluctuation of symptoms and moments of crisis are often misunderstood. In addition, the high cost of medications compromised the treatment of many patients, making it difficult to manage the disease. **Conclusion:** The main factors that interfere with the quality of life of Brazilian adults with Systemic Lupus Erythematosus are associated comorbidities, the high costs of medications, dropping out of studies, job loss, early retirement, psychological suffering related to the diagnosis and social impact of the disease, as well as the widespread lack of knowledge about the illness.

**Keywords:** Systemic Lupus Erythematosus, Quality of Life, Brazil.



#### 49. THERAPEUTIC MEASURES USED IN THE MANAGEMENT OF AMYOTROPHIC LATERAL SCLEROSIS: AN INTEGRATIVE REVIEW

Julia Mendes Pontes de Arruda<sup>1</sup>, Arthur Sarmiento Miné Vilela<sup>1</sup>, Barbara Nogueira Ferreira<sup>1</sup>, Beatriz Ferrari Campos Marchi<sup>1</sup>, Enzo Henrique Lyra Frasson<sup>1</sup>, Gustavo Altoé Peterle<sup>1</sup>, Gabriela Amado Britto<sup>1</sup>, Maria Vasconcelos Novais<sup>1</sup>, Pedro Rodrigues Teixeira<sup>1</sup>, Loise Cristina Passos Drummond<sup>2</sup>, Marcela Souza Lima Paulo<sup>2</sup>

<sup>1</sup>Medical Student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

<sup>2</sup>Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** julia.arruda@edu.emescam.br

**Introduction:** Amyotrophic Lateral Sclerosis (ALS) is a rare neurodegenerative disease, but with rapid progression after the onset of the first symptoms, which significantly impacts the longevity of patients. In this context, this review article seeks to highlight the relevance of the therapeutic measures currently used in the management of ALS, with the aim of contributing to the improvement of patients' quality of life. **Objective:** To understand the therapeutic measures used in the management of Amyotrophic Lateral Sclerosis. **Method:** This is an integrative review, based on the consultation of medical literature in the Virtual Health Library (VHL) and PubMed, covering publications between the years 2019 and 2024. The search used standardized descriptors from the DeCS/MeSH System: "Amyotrophic Lateral Sclerosis" AND "Therapeutics". The inclusion criteria in the VHL were: original articles with full text, addressing ALS, and controlled clinical trials. In PubMed, articles with full text available, clinical trials, randomized controlled trials, studies involving humans, and directed at adults between 19 and 44 years old were included. Articles were excluded after the application of filters, analysis of the title, thematic relevance, and lack of response to the study's objective. **Results:** Of the seven selected articles, four (57.14%) demonstrated efficacy as therapeutic measures in the treatment of ALS. It was proven that: the drug Riluzole delayed the degeneration of motor neurons; the drug PB-TURSO reduced mitochondrial oxidative stress and endoplasmic reticulum stress; the compound EH-301 was shown to be effective in reducing oxidative stress; the NurOwn cell therapy promoted the reduction of oxidative stress and the growth of motor neurons. These interventions slowed the progression of the disease. However, one of the evaluated articles did not show significant changes in the progression of ALS, and two others reported inconclusive results. **Conclusion:** The therapeutic measures that have demonstrated efficacy in the management of Amyotrophic Lateral Sclerosis include the use of the drug Riluzole, the compound EH301, the combination of sodium phenylbutyrate and taurursodiol (PB-TURSO), and the NurOwn cell therapy. These treatments, by slowing the progression of the disease, show promising advances in the search for more effective therapies.

**Keywords:** Amyotrophic Lateral Sclerosis, Therapeutics, Oxidative Stress, Inflammatory Process, Neuroprotection.



## 50. ANABOLIC-ANDROGENIC STEROIDS: AN INTEGRATIVE REVIEW OF THE NEGATIVE EFFECTS IN ADULTS

Clara da Silva Cypreste<sup>1</sup>, Henrique Colodetti Carvalho<sup>1</sup>, Isabela Zucoloto Masolini<sup>1</sup>, Isadora Cristina Meireles e Souza<sup>1</sup>, Felipe Ferreira da Silva<sup>1</sup>, Mariana Avellar Campos<sup>1</sup>, Nathalia Barreto Rocha Vargas de Almeida<sup>1</sup>, Júlia Porto dos Reis Pessotti<sup>1</sup>, Loise Cristina Passos Drumond<sup>2</sup>, Marcela Souza de Lima Paulo<sup>2</sup>.

<sup>1</sup>Medical Student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

<sup>2</sup>Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** marianaavellarcampos@gmail.com

**Introduction:** Anabolic-androgenic steroids, synthetic derivatives of the hormone testosterone, are widely used both in the medical context, for the treatment of certain diseases, and in the sports world, with the aim of increasing muscle mass and improving athletic performance. However, when used without the supervision of a health team, they can cause various long-term adverse effects. **Objective:** To understand the most common negative effects associated with the use of anabolic-androgenic steroids in adults. **Methods:** An integrative review was conducted in September 2024, with data collection from the Pubmed and Virtual Health Library platforms. The search was conducted using the combination of the descriptors "anabolic androgenic steroids" AND adults AND effects, as defined by the researchers. Original articles that addressed the negative effects of the use of anabolic-androgenic steroids in human adults over 18 years old, available in full and free text, published in Medline between 2019 and 2024, were included. Review articles and case studies were excluded. The articles chosen to compose this review were selected through analysis of the title, abstract, and full-text reading. **Results:** The results revealed that the use of anabolic-androgenic steroids is associated with several negative effects, including: psychological disorders, such as depression, anxiety, increased aggressiveness, and impulsivity; cardiovascular diseases, such as atrial and ventricular dysfunctions, left ventricular hypertrophy, and uncontrolled blood pressure; hormonal changes, such as a reduction in the endogenous production of testosterone, with consequent testicular atrophy in men. In addition, a relationship was observed between the use of these substances and antisocial behaviors, such as crimes that resulted in imprisonment, often associated with increased impulsivity and aggressiveness, especially in individuals dependent on steroids. **Conclusion:** The use of anabolic-androgenic steroids can lead to metabolic dysfunctions, such as changes in lipid metabolism and cardiovascular diseases, as well as serious psychological problems, including anxiety, depression, and behavioral disorders, characterized by antisocial conduct and increased aggressiveness. These findings reinforce the need for preventive and educational measures to minimize the risks associated with the use of these substances.

**Keywords:** Anabolic-androgenic steroids, Effects, Adults.





## 51. THE IMPACTS OF CIRCADIAN RHYTHM DISRUPTIONS ON WORKERS' QUALITY OF LIFE

Alberto Martins<sup>1</sup>, Kauê Teodoro Santos da Silva<sup>1</sup>, Lívia Lários Nóbrega Gadioli<sup>1</sup>, Lívia Rocha Loureiro<sup>1</sup>, Luís Guilherme Varejão<sup>1</sup>, Luiza Barbosa Loss<sup>1</sup>, Maria Elisa Nunes Carneiro Lugon Arantes<sup>1</sup>, Sofia Albani Brasil Nery<sup>1</sup>, Julia Porto Dos Reis Pessotti<sup>1</sup>, Loise Cristina Passos Drumond<sup>2</sup>, Marcela Souza Lima Paulo<sup>2</sup>.

<sup>1</sup>Medical Student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

<sup>2</sup>Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** livia.gadioli@edu.emescam.br

**Introduction:** The circadian cycle is an essential biological system that regulates vital functions, such as sleep, body temperature, and hormone production, adapting to the natural cycles of light and darkness. However, night or shift work destabilizes this cycle, negatively impacting workers' health. Research indicates that the misalignment of the circadian rhythm increases the risk of sleep disorders, chronic fatigue, metabolic and cardiovascular diseases, as well as psychological problems like anxiety and depression. This effect is intensified by exposure to artificial light at night, which inhibits the production of melatonin, a crucial hormone for sleep regulation. **Objective:** To describe the impacts of circadian cycle alterations on the quality of life of workers. **Method:** The integrative review was conducted based on the question: "What are the impacts of circadian cycle disorders on the quality of life of workers?". Data were collected from the Virtual Health Library (VHL) and PubMed, using the following sets of descriptors: "sleep disorders" AND "circadian rhythm"; "distúrbios do sono" AND "ritmo circadiano" and "circadian rhythm" AND "quality of life" AND worker. **Results:** The seven analyzed articles show that shift work, especially night shifts, generates sleep disorders in workers, resulting in hormonal dysregulation, increased sleepiness, and reduced cognitive and physical performance. Due to sleep misalignment and associated impairments, many workers develop anxiety and depression disorders, present in about 30% of those affected, according to the referenced studies. Furthermore, it was found that hormonal dysregulation caused by the imbalance of the circadian cycle predisposes workers to chronic diseases. In women, a significant increase in the risk of developing breast cancer associated with these factors was observed. **Conclusion:** Alterations in the circadian cycle negatively impact the quality of life of workers, resulting in detriments to mental and physical health. These consequences include hormonal dysregulation, chronic fatigue, and greater vulnerability to mental disorders and chronic diseases. Preventive and intervention measures are necessary to minimize these impacts and improve occupational health.

**Keywords:** Circadian Cycle, Sleep, Quality of Life, Worker, Shift Work.



## 52. EPIDEMIOLOGICAL PROFILE OF GESTATIONAL SYPHILIS IN BRAZIL: AN INTEGRATIVE REVIEW

Layssa Sousa de Carvalho<sup>1</sup>, Lucas Alvarenga Poleze<sup>1</sup>, Otávio Santos Perim<sup>1</sup>, Sofia Bravin Serrano<sup>1</sup>, Marcos Torres de Souza Cardoso<sup>1</sup>, Vitor Gabriel Miranda<sup>1</sup>, Yolanda Amorim Santiago Guia Graça<sup>1</sup>, Giovanna Werneck Leite<sup>1</sup>, Loise Cristina Passos Drumond<sup>2</sup>, Marcela Souza Lima Paulo<sup>2</sup>.

<sup>1</sup>Medical Student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

<sup>2</sup>Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES. Brazil.

**Corresponding author:** yolandaasgg1@gmail.com

**Introduction:** Syphilis during pregnancy represents a serious public health problem. By June 2022, 31,000 cases of treponematoses in pregnant women were registered in Brazil, highlighting the relevance of the topic. **Objective:** To understand the epidemiological profile of syphilis in pregnant women in Brazil. **Method:** This is an integrative review article, conducted between September 28 and 30, 2024. The Pubmed database and the Virtual Health Library (VHL) were used, applying the combination of descriptors: “Health Profile” OR “Epidemiological Profile” AND Syphilis AND “Pregnant Women” AND Brazil. In the VHL, articles were limited to the MEDLINE and LILACS databases, with the themes: Congenital Syphilis, Syphilis, Health Profile, Pregnant Women, Brazil, Epidemiological Studies, Descriptive Epidemiology, Late Diagnosis, and Epidemiological Monitoring. In PubMed, the inclusion criteria were the human species and articles from the MEDLINE database. Only articles published between 2019 and 2024, with full text available, were considered. Duplicate articles, reviews, and studies that did not fit the theme were excluded by reading the title and abstract. The remaining articles were read in full, and relevant points that answered the objective were analyzed. **Results:** The data collection, based on 11 selected articles, revealed a higher concentration of studies in the South, Southeast, and Northeast Regions of Brazil. The state of São Paulo had the highest number of notifications of gestational syphilis. The main parameters evaluated were "age of the pregnant woman," "ethnicity/race," and "education level." The predominant education level was incomplete primary education, ethnicity/race showed greater variation, while the most frequent age was between 20 and 29 years. **Conclusion:** The epidemiological profile of pregnant women with syphilis in Brazil is characterized by predominantly mixed-race (parda) women, aged between 20 and 29 years, with incomplete primary education, occupation as homemakers, and residing in the Southeast region of the country.

**Keywords:** Epidemiological Profile, Syphilis, Pregnant Woman, Brazil.



### 53. MOTIVATIONAL FACTORS FOR THE PRACTICE OF JIU-JITSU IN A SOCIAL PROJECT IN RIO BRANCO-AC

Joamerson Paz de Andrade<sup>1</sup>, Fabiano Santana de Oliveira<sup>2</sup>, Mauro José de Deus Morais<sup>1</sup>, Carlos Roberto Teixeira Ferreira<sup>1</sup>

<sup>1</sup>Multidisciplinary Laboratory for Studies and Scientific Writing in Health Sciences-UFAC <sup>2</sup> ABC Faculty of Medicine

**Corresponding author:** joamerson.andrade@sou.ufac.br

**Introduction:** Most of the existing social projects in Brazil propose to encourage sports practice among children and young people from low-income backgrounds, considering the potential of sports to improve the quality of life of its practitioners. In this context, Jiu-Jitsu has been presented as an important instrument in educational, social, and health development. Many children and young people lack ethical and moral values, and sports offer a stimulus to achieve them, promoting cooperation and friendship.

**Objective:** To verify the factors that motivate the practice of Jiu-Jitsu among adolescents participating in a social project in Rio Branco. **Methodology:** The research is of a cross-sectional and descriptive nature. The non-probabilistic intentional sample consisted of 32 young people of both sexes between 15 and 17 years of age. A sociodemographic questionnaire with 10 objective questions was used, and to verify the motivational factors, the Brazilian version of the Participation Motivation Questionnaire (PMQ) was used. The data were analyzed through descriptive analysis of the relative frequencies and percentages of the sociodemographic variables and motivational factors. **Results:** The results showed that 56.2% of the participants are male, while 43.8% are female. The two main reasons that drive the practice of martial arts are the improvement of technical skills (100%), maintaining physical fitness (100%), and releasing energy (82%). **Conclusion:** It is concluded that the adolescents in the project are motivated by improving techniques, maintaining physical fitness in the modality, and releasing energy. Further studies could explore and provide a broader understanding of the motivational factors of Jiu-Jitsu in social projects in Rio Branco-AC.

**Keywords:** Adolescents, Motivational factors, Jiu-Jitsu.



#### 54. PHYSIOTHERAPY IN PRIMARY CARE: THE EXPERIENCE OF STUDENTS AND THE IMPORTANCE OF PUBLIC POLICIES IN STRENGTHENING COMPREHENSIVE CARE

Andressa Arrial da Rosa<sup>1</sup>, Jonathan Jardim da Silva<sup>1</sup>, Gracielle Pampolim<sup>1</sup>

<sup>1</sup> Federal University of Pampa, Uruguaiiana, Rio Grande do Sul, Brazil

**Corresponding author:** [andressaarrial.aluno@unipampa.edu.br](mailto:andressaarrial.aluno@unipampa.edu.br)

**Introduction:** Physiotherapy emerged in the 19th century, initially for physical rehabilitation in response to epidemics and care for soldiers wounded in wars. In Brazil, it was regulated as a higher-level profession in 1969, through Decree No. 938. With the creation of the SUS (Unified Health System) in 1988 and the reconfiguration of the concept of health, physiotherapists began to integrate health promotion and disease prevention actions, mainly in vulnerable communities, with a focus on well-being and quality of life. **Objective:** To report the experience of physiotherapy students from the Federal University of Pampa (UNIPAMPA) regarding physiotherapeutic action in ESF-16 (Family Health Strategy unit) in Uruguaiiana-RS, highlighting the importance of public policies to expand physiotherapy in primary care and promote the health of vulnerable populations. **Method:** The study describes the experience of academics at ESF-16, with home visits to patients with physical or economic limitations and group sessions for the elderly at the UBS (Basic Health Unit). The activities aimed to improve physical condition, promote social interaction, and prevent falls, with individualized guidance for the elderly. **Results:** Home visits in the Cidade Alegria neighborhood offered accessible and comprehensive care, covering physical, emotional, and social aspects. The group sessions for the elderly at ESF-16 improved physical health and socialization, resulting in greater adherence to physiotherapy practices and a better quality of life for the community. **Final Considerations:** The experience demonstrates the transformative potential of physiotherapy in primary care. The presence of the physiotherapist in health units, as in ESF-16, allows for comprehensive care that goes beyond rehabilitation, encompassing physical, emotional, and social well-being. To expand this reach, it is essential that public policies reinforce the role of physiotherapy, ensuring access to preventive care and health promotion. This strengthening would allow for benefits such as the prevention of health problems, improvement of quality of life, and community health, especially in vulnerable regions.

**Keywords:** Physiotherapy, Primary Care, Humanized Care, Community Health, Aging.



## 55. SUPPLY OF MEDICINES THROUGH THE COURTS AND THE NEW RULES ESTABLISHED BY THE FEDERAL SUPREME COURT

Ancelma da Penha Bernardos<sup>1</sup>, César Albenes de Mendonça Cruz<sup>2</sup>

<sup>1</sup> Emescam; Student of the Postgraduate Program in Public Policy and Development at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brazil. <sup>2</sup> Emescam; Doctorate in Social Work. Master in Education.

**Corresponding author:** [ancelma.adv@gmail.com](mailto:ancelma.adv@gmail.com)

**Introduction:** The Federal Supreme Court (STF) establishes new rules restricting the granting, through judicial means, of medicines not incorporated into the SUS (Unified Health System) list, following the publication of Binding Precedent No. 61, published on 10/03/2024, setting as requirements for the concession the theses established in theme 6 (RE 566.571). Meanwhile, STF theme 1234 (Leading Case RE 1266243), whose merit judgment was published on 10/11/2024, establishes, among others, theses on the jurisdiction of the federal justice system, the definition of non-incorporated medicines, costing, and the mandatory analysis of the administrative act that denies the requested medicine. **Objective:** To analyze whether the theses established in theme 6 for the granting of medicines, and the theses established in theme 1234 intended for the flow and processing of legal actions, could influence the reduction in the number of lawsuits. **Method:** This is a descriptive study, whose unit of analysis is centered on the content of theme 6 and the indicators of health judicialization, available in the STF database. **Results:** The recent binding understanding of the STF is, as a rule, decisive in preventing judicial decisions granting medicines not incorporated by the SUS, even if registered with ANVISA and regardless of cost, establishing as an exception the cumulative proof, by the plaintiff, of six requirements: 1. denial of the medicine through administrative channels; 2. illegality of the non-incorporation by Conitec; 3. impossibility of substituting the medicine; 4. proof of the efficacy and safety of the medicine; 5. clinical indispensability of the treatment; 6. financial incapacity to bear the cost of the medicine. **Conclusion:** Judicial decisions must analyze the request for the granting of medicines not incorporated by the SUS in light of Binding Precedent No. 61, under penalty of nullity. The new rules established aim to comply with public policies on pharmaceutical assistance and tend to reduce, in the medium and long term, the filing of new lawsuits.

**Keywords:** Pharmaceutical assistance, Judicialization, Rational use of medicines, Binding Precedent.



## 56. GENDER, MENTAL HEALTH AND PANDEMIC: A SCOPING REVIEW

Karoline Carneiro Ferreira da Silva<sup>1</sup>, Amanda Calzi Roldi<sup>1</sup>, Mariana Santos de Sá Galina<sup>2</sup>, Jordana Cansian Fioreze<sup>2</sup>, Alan Patricio da Silva<sup>3</sup>

<sup>1</sup> Master's student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil

<sup>2</sup> Scientific Initiation students and nursing academics at the Escola Superior da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil.

<sup>3</sup> Professor in the Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil.

**Corresponding author:** karoline.silva@edu.emescam.br

**Introduction:** The new coronavirus emerged globally in December 2019, causing a pandemic with economic, social, and health impacts, affecting different social groups distinctly. Considering the visibility of gender and mental health, a mapping of power relations from a patriarchal and anti-asylum struggle perspective during the COVID-19 pandemic was conducted. **Objective:** To map the scientific literature on the mental health of women during the COVID-19 pandemic in Brazil, identifying relevant themes and discussions on how gender and mental health were addressed in scientific publications. **Method:** This is a scoping review study in which searches were conducted in the PubMed, Lilacs, SciELO, and PePSIC databases, using the following DeCS descriptors: “Pandemia” or “COVID-19” and “Gênero” and “Saúde Mental” or “Atenção Psicossocial” or “Sofrimento Psíquico” or “Transtorno Mental” or “Adoecimento Mental” or “Adoecimento Psíquico”. This research was expected to answer the following question: "How were gender and mental health addressed in Brazil during the COVID-19 pandemic, and what were the main discussions about women's mental health in this context?". **Results:** 392 studies were identified and 34 were selected. The chosen publications address the first two years of the pandemic and how gender and mental health were addressed in Brazilian publications. The texts were organized into three categories for analysis: (I) Domestic Violence, which highlighted the increase in violence against women during the pandemic, aggravated by forced cohabitation at home; (II) Social Vulnerability, which showed the deepening of inequalities and the lack of protection for the most needy populations in relation to basic rights; and (III) Work, which revealed the increase in unemployment and the overload of women in domestic responsibilities, intensifying gender inequality in a context of crisis. **Conclusion:** The analysis of the scientific literature on COVID-19 revealed the unequal impact of the pandemic on different groups, with an emphasis on the relationships between gender and health. Health professionals, constantly exposed to high levels of stress and burnout, and women, who faced a significant increase in symptoms of depression and anxiety, were especially affected. These vulnerable groups suffered from the emotional demands and intensified family and professional responsibilities during the health crisis. The study emphasizes the urgency of public policies that prioritize comprehensive health care and psychological support programs, highlighting the need for continuous support for frontline professionals. This area of research continues to expand, following the evolution of the pandemic's effects on the population's mental health.

**Keywords:** Gender, Mental Health, Pandemic, Scoping review.



## 57. HOUSING AND PUBLIC POWER: THE ROLE OF THE STATE IN GUARANTEEING THE RIGHTS OF POPULATIONS IN SOCIAL VULNERABILITY

Yorran Benayon de Alcântara Nogueira<sup>1</sup>, Beatriz de Barros Souza<sup>1</sup>

<sup>1</sup> Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brazil

**Corresponding email:** yorran\_nogueira@hotmail.com

**Introduction:** The right to housing, as a social right, is based on human dignity, an essential element of the Democratic State of Law. Guaranteeing this right requires coordinated action between public power and competent bodies to meet existing housing demands. **Objective:** To understand the role of the State in guaranteeing the housing rights of populations in situations of social vulnerability. **Method:** This is an integrative review, following the recommendations of the methodological structure developed in the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews (PRISMA-ScR) checklist. Searches were conducted in the following databases: PubMed, Latin American and Caribbean Literature on Health Sciences (LILACS), and the virtual library Scientific Electronic Library Online (SciELO). Three controlled vocabularies were used for housing, State, and Public Policies, Descriptors in Public Policies and Local Development, in conjunction with the Boolean operators AND and OR to construct the search strategies. **Results:** Of the 473 studies, 407 were excluded by filtering duplicate titles. Of the remaining 66 articles, 59 were eliminated through contextual analysis and abstract, 7 were analyzed systematically through detailed reading, with 3 being excluded for not directly addressing the central theme. Thus, 4 were included in the review, being one case study, one historical article, two academic literature reviews, and one case study. The analyzed publications were published from 1994 to 2022. Most of the articles found were published in a foreign language. The results highlighted the failures of the State in addressing the right to housing for the most vulnerable population, understanding, nevertheless, that this absence exposes economic inequalities that are reflected in health, as well as in other areas, such as public health. **Conclusion:** The State should fulfill the role constitutionally required of it, guaranteeing the right to housing for all people universally, as set out in law. However, it is a fact that the state institution that should care for and meet population demands does not comply with the required objectives, presenting failures and risks for the population in general, leaving the most vulnerable population, especially, at the mercy of chance.

**Keywords:** Housing, Public Power, Government, Socioeconomic Rights, Social Vulnerability.



## 58. IMPACTING MORTALITY AND QUALITY OF LIFE OF PATIENTS WITH HEREDITARY ANGIOEDEMA

Izabella Ahnert Blanco de Moura Magalhães<sup>1</sup>, Lucas Destefani Natali<sup>1</sup>, Felipe Demian Silva<sup>1</sup>, Pedro Guimarães Marcarini<sup>1</sup>, Faradiba Sarquis Serpa<sup>1</sup>

<sup>1</sup> Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM)], Vitória, Espírito Santo, Brazil

**Corresponding email:** izabellablancol@gmail.com

**Introduction:** In 2014, the Brazilian Ministry of Health established the National Policy for Comprehensive Care for People with Rare Diseases (PNAIPDR) within the SUS. To date, 17 Reference Services for Rare Diseases have been enabled, including the Hospital Santa Casa de Misericórdia de Vitória (HSCMV), which provides care for Hereditary Angioedema (HAE). HAE is an autosomal dominant genetic disease, characterized by angioedema attacks that affect the subcutaneous tissue and mucous membranes in various parts of the body. **Objective:** To describe the clinical-epidemiological and laboratory profile of patients with HAE residing in Espírito Santo and to improve the diagnosis and management of patients with HAE through participation in a national patient registry. **Method:** A prospective study, developed at the Care Service for Patients with Rare Diseases of HSCMV. Patients diagnosed with HAE under treatment at the SR HSCMV will be invited to participate in the Brazilian Multicenter Registry of Hereditary Angioedema (REBRAEH). The standard protocol includes sociodemographic data, clinical and diagnostic aspects according to international ontology, and information about treatment. **Results:** The study has so far analyzed 98 patients with HAE, where 85 (86.7%) continue to be followed up, 8 (8.2%) lost contact, and 5 (5.1%) died, unrelated to HAE. The average age was 40.76 years, with a predominance of women (57.1%). The majority (95.9%) had a family history of HAE, with 49% reporting family deaths from HAE attacks. The average time to diagnosis was 17.56 years, with 69.1% of patients reporting severe attacks. The predominant treatment was Icatibant (60.6%), and 69.4% used long-term prophylaxis, with Danazol and Oxandrolone being the most common. Comorbidities included hypertension (21.4%) and diabetes (5.1%). **Conclusion:** HAE is a complex disease due to the diversity, unpredictability, and severity of its clinical manifestations, which makes early diagnosis a challenge. The delay between the onset of symptoms and diagnosis highlights the importance of disseminating information about the disease among health professionals, patients, and the scientific community.

**Keywords:** Angioedema, C1 inhibitor, Bradykinin, Hereditary Angioedema.





## 59. IMPACTS OF CLIMATIC CHANGES ON THE HEALTH OF THE STATE OF CEARÁ

Lara Ellen Brandão Batista Lima<sup>1</sup>, Giovana Dias Anjos<sup>1</sup>, Maria Isabel Nepomuceno Carvalho<sup>1</sup>, Rebeca Leite Peixoto<sup>1</sup>, Olivia de Almeida Duarte<sup>1</sup>, Emery Ciana Figueiredo Vidal<sup>1</sup>

<sup>1</sup> Regional University of Cariri. Crato, CE, Brazil

**Corresponding author:** lara.brandao@urca.br

**Introduction:** Climate changes in Ceará can bring harm to the homeostasis of the human organism, considering that the progressive increase in high temperatures leads to the sickening of the population. The need to discuss the presented topic lies in the relevance of access to information and updates regarding such environmental and public health damages. **Objective:** To analyze the main damages caused to the health of the population of the State of Ceará, aiming to correlate them with the climate changes in the region. **Method:** A qualitative descriptive study was conducted where information was extracted and analyzed from files published by the Ministry of Health of the Government of the State of Ceará. **Results:** A review of these information sources revealed a higher incidence of pulmonary, cardiovascular, and vector-borne diseases during periods of higher temperatures in the cities of Ceará. During the periods of greatest heat intensity, it was observed that the combination of dry and polluted air in the atmosphere interfered as aggravating factors in respiratory problems, especially in chronic diseases such as asthma and bronchitis. In addition, excessive heat can also cause overloads on the circulatory system and increase the probability of health-threatening events such as heart attacks and strokes, even hampering the recovery of seriously ill patients. The increase in outbreaks during these times can occur through vector-borne diseases, such as the spread of dengue, zika, and chikungunya. These outbreaks can result in seasonal epidemics that will require greater demands for trained professionals and equipment, such as the availability of beds and medications to combat such diseases, straining the governmental organization in the public health systems. **Conclusion:** It is concluded that high temperatures lead to an increase in the rate of hospitalization for diseases sensitive to climate change, generating an overload on the public health system and directly impacting vulnerable communities in the state of Ceará.

**Keywords:** Environmental Health, Climate Change, Public Health.



**60. SOCIAL IMPACT AND IMPROVEMENT OF HEALTH SERVICES THROUGH  
CHARITY INITIATIVES: REPORT FROM THE CAMBRIDGE HEALTH  
ALLIANCE FOUNDATION**

Luana Marques Ribeiro<sup>1</sup>, Eliziane dos Santos Corrêa Soromenho<sup>1</sup>, Lucielli Pimenta Bonifacio<sup>1</sup>, Maria do Perpétuo Socorro Oliveira de Souza<sup>1</sup>, Beatriz de Barros Souza<sup>2</sup>, Paulo André Stein Messetti<sup>2</sup>

<sup>1</sup> Master's Student, Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória, ES. <sup>2</sup> Advisor, Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória-ES. Brazil.

**Corresponding author:** luanamarquesribeiro2@gmail.com

**Introduction:** The Cambridge Health Alliance (CHA) stands out as a pillar of health promotion and social well-being in its surrounding communities in Boston, USA. Social and economic disparities profoundly influence access to and quality of health, and the institution's aim is to provide access to inclusive health, confronting poverty, food insecurity, and language barriers. The CHA foundation offers medical and social services that seek to minimize inequalities in healthcare. The foundation primarily serves immigrants without access to the formal North American health system. **Objective:** To describe community services performed by the Cambridge Health Alliance foundation in maternal health, mental health, and in support of linguistic and cultural diversity. **Method:** This is a review study of the "Cambridge Health Alliance Foundation Impact Report". **Results:** The Cambridge Health Alliance Foundation serves various areas of community health. Noteworthy are the achievement of favorable maternal health outcomes, with access to doulas and cultural support for pregnant women of diverse origins, and the strengthening of community mental health with behavioral health centers. The initiatives address psychiatric emergencies, increase access to continuous care in appropriate settings, and avoid the overuse of emergency services. Initiatives for training medical interpreters promote inclusion and cultural representation and consolidate diversified and equitable assistance for underserved populations. **Conclusion:** The integration between community health and social support reduces social inequalities. The technical report demonstrates that strengthening philanthropic initiatives promotes a positive impact on collective health, meets the immediate needs of vulnerable populations, and generates a multiplier effect of favorable outcomes for those involved, based on health resilience.

**Keywords:** Health Services, Cambridge Health Alliance Foundation, Charitable Institutions, Health Systems Resilience.



## 61. IMPLEMENTATION OF THE SOCIAL REINSERTION STRATEGY FOR PEOPLE WITH PROBLEMS ARISING FROM THE USE OF ALCOHOL AND OTHER DRUGS UNDER THE REDE ABRAÇO PROGRAM IN ESPÍRITO SANTO

Carlos Augusto Lopes<sup>1</sup>, Marcia Geralda Saldanha<sup>2</sup>, Nathalia Borba Raposo Pereira<sup>3</sup>, Aline Borel Monteiro de Castro<sup>4</sup>, Getúlio Sérgio Souza Pinto<sup>5</sup>, Carla Jordão Silva<sup>6</sup>

<sup>1</sup>PhD student in Social Sciences, Postgraduate Program in Social Sciences (PGCS-UFES).

<sup>2</sup>Social Worker. Postgraduate in Race, Gender, and Ethnicity (UFES). Postgraduate in Education and Poverty (UFES).

<sup>3</sup>Master's student in the Postgraduate Program in Psychology at UFES.

<sup>4</sup>Master's student in education in sciences and mathematics. Prevention Coordinator of the Rede Abraço Program in Espírito Santo.

<sup>5</sup>Laboratory of studies on health, violence, and accidents (LAVISA).

<sup>6</sup>Master's student in Social Sciences, Postgraduate Program in Social Sciences (PGCS-UFES).

**Corresponding author:** carlopesviana@gmail.com

**Introduction:** The State Program of Integrated Actions on Drugs, known as the Rede Abraço Program, is structured into four strategic axes: Prevention, Care and Treatment, Social Reinsertion, and Studies, Research, and Evaluation. The Program was established by state decree and one of its developments is the General Plan for Social Reinsertion. Due to the particularities in question, one of the biggest challenges of the program has been the implementation of actions to promote the social reinsertion of people with problems arising from the abusive use of alcohol and other illicit drugs. To ensure the implementation of the General Plan for Social Reinsertion and to seek to overcome the challenges of implementing and monitoring those served by the program, the Monitoring Unit for Social Reinsertion (UARIS) was created, whose objective is to organize actions that enhance the rescue and autonomy of the monitored subjects, through a systematic articulation of the complementary services network and an integrated system of indicators. **Objective:** To provide a case report on the process of implementing the Social Reinsertion Strategy for those served by the Rede Abraço Program in Espírito Santo. **Method:** An exploratory and descriptive study was conducted in the literature on the complexity of the concept of Social Reinsertion for people with problems arising from the abusive use of alcohol and other illicit drugs. After this, the guidelines for the creation and operation of UARIS, the protocols and indicators for monitoring the people served, and the model for articulation, integration, and management of services were constructed. **Results:** Creation of UARIS and production of a governance system for the social reinsertion strategy of those served by the Rede Abraço Program and standardization of indicators and understandings about the implemented actions and their institutionalization through publication in the Official Gazette of the State of Espírito Santo (DIO-ES), through a service instruction by the Undersecretary of State for Drug Policies. **Conclusion/Final Considerations:** The creation of UARIS and the direct involvement of the Undersecretary of Drug Policies in the articulation and coordination of actors involved in the execution of the General Plan for Social Reinsertion of the Rede Abraço Program have been determinant for the institutionalization of the Social Reinsertion strategy, in order to make it functional and more effective.

**Keywords:** Social Reinsertion, Alcohol and Drugs, Public Policies.



## 62. ADOLESCENT SEXUAL HEALTH INDICATORS: INCIDENCE OF SYPHILIS IN ESPÍRITO SANTO AND SUSTAINABLE DEVELOPMENT GOAL 3 OF THE 2030 AGENDA

Eloiza Toledo Bauduina<sup>1</sup>, Agda da Silva Souza<sup>2</sup>, Larissa Trindade Magnago<sup>2</sup>, Natália Marques Pimenta<sup>2</sup>,  
Raiane Oliveira dos Santos Pereira<sup>2</sup>, Italla Maria Pinheiro Bezerra<sup>3</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, Espírito Santo, Brazil;

<sup>2</sup> Medical Student at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, Espírito Santo, Brazil;

<sup>3</sup> Coordinator and Professor of the Public Policy and Local Development Course at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, Espírito Santo, Brazil.

**Corresponding author:** eloiza.bauduina@gmail.com

**Introduction:** The 2030 Agenda created by the United Nations (UN) brought with it 17 Sustainable Development Goals (SDGs) that aim to ensure a better world for all. SDG 3 concerns health and well-being, and includes actions to improve sexual and reproductive health, as well as promoting health education and preventing STIs among young people. In this sense, syphilis is a Sexually Transmitted Infection (STI) caused by the bacterium *Treponema pallidum*. According to the Ministry of Health, in Brazil, in 2023, 242,826 cases of acquired syphilis were registered, which shows a detection rate of 113.8 cases per 100,000 inhabitants. **Objective:** To identify the incidence of acquired Syphilis in adolescents in the state of Espírito Santo in the year 2023 as an indicator of SDG 3 of the 2030 Agenda. **Method:** This is a cross-sectional epidemiological study with a quantitative approach, which sought data through TabNet from DATASUS, an electronic notification system of the Unified Health System (SUS) of Brazil. As an inclusion criterion, confirmed cases of acquired syphilis in the year 2023, in individuals aged 10 to 19 residing in the state of Espírito Santo, were included in the study. This study is part of the Scientific Initiation under the FAPES Call No. 22/2022 Junior Scientific Initiation Program of Espírito Santo – Researcher of the Future (PICJr2023). **Results:** In 2023, 589 cases of acquired syphilis were reported in adolescents aged 10 to 19. It was found that adolescents aged 15 to 19 had a higher number of cases of the disease. The female sex had a high number of cases compared to males, corresponding to 64.5% of the evidenced cases. There was a higher prevalence among mixed-race (pardo) and white individuals, representing 72.5% of the cases. Thus, the adolescent sexual health indicators showed worse performance in 2023, which demonstrates a failure in achieving the SDGs of the 2030 Agenda. **Final Considerations:** The study understands the increase in cases of the disease in the state of Espírito Santo, making it necessary to develop strategies aimed at the adolescent public with the intention of raising awareness and preventing Sexually Transmitted Infections.

**Keywords:** Syphilis, Adolescent Health, Sexually Transmitted Infections.



### 63. ARTIFICIAL INTELLIGENCE AND MENTAL HEALTH: AN ETHICAL AND SUSTAINABLE APPROACH

Karoline Carneiro Ferreira da Silva<sup>1</sup>, Amanda Calzi Roldi<sup>1</sup>, Stefania Schimith Bergher<sup>1</sup>, Rodrigo Scoassante Tavares<sup>1</sup>, Beatriz de Barros Souza<sup>2</sup>, Fernando Rocha Oliveira<sup>2</sup>, Alan Patrício da Silva<sup>2</sup>

<sup>1</sup> Master's Student, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil

<sup>2</sup> Professor, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil

**Corresponding author:** karolferreirac@gmail.com

**Introduction:** With the accelerated growth of Artificial Intelligence (AI) and the increase in virtual interactions during the COVID-19 pandemic, new challenges for mental health and well-being arise. Ecotechnobioethics proposes an ethical model for the development and use of these technologies, ensuring responsible and sustainable practices. This approach is in line with Sustainable Development Goal (SDG) 3, health and well-being, which aims to promote health and quality of life for all. **Objective:** The present study investigates how AI can influence human subjectivity and mental health. The proposal is to analyze the role of ecotechnobioethics in guiding public policies and ethical regulations, seeking to ensure well-being and the proper use of digital technologies, in conjunction with the principles of SDG 3. **Method:** This study is a narrative review of the literature, where searches were conducted in the Medline and Lilacs databases, analyzing the relationship between AI and mental health, also considering new models of social interaction mediated by digital technologies. **Results:** The study suggests that, although AI can contribute to diagnosis and telemedicine, it does not replace the emotional and subjective dimensions that characterize the human being. The increase in digital interactions makes the development of guidelines that ensure the safe and beneficial use of AI urgent, promoting mental health and preserving the quality of human relationships. **Conclusion:** Ecotechnobioethics presents itself as an important framework to guide the responsible use of AI, respecting subjectivity and promoting health in a sustainable way. Integrating these practices into SDG 3 strengthens the need for regulations and public policies that guarantee an ethical and safe use of AI for the benefit of collective health and social well-being.

**Keywords:** mental health, bioethics, artificial intelligence, sustainable development.



#### 64. ARTIFICIAL INTELLIGENCE AND MENTAL HEALTH: AN ETHICAL AND SUSTAINABLE APPROACH FROM NICOLÁS OBIGLIO (2024)

Karoline Carneiro Ferreira da Silva<sup>1</sup>, Amanda Calzi Roldi<sup>1</sup>, Stefania Schimith Bergher<sup>1</sup>, Rodrigo Scoassante Tavares<sup>1</sup>, Beatriz de Barros Souza<sup>2</sup>, Paulo André Stein Messetti<sup>2</sup>

<sup>1</sup> Student, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil

<sup>2</sup> Professor, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil

**Corresponding author:** karolferreirac@gmail.com

**Introduction:** With the accelerated growth of Artificial Intelligence (AI) and the increase in virtual interactions during the COVID-19 pandemic, new challenges for mental health and well-being arise. According to Nicolás Obiglio, in the text "AI and Mental Health: new challenges of Ecotechnology" (2024), Ecotechnobioethics proposes an ethical model for the development and use of these technologies, ensuring responsible and sustainable practices. This approach is in line with Sustainable Development Goal (SDG) 3, health and well-being, which aims to promote health and quality of life for all. **Objective:** The present study aims to identify how AI can influence human subjectivity in its mental health context. The proposal is to describe the role of ecotechnobioethics in guiding public policies from the perspective of ethical regulations, seeking to ensure well-being and the proper use of digital technologies, in conjunction with the commitments of SDG 3. **Method:** This study is a narrative review of the literature, analyzing the relationship between AI and mental health, also considering new models of social interaction mediated by digital technologies, in the Medline and Lilacs databases. **Results:** The literature indicates that, although AI can contribute to diagnosis and telemedicine, it does not replace the emotional and subjective dimensions that characterize the human being. The increase in digital interactions makes the development of guidelines that ensure the safe and beneficial use of AI urgent, promoting mental health and preserving the quality of human relationships, in line with SDG 3. **Conclusion:** This study showed that Artificial Intelligence can benefit health, but also imposes risks to mental health and well-being. Ecotechnobioethics, as proposed by Nicolás Obiglio (2024), offers an essential ethical approach to guide the responsible use of AI. Integrating these practices into SDG 3 strengthens the need for regulations and public policies that guarantee an ethical and safe use of AI for the benefit of collective health and social well-being.

**Keywords:** bioethics, sustainable development, artificial intelligence, mental health.



## 65. MICRO AND SMALL BUSINESS LAW: ANALYSIS OF THE IMPLEMENTATION AND RESULTS OF LC N° 123/2006 IN THE MUNICIPALITY OF ANCHIETA – ES

Renata Braga Rodrigues<sup>1</sup>, Carla Patrícia Pires Xavier de Carvalho<sup>1</sup>, Graziella Almeida Salazar Veloso<sup>1</sup>, Wilson Espósito Júnior<sup>1</sup>, Fernando Rocha Oliveira<sup>2</sup>, Cesar Albenes de Mendonça Cruz<sup>2</sup>.

<sup>1</sup> Student, stricto-sensu Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória.

<sup>2</sup> Professor, stricto-sensu Postgraduate Program in Public Policy and Local Development. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória. Vitória, ES.

**Corresponding author:** renata.braga@edu.emescam.br

**Introduction:** The National Statute for Microenterprises and Small-Sized Companies was created by Complementary Law No. 123/2006, to regulate and guarantee differentiated and simplified treatment for these companies, in accordance with the Federal Constitution of 1988. LC No. 123/2006 is the result of the repeal and unification of two pieces of legislation, namely, the Federal SIMPLES (Law No. 9317/96) and the old Statute (Law No. 9841/99), with important innovations. The Law aims at the development and competitiveness of these enterprises, as a strategy for generating employment and income, social inclusion, reducing informality, and strengthening the national economy, linked to thematic axis 8 – Decent work and economic growth, especially concerning target 8.3 on promoting development-oriented policies and supporting productive activities, encouraging the formalization and growth of ME/EPP, including through access to financial services. With a differentiated tax regime, the legislation guarantees access to public services, promoting a favorable environment for the formalization and growth of these businesses. **Objective:** The objective of this study is to analyze the implementation and results of Complementary Law No. 123/2006 in the municipality of Anchieta – ES, with a focus on promoting and fostering entrepreneurship, supporting local economic growth, and stimulating the formalization of new businesses. **Method:** The study adopts a descriptive, documentary approach, exploring the practice of the General Law, through the implementation of the Entrepreneur's Room in the municipality of Anchieta - ES and its results. The research was based on data from the Integrated Management System of the Entrepreneur's Room, allowing us to map the services offered in that space and reconcile them with those related to the General Law. **Results:** After analyzing the report of services performed at the Anchieta Entrepreneur's Room, it was found that the offer of various services to the MEI – Individual Microentrepreneur, guidance for Government Procurement with the creation of a supplier registry, issuance of various certificates, issuance of invoices, offer of training, access to credit, among others, allows us to validate that the room plays a fundamental role in supporting the micro and small enterprises of the region, with this it was possible to ascertain an advance of 42.22% in the number of formalized companies in the last four years. **Conclusion:** With a variety of services available and strategic partnerships with institutions such as the Federal Revenue, SENAC, and SEBRAE, the Entrepreneur's Room expands the range of services offered, providing entrepreneurs with access to tax guidance, management training, and professional improvement.

**Keywords:** Legislation, Microentrepreneur, Entrepreneur's Room, Public Policies, Public Services.



## 66. DENGUE CONTROL METHODS CARRIED OUT BY THE COMMUNITY: A LITERATURE REVIEW

Eloiza Toledo Bauduina<sup>1</sup>, Agda da Silva Souza<sup>2</sup>, Larissa Trindade Magnago<sup>2</sup>, Natália Marques Pimenta<sup>2</sup>,  
Raiane Oliveira dos Santos Pereira<sup>2</sup>, Italla Maria Pinheiro Bezerra<sup>3</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, Espírito Santo, Brazil;

<sup>2</sup> Medical Student at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, Espírito Santo, Brazil;

<sup>3</sup> Coordinator and Professor of the Public Policy and Local Development Course at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, Espírito Santo, Brazil.

**Corresponding author:** eloiza.bauduina@gmail.com

**Introduction:** Dengue is an arboviral disease caused by the *Aedes aegypti* vector, common in tropical countries, where its spread is favored by the amount of rainfall and mild climate. In Brazil, during the first half of 2024, 6,215,201 probable cases of dengue were registered in the country, representing a 344.5% increase compared to the same period in 2023. As it is an endemic Brazilian disease, it is of utmost importance that public bodies devise strategies to combat this arbovirus, but in addition, social participation in the fight against Dengue becomes necessary for greater effectiveness. **Objective:** To analyze how social participation in the fight against dengue occurs. **Method:** This is a bibliographic review of the literature that sought to gather and synthesize the results of scientific publications related to social participation in the fight against dengue. The search for studies was carried out between May and July 2024 in electronic databases using the following Health Descriptors (DeCS): (“Vector Control of Diseases” OR “Disease Prevention”) AND (“Social Participation” OR “Community Participation”) AND (“Dengue”). This work is part of the Scientific Initiation under Call No. 02/2024 - Institutional Program for Scientific, Technological, and Innovation Initiation (PIICTI), funded by a scholarship from the National Council for Scientific and Technological Development (CNPq). **Results:** Of the 127 publications found in the databases, only 10 studies were shown to meet the inclusion criteria, as well as possessing the necessary elements to answer the proposed guiding question. The studies showed that community participation in the fight against dengue has as its main form of prevention the removal of water from containers and objects, avoiding the reproduction of the vector. Furthermore, community participation is not fully implemented, leaving gaps regarding its realization. **Final Considerations:** It is essential that the population has knowledge and adherence to dengue prevention practices, given the recurrent emergence of epidemics of the disease in the world. It is necessary to raise awareness among the population in order to ensure improvement in the adherence to practices for combating dengue.

**Keywords:** Dengue, Social Participation, Vector Control of Diseases.





## 67. PRAXICAL MODEL AS A TOOL FOR THE DEVELOPMENT OF SUSTAINABLE TECHNOLOGIES IN THE HEALTHCARE AREA

Janayle Kéllen Duarte de Sales<sup>1</sup>, Edilma Gomes Costa Cavalcante<sup>1</sup>, Maria do Socorro Vieira Lopes<sup>1</sup>

<sup>1</sup> Regional University of Cariri (URCA), Crato, Ceará, Brazil.

**Corresponding author:** janayleduarte@gmail.com

**Introduction:** The development of technologies in health has faced global challenges related to access, cost, and sustainability of resources. The need to create solutions that are both effective and environmentally responsible is growing, especially in contexts of financial limitations and scarce resources. In this sense, the Praxical Model for the Development of Technologies (PMDT) emerges as a methodological approach capable of integrating theory and practice, promoting the development of technologies that respond to the real needs of users, while respecting principles of sustainability.

**Objective:** To reflect on how the application of the PMDT can contribute to the development of sustainable technologies in health. **Methodology:** This is a reflective study about the use of the principles of the PMDT methodological framework for the construction of sustainable technologies in the health area, structuring itself in a continuous and iterative cycle of development, evaluation, and adjustment of technologies. **Results:** The adoption of the PMDT in the development of health technologies allows the creation of solutions more aligned with the real needs of the assisted populations. Furthermore, by promoting a constant feedback cycle, it is possible to adjust the technologies to make them more effective and adaptable to the local context, which strengthens their social and environmental sustainability. With the implementation of the PMDT, the following are expected: Accessible technologies: Low-cost solutions that serve populations of different economic realities; Environmental sustainability: Development of technologies that use natural resources responsibly, with a focus on waste reduction and the use of recyclable materials; Social sustainability: Creation of inclusive technologies that promote equity in access to healthcare; and Increased efficiency in the health system: Technologies that contribute to the improvement in resource management and the quality of care. **Conclusion:** The Praxical Model for the Development of Technologies offers a robust approach for the development of sustainable technological solutions in the health sector. By integrating the principles of reflective praxis, interdisciplinary collaboration, and contextual flexibility, the PMDT contributes to the creation of technologies that not only address immediate health problems but are also socially and environmentally responsible. Its application in the development of sustainable technologies in health represents a significant advance for innovation in a critical sector that demands effective, inclusive, and sustainable solutions.

**Keywords:** Praxical Model for the Development of Technologies, Sustainable technologies, Health, Social sustainability, Environmental sustainability.



### 68. FETAL MORTALITY IN ACRE, BRAZIL, 2000-2023

Kerolayne Mendes da Silva<sup>1</sup>, Adriana de Souza Araújo<sup>1</sup>, Nair da Silva Souza<sup>1</sup>, Maria Patrícia Xavier da Silva<sup>1</sup>, Iara Santana dos Santos Cruz<sup>1</sup>, Aline Bergamini Effgen Sena<sup>2</sup>, João Batista Francalino da Rocha<sup>1,2</sup>

<sup>1</sup> Multiprofessional Integrated Residency Program with an emphasis on Family and Community Health. Federal University of Acre. Rio Branco, AC, Brazil.

<sup>2</sup> Laboratory of Study Design and Scientific Writing in Health Sciences. Federal University of Espírito Santo. Vitória, ES, Brazil.

**Corresponding author:** kerolayne.suzuki20@outlook.com

**Introduction:** Nearly 2 million stillbirths occur at a gestational age (GA) of 28 weeks or more every year, which is equivalent to one stillbirth every 16 seconds. Fetal mortality refers to the number of deaths occurring from the 22nd complete week of gestation, or 154 days, or fetuses with a weight of 500g or more, or a height from 25 cm, per thousand total births. In Acre, it is necessary to fill gaps in regional scientific knowledge about stillbirths and to support the Sustainable Development Goals (SDGs). **Objective:** To analyze the trend of fetal mortality in the state of Acre, Brazil, from 2000 to 2023. **Method:** An ecological time-series study with secondary data from the Mortality Information System (SIM/DATASUS) of the Ministry of Health (MS) of Brazil. The trend pattern of fetal mortality at a GA of 22 weeks and more was analyzed, according to ICD-10. The analysis employed the calculation of the annual percent change (APC) and the average annual percent change (AAPC). The interpretation was: if positive results, statistically significant ( $p < 0.05$ ), increasing trend; if negative, decreasing trend. And stability, if APC or AAPC were not significantly different from zero. The fetal mortality rate (FMR) was calculated by the ratio of the number of fetal deaths of resident mothers to the number of total births (TB) of resident mothers (live births plus fetal deaths of 22 weeks and more of gestation), multiplied by 1,000. The analyses were performed with Microsoft Excel 2019 and Joinpoint Regression 5.2.0 software. **Result:** 3,733 stillbirths were recorded, with an annual average of  $156 \pm 19$  standard deviation (SD) (95% CI 148; 163) and a Percent Change (PC) of -25.47%, from 2000 to 2023. This corresponded to a global FMR of 8.24 per 1,000 TB, an average of  $9.50 \pm 1.30$  SD (95% CI 8.95; 10.05), and a PC of -21.23% (2000-2023). The causes were concentrated in Chapter XVI - certain conditions originating in the perinatal period (95.47%) and XVII - congenital malformations, deformations, and chromosomal abnormalities (3.62%). The AAPC of the FMR indicated a decreasing trend (-1.53; 95% CI -2.52; -0.79;  $p = 0.0016$ ). And the APC revealed three segments: 2000-2007 decreasing trend (-6.11; 95% CI -10.65; -3.35;  $p = 0.0024$ ), 2007-2020, increasing, (2.90; 95% CI 1.90; 6.05;  $p = 0.0036$ ), and 2020-2023, decreasing, (-9.06; 95% CI -22.04; -1.72;  $p = 0.0164$ ). **Conclusion:** There was a decreasing trend in stillbirths. This suggests improvements in maternal and child health care over the total period, but with a concerning intermediate period of increased rates (2007-2020). The most recent period (2020-2023) showed the sharpest drop, which may indicate improvements in perinatal care.

**Keywords:** Stillbirth, Fetal Mortality, Maternal and Child Health, Epidemiology.



## 69. MORTALITY FROM TRAFFIC ACCIDENTS AMONG ADOLESCENTS RESIDING IN THE STATE OF ESPÍRITO SANTO

Franciele Foschiera Camboin<sup>1</sup>; Alline Kosanke E Silva<sup>2</sup>; Isaura Barros Alves Pinto<sup>3</sup>; Franciéle Marabotti Costa Leite<sup>4</sup>

<sup>1</sup> Professor, Nursing Program, State University of Paraná; member of the research group on health, violence, and accidents at UFES (LAVISA).

<sup>2</sup> Student, Physical Therapy Program, Federal University of Espírito Santo (UFES); member of the research group on health, violence, and accidents at UFES (LAVISA).

<sup>3</sup> Student, Postgraduate Program - Master's in Collective Health, Federal University of Espírito Santo; member of the research group on health, violence, and accidents at UFES (LAVISA).

<sup>4</sup> Professor, Undergraduate Nursing and Postgraduate Collective Health Programs, Federal University of Espírito Santo; Leader of the research group on health, violence, and accidents at UFES (LAVISA).

**Introduction:** Traffic accidents involving adolescents are not just statistics. They are tragedies that profoundly impact the lives of thousands of people. The combination of factors leading to these accidents demands an urgent and comprehensive response. It is necessary to act now, with education and effective public policies, to drastically reduce these numbers and build a future with less pain and more safety for adolescents. **Objective:** To identify the mortality from traffic accidents in adolescents residing in the state of Espírito Santo, during the period from 2003 to 2022. **Method:** A descriptive study using data from the Mortality Information System (SIM) in Espírito Santo. Data collection was carried out using death records of traffic accident victims aged 10 to 19 years residing in the state of Espírito Santo from 2003 to 2022. Proportional mortality was calculated according to the types of accidents in the period from 2002 to 2022 and in the state's health regions. **Results:** During the study period, 1,630 adolescents died as victims of traffic accidents in the state of Espírito Santo. The location where the deaths occurred was mainly on public roads with 783 (51.34%) deaths, followed by hospitals with 716 (10.24%). Regarding sex, 1,302 (79.87%) boys and 328 (17.33%) girls died. 283 (17.36%) were in the 10 to 14 age group and 1,347 (82.63%) were adolescents between 15 and 19. Adolescents of mixed-race (Pardo) were the most affected with 847 (51.96%), followed by white adolescents with 511 (31.34%), and, to a lesser extent, Black adolescents with 87 (5.33%). As for the type of traffic accident, deaths where the victim suffered trauma from being on a motorcycle, 667 (40.9%), were the most common among adolescents, followed by accidents where the adolescent was a motor vehicle occupant, 375 (46.19%), pedestrians, 243 (14.90%), and 59 (3.61%) were cyclists. **Considerations:** Male adolescents of mixed-race (Pardo) who use motorcycles are the most vulnerable to the risks of traffic accidents. Public roads become a hostile environment for these young people, with fatal consequences. The data show that the year 2008 had the highest number of accidents, which decreased over the years, and 2022 has the lowest frequency among the 20 years studied. However, the problem persists, requiring urgent and targeted actions for this population to drastically reduce these numbers and ensure the safety of all young people.

**Keywords:** Adolescents, Traffic accidents, Death, Prevention.



## 70. MORTALITY FROM TRAFFIC ACCIDENTS IN THE EARLY YEARS OF LIFE AMONG CHILDREN RESIDING IN THE STATE OF ESPÍRITO SANTO

Franciele Foschiera Camboin<sup>1</sup>; Alline Kosanke E Silva<sup>2</sup>; Isaura Barros Alves Pinto<sup>3</sup>; Franciéle Marabotti Costa Leite<sup>4</sup>

<sup>1</sup> Professor, Nursing Program, State University of Paraná; member of the research group on health, violence, and accidents at UFES (LAVISA).

<sup>2</sup> Student, Physical Therapy Program, Federal University of Espírito Santo (UFES); member of the research group on health, violence, and accidents at UFES (LAVISA).

<sup>3</sup> Student, Postgraduate Program - Master's in Collective Health, Federal University of Espírito Santo; member of the research group on health, violence, and accidents at UFES (LAVISA).

<sup>4</sup> Professor, Undergraduate Nursing and Postgraduate Collective Health Programs, Federal University of Espírito Santo; Leader of the research group on health, violence, and accidents at UFES (LAVISA).

**Corresponding email:** [alline.k.silva@edu.ufes.br](mailto:alline.k.silva@edu.ufes.br)

**Introduction:** Traffic accidents are a complex and multifactorial phenomenon with serious consequences for public health. It is necessary to invest in education, infrastructure, and public policies to ensure safer traffic for everyone, especially for children. **Objective:** To describe the mortality from traffic accidents in the early years of life of children residing in the state of Espírito Santo. **Method:** This is a descriptive, exploratory study using data from the Mortality Information System (SIM) in Espírito Santo. Data collection was performed using death records of traffic accident victims aged zero to four years residing in the state of Espírito Santo from 2003 to 2022. Proportional mortality was calculated according to the types of accidents in the period and in the state's health regions and was also analyzed by age group, classified into the following age ranges: under 1 year (early neonatal, late neonatal, and post-neonatal) and 1-4 years (early childhood). **Results:** During the period from 2003 to 2022, it was observed that 207 children aged between zero and four years died as victims of traffic accidents in the state of Espírito Santo. The most frequent place of death was the hospital with 103 (49.9%) and subsequently 81 (39.1%) deaths on public roads. Regarding sex, 122 (58.9%) boys and 85 (40.1%) girls died. 173 (83.57%) children were in the age group between one and four years and 33 (15.94%) were under one year. Children of mixed-race (Pardo) were the most affected with 104 (50.24%), followed by 62 (29.95%) white, 30 (14.49%) unknown, 10 (4.8%) Black, and 1 (0.48%) indigenous. The year with the highest number of traffic accidents, 18 (8.69%), was 2009. As for the type of traffic accident, pedestrians, 81 (39.13%), were the most affected, followed by accidents in which the child was a motor vehicle occupant, 76 (36.71%), other land transport accidents, 34 (16.4%), motorcyclist injured in a transport accident, 10 (4.8%), cyclist injured in a transport accident, 5 (2.41%), and finally pickup truck occupants, 1 (0.48%). **Considerations:** Deaths of children from traffic accidents sometimes result from structural omissions regarding the conditions of roads, public ways, vehicles, and enforcement, as well as from the unskillfulness, recklessness, and negligence of parents and/or guardians, managing bodies, institutions, and companies related to the sector.

**Keywords:** Traffic accidents, Children, Accident prevention.



## 71. MORTALITY FROM PREVENTABLE CAUSES IN THE POPULATION OF ACRE, BRAZIL, 2000-2023

Isadora Katilyn Batista Gomes<sup>1</sup>, Paula Ramila Carvalho Paulo<sup>1</sup>, Jair Rios Neto<sup>2</sup>, João Batista Francalino da Rocha<sup>1,2</sup>

<sup>1</sup> Hospital Multiprofessional Residency Program with an emphasis on Intensive Care. Federal University of Acre. Rio Branco, AC, Brazil.

<sup>2</sup> Laboratory for Study Design and Scientific Writing of the Health Sciences Center. Federal University of Espírito Santo. Vitória, ES, Brazil.

**Corresponding author:** isadora.gomes@sou.ufac.br

**Introduction:** Preventable deaths are an injury or situation preventable by the action of health services that occur when the health system fails to meet health needs and its determining factors are weak in identification and correct intervention. In Acre, it is necessary to fill gaps in regional scientific knowledge to support the Sustainable Development Goals (SDGs). **Objective:** To analyze the trend of mortality from preventable causes in the population aged 5 to 74 in Acre, Brazil, from 2000 to 2023. **Method:** An ecological time-series study with secondary data from the Mortality Information System (SIM/DATASUS) of the Ministry of Health (MS) of Brazil. The trend pattern of mortality from preventable causes in the 5 to 74 age group was analyzed. The annual percent change (APC) and average annual percent change (AAPC) were calculated. Interpretation: results statistically different from zero ( $p < 0.05$ ), if positive, an increasing trend, if negative, a decreasing trend. APC and AAPC without statistical significance indicated stability. The mortality rate from preventable causes (MRPC) was calculated by the ratio of the number of preventable deaths (PD) to the resident population, multiplied by 100,000 inhabitants. Analyses were performed using Microsoft Excel 2019 and Joinpoint Regression 5.2.0 software. **Result:** A total of 81,137 deaths were recorded, of which 48,483 (59.75%) were preventable by adequate interventions. The annual average of PD was  $2,020 \pm 518$  standard deviation (SD) (95% CI 1,802; 2,239) and a Percent Change (PC) of 72.67%, from 2000 to 2023. The MRPC corresponded to 300.42 deaths per 100,000 inhabitants. In the period, this rate represented 67.98% of the general mortality rate of 441.92 deaths per 100,000 inhabitants and was reduced by 72.67%. The average MRPC was  $297.21 \pm 37.09$  SD (95% CI 281.55; 312.87) deaths per 100,000 inhabitants. The causes were concentrated in: external causes of morbidity and mortality (21.82%), diseases of the circulatory system (18.75%), neoplasms (14.96%), symptoms, signs, and abnormal clinical and laboratory findings (9.90%), some infectious and parasitic diseases (9.07%), and diseases of the respiratory system (8.59%). The AAPC of the MRPC revealed stability (-0.24; 95% CI -0.58; 0.92;  $p = 0.72$ ). And the APC indicated 4 segments: 2000-2008, decreasing trend (-0.97; 95% CI -2.45; -0.29;  $p = 0.0040$ ), 2008-2018, increasing (1.55; 95% CI 0.81; 2.24;  $p < 0.0001$ ), 2018-2021, increasing (9.35; 95% CI 6.36; 11.25;  $p < 0.0001$ ), and 2021-2023, decreasing (-18.10; 95% CI -21.62; -14.49;  $p < 0.0001$ ). **Conclusion:** A high proportion of preventable deaths occurred, with an emphasis on external causes and chronic diseases. The temporal trend shows a worrying stability. A complex temporal pattern with distinct periods reinforces the significant weight of preventable deaths in the population's mortality profile.

**Keywords:** Mortality, Causes of Death, External Causes, Epidemiology.



## 72. MORTALITY FROM EXTERNAL CAUSES IN THE EARLY YEARS OF LIFE AMONG CHILDREN RESIDING IN THE STATE OF ESPÍRITO SANTO

Franciele Foschiera Camboin<sup>1,6</sup>; Yasmin Ribeiro Marcelino<sup>2,6</sup>; Isaura Barros Alves Pinto<sup>3,6</sup>; Nathália Miguel Teixeira Santana<sup>4,6</sup>; Franciéle Marabotti Costa Leite<sup>5,6</sup>

<sup>1</sup> Professor, Nursing Program, State University of Paraná, Cascavel, Paraná, Brazil.

<sup>2</sup> Student, Physical Therapy Program, Federal University of Espírito Santo (UFES), Vitória, Espírito Santo, Brazil.

<sup>3</sup> Student, Postgraduate Program in Collective Health, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil.

<sup>4</sup> Student, Postgraduate Program in Collective Health, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil. <sup>5</sup> Professor, Undergraduate Nursing and Postgraduate Collective Health Programs, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil. <sup>6</sup> Research group on health, violence, and accidents of UFES (LAVISA).

**Corresponding author:** smfran@hotmail.com.br

**Introduction:** The first years of a child's life are the most vulnerable and consequently more prone to involvement in life-threatening situations. In this sense, external causes occupy the fifth position among the causes of infant mortality. Thus, it is noticeable that society still fails in protecting children, pointing to the need to prioritize the prevention of these causes. **Objective:** To present the mortality from external causes affecting children residing in the state of Espírito Santo in their early years of life. **Method:** This is a descriptive, time-series study over a 20-year period, using data from the Mortality Information System (SIM) in Espírito Santo. Data collection was carried out using death records from external causes in children aged 0 to 4 years residing in the state of Espírito Santo from 2003 to 2022. Deaths of children from external causes were included, according to some of the ICD-10 groups such as homicide, transport accidents, other accidents, and other external causes. **Results:** There were 1,122 deaths in the period from 2003 to 2022, with an average of 56.1 deaths per year. The year with the highest number of deaths was 2009, with 70 (6.24%). The year with the lowest record of deaths was 2018 with 32 (2.85%) records. In the state regions, the highest number of deaths occurred in the metropolitan region with 565 (50.4%), and the fewest deaths were in the central region with 154 (14%). Regarding the groups, homicides affected 87 (7.8%) children, transport accidents 202 (18%), other accidents 485 (43.2%), drowning 180 (16%), falls 67 (5.97%), burns 17 (1.51%), events with indeterminate causes 80 (7.1%), and other causes 7 (0.61%). As for sex, the male sex totaled 676 (60.24%) deaths and 446 (39.7%) deaths affected the female sex. **Considerations:** The findings underscore the importance of preventive and educational measures to reduce infant mortality from external causes, addressing everything from traffic safety to the prevention of drowning and other domestic accidents. These data highlight the need for public policies aimed at preventing infant deaths in various environments. Education and awareness, through educational campaigns for parents and caregivers on home safety, drowning prevention, correct use of car safety seats, and constant supervision of children, can significantly reduce accidents.

**Keywords:** Infant mortality, Child, External causes.



### 73. THE APPEAL OF FLAVORS: THE RISE OF E-CIGARETTES AMONG CHILDREN AND ADOLESCENTS

Maria Eduarda Ferreira de Carvalho<sup>1</sup>, Vitória Neves Binda<sup>1</sup>, Gisele dos Santos<sup>2</sup>, Nathalya das Candeias Pastores Cunha<sup>3</sup>, Flaviane Cristina de Oliveira Ferreira Delanos<sup>4</sup>

<sup>1</sup> Medical Student, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória, Espírito Santo, Brazil.

<sup>2</sup> Social Work Student, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória, Espírito Santo, Brazil.

<sup>3</sup> Nurse. Master's Student in Public Policy and Local Development at Emescam. Researcher at the Scientific Writing Laboratory of the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória, Espírito Santo, Brazil.

<sup>4</sup> Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória-ES. Brazil. PhD student in Collective Health – UFES. Coordinator of the Universal Fapes Project. Vitória, Espírito Santo, Brazil.

**Corresponding author:** Maria.ecarvalho@edu.emescam.br

**Introduction:** In recent years, the use of electronic cigarettes by children and adolescents has grown at an alarming rate, raising concerns among health professionals, educators, and parents. One of the factors cited as encouraging this increase is the wide variety of flavors made available by manufacturers, which include attractive options with direct appeal to the young public, such as fruit and candy flavors, for example. These flavors make the use of electronic cigarettes more attractive and help mask the taste of nicotine, potentiating the risk of initiation and dependence among children and adolescents. **Objective:** To describe the association between the increased prevalence of e-cigarette use by children and adolescents and the variety of flavors offered. **Method:** This is an integrative review conducted from a search in the PubMed, CAPES, and VHL databases, using the strategy: (Aromatizantes OR “Flavoring Agents”) AND (“E-Cigarette Vapor” OR “Vapor do Cigarro Eletrônico” OR “Sistemas Eletrônicos de Liberação de Nicotina” OR “Electronic Nicotine Delivery Systems” OR Vaping) AND (Adolescente OR Adolescent) AND (Criança OR Child). Full-text articles published in the last 5 years in English, Portuguese, or Spanish were included. After reading the titles, abstracts, and full texts, review articles and those that did not meet the study's objective were excluded. The remaining articles were selected for the composition of a review. This research is part of the project funded by FAPES Call 28/2022 – UNIVERSAL, “Educational Technology focusing on the risks and harms of using Electronic Cigarettes: Caring for Oneself and Others,” TO No. 878/2023”. **Results:** From the initial analysis of 38 articles, 15 studies were selected to compose this manuscript. These studies showed a high prevalence of the use of flavored tobacco products among children and adolescents who prefer sweet and fruity flavors, while adults opt for tobacco or menthol flavors. Products like JUUL and pods, with sweet flavors, are popular among the youth for their sensory appeal. The use of flavored tobacco is associated with DNA damage, affecting both e-cigarette users and conventional smokers, regardless of nicotine content. **Conclusion/Final Considerations:** The popularity of electronic cigarettes among children and adolescents is driven by attractive flavors, such as sweets and fruits, which encourage early experimentation and increase the risk of nicotine addiction. These flavors promote continued use and raise public health concerns about the initiation of smoking.

**Keywords:** Adolescent, Child, Flavoring Agents, Vaping.



#### 74. THE IMPACT OF ELECTRONIC CIGARETTES ON ADOLESCENT HEALTH AND THE NEED FOR PREVENTIVE POLICIES

Nathalya das Candeias Pastore Cunha<sup>1</sup>, Italla Maria Pinheiro Bezerra<sup>2</sup>, Flaviane Cristina de Oliveira Ferreira Delanos<sup>3</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM.

<sup>2</sup> Coordinator and Professor, Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM.

<sup>3</sup> Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória-ES. Brazil. PhD student in Collective Health – UFES.

**Corresponding author:** nathalya.candeias.pastore@gmail.com

**Introduction:** In recent years, the use of electronic cigarettes, popularly known as "vapes," has grown at an alarming rate among young people and adolescents. The World Health Organization (WHO) highlights the vulnerability of adolescents to nicotine addiction and the adverse impacts of substance use on development. It points out that the tobacco industry uses various flavors that are more pleasant to the youth palate, attracting this audience to this social practice. **Objective:** To describe the impact of e-cigarette use on adolescent health, as well as the lack of regulation that facilitates its consumption. **Method:** This is an integrative review based on a search in PubMed, using the descriptors: Vaping AND Adolescent AND Smoking Prevention. The inclusion criteria were: free full texts, available in Portuguese and English, published in the last 5 years. Articles that, after reading the title and abstract, were not related to the topic or were literature reviews were excluded. This research is part of the project funded by FAPES Call 28/2022 – UNIVERSAL, "Educational Technology focusing on the risks and harms of using Electronic Cigarettes: Caring for Oneself and Others," T.O No. 878/2023. It also includes a Master's scholarship from Call 69/2022 – National Council for Scientific and Technological Development (CNPq). **Results:** The use of electronic cigarettes among adolescents has grown significantly, with 25% of high school students reporting having tried these products in 2023, according to the National Survey of Drug Use in Students. This increase is driven by easy access and marketing that associates vapes with modernity. However, they are linked to health problems, such as nicotine dependence and damage to neurological development, which can impact the learning and behavior of young people. **Conclusion:** The lack of regulation and easy access aggravate the problem, making the implementation of preventive policies urgent. To mitigate these risks, it is urgent to implement policies, such as banning sales to minors under 18, regulating advertising, awareness campaigns, and educational programs in schools about the risks of using vapes. Aligning these interventions with the objectives of SDG 3, which aims to ensure health and well-being, it is possible to protect young people from the risks associated with vapes and promote a healthier and more informed generation.

**Keywords:** Vaping, Adolescent, Smoking Prevention.





## 75. THE ROLE OF PUBLIC HEALTH POLICIES IN THE PREVENTION OF CONGENITAL SYPHILIS

Rosanea Fornaciari Garcia<sup>1</sup>, Alan Patricio da Silva<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Fernando Rocha Oliveira<sup>2</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM.

<sup>2</sup> Professor, Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM.

**Corresponding author:** rosanea.garcia@edu.emescam.br

**Introduction:** Although congenital syphilis is a completely preventable disease, and after decades of awareness and standardized recommendations for testing and treatment, cases continue to occur for various reasons, including inadequate maternal treatment or suboptimal screening due to lack of prenatal care, failure to provide timely treatment despite positive serological results, reinfection after treatment, or, in some cases, failure to treat sexual partners. **Objective:** To analyze the role of public health policies in the prevention of congenital syphilis. **Method:** This is an integrative review study in which searches were conducted in the PubMed, Lilacs, and SciELO databases, using the following DeCS descriptors: ("Congenital syphilis") AND ("Prevention") AND ("Public policies" OR "Health policies"). This research sought to answer the following question: "What is the role of public health policies in the prevention of congenital syphilis?". **Results:** It was perceived, in the 85 studies researched dated from 2006 to 2023, that the worrying statistics of congenital syphilis cases show the continuous and growing nature of a health crisis where urgent public policy interventions are necessary to reduce the risk of transmission. Associated with severe perinatal outcomes, such as premature births, stillbirths, and neonatal death, in addition to blindness, developmental delay, and skeletal deformities—all preventable outcomes with early treatment of maternal infection—it ultimately raises the question of whether it is indeed a preventable disease, and brings to light a multisystem failure of the State in anticipating the resurgence of preventable diseases and in dealing with them efficiently and timely. **Conclusion:** The cornerstone of prevention is identification, treatment, and follow-up during pregnancy, including partners. Physicians caring for newborns need to consider aspects of maternal treatment, risk of reinfection, results of paired maternal and infant syphilis serology, and infant clinical evaluation. A complete risk assessment will guide the effective management and follow-up of infants exposed to syphilis in utero.

**Keywords:** Congenital syphilis, Prevention, Public policies, Health policies.



## 76. THE ROLE OF THE STATE IN GUARANTEEING ACCESS TO HEALTHCARE FOR PATIENTS AFFECTED BY CONGENITAL SYPHILIS

Silvana Borlini Zucolotto<sup>1</sup>, Alan Patrício da Silva<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Fernando Rocha Oliveira<sup>2</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM.

<sup>2</sup> Supervising Professors, Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM.

**Corresponding author:** [silvana.zucolotto@edu.emescam.br](mailto:silvana.zucolotto@edu.emescam.br)

**Introduction:** Congenital syphilis (CS) is a vertically transmitted disease of high magnitude for which simple and low-cost diagnostic and therapeutic resources exist. However, tackling it is still a challenge for Public Health because, despite the progress made in its prevention and treatment and the increase in the proportion of women accessing prenatal care, the transmission of syphilis from mother to child continues to be a consequence of undiagnosed, untreated, or inadequately treated maternal syphilis. **Objective:** To highlight the role of the state in guaranteeing access to healthcare for patients affected by congenital syphilis. **Method:** This is an integrative review study in which searches were conducted in the PubMed, Lilacs, and SciELO databases, using the following DeCS descriptors: (“Syphilis, Congenital”) AND (“Health policy”) AND (“Public Health” OR “State Government”). This research was expected to answer the following question: “What is the role of the State in guaranteeing access to healthcare for patients affected by congenital syphilis?”. **Results:** This review found, in the 89 studies researched, dated from 2007 to 2023, that the timing of prenatal care interventions makes a significant difference in the risk of having an adverse outcome due to syphilis. Women who seek care in the first two trimesters of their pregnancy and receive the appropriate intervention are more likely to have a healthy baby, compared to women screened and treated later. **Conclusion:** Encouraging all pregnant women to seek care in the first two trimesters of their pregnancy should be a priority for global health policies and programs. However, for interventions to be effective within these health programs, the state must be present, strengthening health systems and community engagement programs to enable these women to seek and access prenatal care at the appropriate time in their pregnancy.

**Keywords:** Congenital Syphilis, Public Policy, Public Health.



## 77. THE ROLE OF THE STATE IN PROMOTING PUBLIC POLICIES FOR PEOPLE LIVING WITH HIV/AIDS: PATHWAYS TOWARDS ACHIEVING THE 2030 AGENDA

Sandra Fernandes Maciel Araujo<sup>1</sup>, Alan Patricio da Silva<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Tassiane Cristina Morais<sup>2</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM.

<sup>2</sup> Professor, Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM.

**Corresponding author:** sandra.faraujo@edu.emescam.br

**Introduction:** Since its emergence, the human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) have had a significant impact on the population's life and represent a global problem. Mitigating the HIV epidemic by 2030 is one of the goals for achieving the sustainable development objectives; however, effective actions from the State are still demanded through public policies for this scenario to be achieved. **Objective:** To describe the scientific evidence regarding public policies directed at people living with HIV/AIDS. **Method:** This is an integrative review, following the recommendations of the methodological structure developed in the PRISMA checklist. Searches were conducted in the MEDLINE/PubMed, LILACS, Web of Science, Scopus, Cochrane Library, Embase databases, and the SciELO virtual library. The descriptors HIV and Public Policy were used, in conjunction with the Boolean operator AND. The research question used to construct the search strategies was: How is the role of the State configured in the promotion of public policies for people living with HIV/AIDS? **Results:** A total of 625 studies were found; after applying inclusion and exclusion criteria, 25 were selected, and finally, 06 articles were included in this review, all of which were qualitative, mostly of a descriptive and exploratory nature. The articles were published between 2012 and 2024, with the majority developed in Brazil; the others refer to the African Continent, specifically Ghana. Public policies and the role of the State in tackling HIV/AIDS were explored from the perspective of health, intersectionality of Race and Gender, homophobia, women, and Black women. The results revealed reflections on global progress, sociopolitical changes, discriminatory practices, restoration of social participation, and reformulation in sexual education. These factors are determinant for achieving the global goal of ending AIDS as a public health threat by 2030, established by the Joint United Nations Programme on HIV/AIDS (UNAIDS). **Conclusion:** Despite the recognized worldwide advances in terms of public policies in tackling the infection, there is still a complex and challenging path regarding the strengthening and effectiveness of public policies for people with HIV/AIDS. Therefore, it is fundamental to strengthen intersectoral actions and promote continuous dialogue between governments and communities to mitigate persistent inequalities and advance towards a more egalitarian and sustainable future.

**Keywords:** HIV, Public Policies.



## 78. ALCOHOL USE AMONG HIGH SCHOOL STUDENTS IN THE METROPOLITAN REGION OF GREATER VITÓRIA, ESPÍRITO SANTO

Carlos Augusto Lopes<sup>1</sup>, Getulio Sérgio Souza Pinto<sup>2</sup>, Tiffani Matos Oliveira<sup>3</sup>, Fernanda Garcia Gabira Miguez<sup>3</sup>, Bruna Venturin<sup>4</sup>, Franciéle Marabotti Costa Leite<sup>5</sup>

<sup>1</sup> Laboratory of Studies on Health, Violence, and Accidents (LAVISA)/Undersecretariat of Drug Policies of the State of Espírito Santo (SESD-SEG/ES).

<sup>2</sup> Laboratory of Studies on Health, Violence, and Accidents (LAVISA)/Undersecretariat of Drug Policies of the State of Espírito Santo (SESD-SEG/ES).

<sup>3</sup> Laboratory of Studies on Violence, Health, and Accidents (LAVISA), Postgraduate Program in Collective Health, Federal University of Espírito Santo (UFES).

<sup>4</sup> Laboratory of Studies on Violence, Health, and Accidents (LAVISA), Postgraduate Program in Epidemiology, Federal University of Pelotas (UFPEL).

<sup>5</sup> Laboratory of Studies on Violence, Health, and Accidents (LAVISA), Department of Nursing, Postgraduate Program in Collective Health, Federal University of Espírito Santo (UFES).

**Corresponding author:** francielemarabotti@gmail.com

**Introduction:** Alcohol use in adolescence can lead to short- and long-term health detriments. Considering the early onset of use, it can increase the risk of dependence, as well as favor risk behaviors, which can result in experimentation with other drugs and an increase in the occurrence of accidents and violence. Understanding the pattern of use of this psychoactive substance can contribute to the development of prevention actions aimed at reducing the impacts of alcoholic beverages on the health of this population. **Objective:** To estimate the prevalence of alcohol use among students of the public and private high school network in municipalities of the Metropolitan Region of Greater Vitória (RMGV) and the pattern of use. **Methods:** A cross-sectional study, conducted in 2023, in high schools located in the RMGV. 4,614 adolescents between 14 and 19 years old and 63 schools participated. The sample calculation was performed from simple strata with correction for a complex sample at 95% confidence (95% CI). The use of alcoholic beverages was verified through the adolescent's self-report. Data analysis was performed in the R software, by relative and absolute frequencies and 95% CI. **Results:** The study found a proportion of almost 63% in the consumption of a glass or a dose of alcoholic beverage in their lifetime, and 26.7% of the students reported the occurrence of one or two episodes of drunkenness. Most had not consumed alcoholic beverages in the last thirty days prior to the survey (50.5%), but almost 30% reported consuming one or two glasses in the last month, of which 25% presented dizziness, vomiting, slurred speech, and difficulty remembering something. Among the types of alcoholic beverages surveyed, distilled spirits were the most consumed by adolescents (62.4%), 85% report preferring to consume socially, and 36% consume in the presence of adult relatives. Still, almost 40% can buy the beverage in places like bars, pubs, bakeries, and newsstands. The motivation for consumption comes mainly from the company of friends (57.6%). The current prevalence of beverage consumption by adolescents was 30%. **Conclusion:** A high prevalence of alcohol consumption in lifetime and currently is observed among students of the public and private high school network of the Metropolitan Region of Vitória in Espírito Santo, as well as a high frequency of adolescents who have already been drunk and were able to acquire the alcoholic beverage even though its sale is prohibited.

**Keywords:** Alcohol Consumption, Adolescent, Prevalence, Psychoactive Substances.



## 79. THE USE OF STIMULANT DRUGS AMONG ADOLESCENTS IN GREATER VITÓRIA, ESPÍRITO SANTO

Carlos Augusto Lopes<sup>1</sup>, Tiffani Matos Oliveira<sup>2</sup>, Micael Franco Alves<sup>3</sup>, Franciéle Marabotti Costa Leite<sup>4</sup>

<sup>1</sup>Laboratory of Studies on Violence, Health, and Accidents (LAVISA). Undersecretary of State for Drug Policies. PhD student in Social Sciences at the Postgraduate Program in Social Sciences (UFES), Vitória, Espírito Santo, Brazil.

<sup>2</sup>Laboratory of Studies on Violence, Health, and Accidents (LAVISA). Postgraduate Program in Collective Health.

<sup>3</sup>Laboratory of Studies on Violence, Health, and Accidents (LAVISA). Postgraduate Program in Collective Health. Municipal Health Secretariat of the municipality of Vila Velha, Espírito Santo.

<sup>4</sup>Laboratory of Studies on Violence, Health, and Accidents (LAVISA), Department of Nursing, Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil. Postgraduate Program in Collective Health.

**Corresponding author:** francielemarabotti@gmail.com

**Introduction:** Adolescence is a phase in which new experiences occur and lead this group to confront and experiment with new limits; thus, great transformations are noted in this period. One of the forms of refuge in this phase is the use of drugs; its increasingly early use has contributed to the increase of health problems, since psychoactive drugs act on the brain in various ways. Regarding stimulants, these cause the brain to function in a state of exaggerated alertness. Thus, it becomes relevant to know the pattern of use of these drugs in the population in which one intends to intervene. **Objective:** To know the prevalence of use of stimulant drugs among students of the public and private high school network in municipalities of the Metropolitan Region of Greater Vitória (RMGV/ES). **Methods:** This is a cross-sectional epidemiological study conducted in high schools in the RMGV in 2023. The study included 63 schools, targeting adolescents between 14 and 19 years old, requiring the signature of parents on the Free and Informed Consent Form. The sample was separated into simple strata, corrected by SPSS 26, ensuring 95% confidence. The analysis was performed descriptively using relative and absolute frequencies through the R program. **Results:** The study found a proportion of approximately 5% (95% CI: 4.3-5.6) of adolescents who had ever tried MDMA/ecstasy in their lifetime. The age of experimentation for about 78% (95% CI: 72.0-82.8) was 15 years and older, and 39.2% (95% CI: 33.0-45.7) got it from a friend. Regarding cocaine, 1.2% (95% CI: 1.0-1.6) had tried it at some point in their lives, with half using it for the first time at 15 years and older, and 32.1% getting the drug from a friend. As for crack and heroin, experimentation occurred for 0.1% and 0.3% of adolescents, respectively. The age of first use for these drugs was more prevalent in the 15 years and older group, and the main form of acquisition was through purchase at a store, bar, bakery, or newsstand. **Conclusions:** A significant number of participants in this study have already tried stimulant drugs and have friends and/or commercial spaces as their main sources of acquisition. These findings raise great concern about drug use in this age group and denote the need for interventions that contribute to the health and well-being of this population.

**Keywords:** Substance Abuse, Drugs, Adolescents, Epidemiology.



## 80. LIFETIME DRUG USE AMONG SCHOOLCHILDREN IN THE METROPOLITAN REGION OF VITÓRIA, ESPÍRITO SANTO

Carlos Augusto Lopes<sup>1</sup>, Nathália Miguel Teixeira Santanna<sup>2</sup>, Fernanda Garcia Gabira Miguez<sup>3</sup>, Isaura Barros Alves Pinto<sup>4</sup>, Franciéle Marabotti Costa Leite<sup>5</sup>

<sup>1</sup>Laboratory of Studies on Violence, Health, and Accidents (LAVISA). Undersecretary of State for Drug Policies. PhD student in Social Sciences at the Postgraduate Program in Social Sciences (UFES), Vitória, Espírito Santo, Brazil.

<sup>2</sup>Laboratory of Studies on Violence, Health, and Accidents (LAVISA). Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil. PhD student in Collective Health at the Postgraduate Program in Collective Health/UFES.

<sup>3</sup>Laboratory of Studies on Violence, Health, and Accidents (LAVISA). Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil. Postdoctoral fellow at the Postgraduate Program in Collective Health/UFES.

<sup>4</sup>Laboratory of Studies on Violence, Health, and Accidents (LAVISA). Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil. Master's student at the Postgraduate Program in Collective Health/UFES.

<sup>5</sup>Laboratory of Studies on Violence, Health, and Accidents (LAVISA). Federal University of Espírito Santo, Vitória, Espírito Santo, Brazil. Professor at the Postgraduate Program in Collective Health/UFES.

**Corresponding author:** francielemarabotti@gmail.com

**Introduction:** The consumption of psychoactive substances during adolescence is a serious public health problem, as it corresponds to a phase of life where the adolescent is in the process of growth and development, which can thus compromise health and make them more susceptible to risk behaviors. Therefore, understanding the pattern of drug use can contribute to health actions that reduce the consumption and risks related to these substances. **Objective:** To estimate the prevalence of drug experimentation among high school adolescents, their profile, and the motivations for use. **Method:** A cross-sectional study, conducted in 2023, in high schools located in the RMGV. 4,614 adolescents between 14 and 19 years old and 63 schools participated. The sample calculation was performed from simple strata with correction for a complex sample at 95% confidence (95% CI). The use of drugs (marijuana, crack, cocaine, heroin, LSD, ecstasy, methamphetamine, loló, lança-perfume, glue, ether, and other inhalable products) was assessed through the participant's self-report. Data analysis was presented by relative and absolute frequencies and 95% CI. Bivariate analysis by Pearson's Chi-square was performed in Stata 17.0. **Results:** About 22% of adolescents have tried some type of drug in their lifetime, excluding alcohol and tobacco. Of these, experimentation was higher in the group of girls (23.5%), non-cisgender adolescents (29%), non-heterosexuals (33.6%), mixed-race (pardos) (40%), those who are not single (29.6%), belonging to economic class D/E (26.1%), and those who work (29%). Most adolescents report using drugs to reduce stress (43%) and relax (35.5%). **Conclusions:** There is a high prevalence of lifetime drug use experimentation among public and private high school students in the Metropolitan Region of Vitória, Espírito Santo, with a higher distribution of use in certain groups.

**Keywords:** Illicit Drugs, Adolescent, Prevalence, Psychoactive Substances.



### 81. SDG 3 AND PUBLIC HEALTH POLICIES IN BRAZIL: ADVANCES, WEAKNESSES, AND CHALLENGES FOR UNIVERSAL HEALTH

Ruth Emilly Silva Torres<sup>1</sup>, Ana Karolina Leandro Moreira<sup>1</sup>, Maria Carolina Moraes Pereira Queirós<sup>1</sup>,  
Victoria Lavigne Chagas de Oliveira<sup>1</sup>, Emery Ciana Figueiredo Vidal<sup>1</sup>, Olívia de Almeida Duarte<sup>1</sup>

<sup>1</sup> Regional University of Cariri - URCA, Crato, Ceará, Brazil

**Corresponding author:** ruthemilly.torres@urca.br

**Introduction:** Sustainable Development Goal 3 (SDG 3) seeks health and well-being for all by 2030, focusing on reducing mortality, preventing diseases, and promoting universal health services. In Brazil, the Unified Health System (SUS) is essential for these objectives. Despite advances, challenges such as limited resources, inequalities, and inadequate infrastructure still hinder the full realization of SDG 3, especially in remote areas and among vulnerable groups. **Objective:** To scrutinize the application of SDG 3 in Brazil, focusing on the main public policies directed at health, highlighting their weaknesses and advancements in promoting universal and environmental health. **Method:** A descriptive study was carried out through analysis based on data, including WHO reports, official documents from the Ministry of Health, and public policies implemented in Brazil. The effects of these data were analyzed in correlation with SDG 3, highlighting shortcomings and positive results of these applications. **Results:** The data indicate that the SUS has made advances in primary health, with 79.6% coverage by the Family Health Strategy as of March 2024, which includes programs such as the National Immunization Program (PNI) and the Program for Attention to People with Chronic Diseases. However, rural and peripheral areas still face greater challenges, such as a lack of professionals, inadequate infrastructure, and limited resources. **Final Considerations:** It is concluded that Brazil has public policies aligned with SDG 3 but faces challenges in ensuring universal health. Thus, expanding funding and optimizing resources are essential to overcome weaknesses and achieve health and well-being goals.

**Keywords:** SDG 3, Health, Public policies, Brazil, Data.



## 82. THE ROLE OF THE STATE IN THE ASSISTANCE AND PREVENTION OF SNAKEBITE ENVENOMING: AN INTEGRATIVE REVIEW

Débora Pereira Galvêas Negri<sup>1</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Alan Patrício da Silva<sup>2</sup>, Fernando Rocha Oliveira<sup>2</sup>

<sup>1</sup> Master's Student, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

<sup>2</sup> Professor, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

**Corresponding author:** debora.negri@edu.emescam.br

**Introduction:** Snakebites represent a significant public health problem, especially in tropical and subtropical regions, where there is a high incidence of cases and difficulties in accessing treatment. The role of the State in guaranteeing assistance and in formulating public policies for the management and prevention of snake envenoming is essential, considering the logistical, infrastructural, and access-to-antivenom challenges. **Objective:** To analyze the role of the State in healthcare assistance to users who have suffered a snakebite. **Method:** This is an integrative review study in which searches were conducted in the PubMed, Lilacs, and SciELO databases in the month of October 2024. This research was expected to answer the following question: “How is the role of the State in healthcare assistance to patients who have suffered a snakebite configured?”. For this, descriptors according to DeCS were used: “Snake bite” AND “Public Policy”. **Results:** 45 studies were identified, and 12 were selected, with the exclusion of 33 studies due to not corresponding to the object of study of this integrative review. The chosen publications address different aspects related to the assistance and prevention of snake envenoming, such as the global prioritization of this public health issue, the role of regional initiatives, and the perspectives of health professionals and the community. In Sub-Saharan Africa, challenges include the scarcity of antivenoms and the difficulty of transport and storage in rural areas. In Southeast Asia and the Amazon, collaboration and research initiatives that seek to face the barriers to treatment access stand out. In addition, studies emphasize the importance of public awareness through social media, especially in crisis contexts, as seen in Sudan. **Conclusion:** The scientific literature highlights the importance of a coordinated response from the State to face the problem of snakebites. Strategies that include improving health infrastructure, ensuring the supply of antivenoms, and encouraging awareness campaigns can significantly reduce mortality and associated complications. It is fundamental that public policies be reinforced and adapted to local needs, with international and regional support to overcome limitations and improve care for victims.

**Keywords:** Snakebite, Public Policies, Public Health, Antivenom, Healthcare Assistance.





### 83. THE ROLE OF THE STATE IN PROMOTING RIGHTS OF ACCESS TO HEALTHCARE DURING ADOLESCENT PREGNANCY

Josiane Aparecida de Abreu Silveira<sup>1</sup>, Alan Patrício da Silva<sup>2</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Tassiane Cristina Morais<sup>2</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM.

<sup>2</sup> Professor, Master's Program in Public Policy and Local Development - EMESCAM, Vitória, Espírito Santo, Brazil.

**Corresponding author:** josiane.silveira@edu.emescam.br

**Introduction:** Adolescent pregnancy is a global social and public health problem that affects both developed and developing countries, where still-high rates are associated with early onset of sexual activity, low socioeconomic status, economic insecurity, ineffective use of contraceptives, low educational and professional aspirations, and poor family relationships. In this sense, the role of the State should emerge as a sponsor of more forceful intervention strategies focused on the educational level, identified as a critical factor for containing adolescent pregnancy. Although there are policies on adolescent sexual and reproductive health worldwide, only a few actions with this target audience, mainly based on contraceptives and health professional education, are not being sufficient. **Objective:** To identify the role of the State in promoting rights of access to healthcare during adolescent pregnancy. **Method:** This is an integrative review study in which searches were conducted in the PubMed, Lilacs, and SciELO databases, using the following DeCS descriptors: ("Teenage Pregnancy" OR "Pregnancy in Adolescence") AND ("Public Power" OR "State Government" AND ("Human Rights" OR "Right to Health")). This research was expected to answer the following question: "How is the role of the State in promoting rights of access to healthcare during adolescent pregnancy configured?". **Results:** 342 studies were identified, and 26 were selected. The chosen publications address possible studies researched, dated from 2013 to 2023, which, considering the multifactorial factors associated with adolescent pregnancy such as individual, community, social, school, family, and peer factors, in addition to sexual practices in this period occurring increasingly earlier, it is urgent that effective interventions to address the issue of adolescent pregnancy be developed by health and sexual and reproductive education policies, based mainly on contraceptive methods and awareness of the effects of pregnancy in this period. **Conclusion:** It is necessary for public policymakers and health professionals to develop and implement interventions that increase access to adequate sexual and reproductive education for adolescents, using innovative approaches to prevent adolescent pregnancy and innovative multisectoral actions that address structural issues such as education, poverty, and lack of economic opportunities to improve their sexual and reproductive health outcomes.

**Keywords:** Adolescence, Pregnancy, State, Intervention.



#### 84. ORGANIZATION OF ACCESS TO HOSPITAL BEDS IN THE SOUTHERN REGION OF THE STATE OF ESPÍRITO SANTO

Alice Alves de Oliveira<sup>1</sup>, Cíntia Lugão Dan<sup>1</sup>, Flávia do Nascimento Silva<sup>1</sup>, Sabrina Lamas Costa<sup>1</sup>, Fernando Rocha de Oliveira<sup>1</sup>, César Albenes de Mendonça Cruz<sup>1</sup>

<sup>1</sup> Postgraduate Program in Public Policy and Local Development/Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM/Vitória/Espírito Santo/Brazil.

**Corresponding author:** [sabrina.costa@edu.emescam.br](mailto:sabrina.costa@edu.emescam.br)

**Introduction:** Hospital care is directly interconnected with the Unified Health System (SUS) and is organized based on the population's needs, in order to guarantee care for users, with the support of a multiprofessional team that acts in care and access regulation, in the quality of care provided, and in patient safety. Integrated with the other points of care in the Health Care Network (RAS) and with other intersectoral policies, this Assistance aims to ensure the resolution of care and continuity of care, ensuring equity and transparency, always in agreement with the SUS Collegiate Bodies. The National Hospital Care Policy resulted from the need to reorganize and qualify hospital care within the SUS. **Objective:** To analyze the organization of the management of access to hospital beds in the Southern Region of the State of Espírito Santo. **Method:** This is a qualitative and exploratory documentary analysis and a public policy analysis. The theoretical conception of the Public Policy Cycle was adopted, specifically the policy formulation phase as a reference for analysis. **Results:** It was observed that the state of ES has 149 active health establishments, corresponding to a total of 10,810 beds, with 7,053 (65%) beds for the SUS. The Southern Region of the state has 2,438 hospital beds, with 60.42% available for the SUS. It is noted that the highest concentration is in the municipality of Cachoeiro de Itapemirim. However, in case of a lack of a bed or specialist, the patient is referred to another region. The Southern region is composed of 26 municipalities, totaling 682,396 inhabitants, thus, the proportion of beds per inhabitant is 2.7 hospital beds per 1,000 inhabitants. Although there is no official recommendation for bed density per inhabitant, the World Health Organization (WHO) guides an average of 3.2 hospital beds per 1,000 inhabitants, with an average of 2.8 hospital beds per 1,000 inhabitants in the state of Espírito Santo. **Final Considerations:** From the survey presented, the importance of developing public policies in the health area that prioritize overcoming obstacles that still persist is highlighted, given the insufficiency of beds in some locations, reinforcing the need to guarantee access in an equal and equitable manner to the entire population. The importance of the National Hospital Care Policy as an instrument that aids in care and access regulation, in the quality of care provided, and in patient safety in a just and egalitarian way is emphasized.

**Keywords:** Public Health Policies; Bed Occupancy, Healthcare Assistance.



## 85. ROLE OF THE STATE IN GUARANTEEING HUMAN RIGHTS IN MENTAL HEALTH CARE

Mônica Rocha Teixeira Narcizo<sup>1</sup>, Alan Patrício Da Silva<sup>2</sup>, Fabiana Rosa Neves Smirdele<sup>2</sup>, Luciana Carrupt Machado Sogame<sup>2</sup>

<sup>1</sup> Student, Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória. <sup>2</sup> Professor, Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória.

**Corresponding author:** Monica.narcizo@edu.emescam.br

**Introduction:** The right to health, being a social right, is one of the most difficult to achieve, especially when we consider civil and political rights, which demand effective actions from the State through truly effective policies and programs, related not only to health in general but also to mental health as a human right. **Objective:** To analyze scientific data that identifies the role of the State in guaranteeing human rights in Mental Health care. **Method:** This is an integrative review, following the recommendations of the methodological structure developed in the PRISMA checklist. Searches were conducted in the following databases: MEDLINE/PubMed, LILACS, Web of Science, Scopus, Cochrane Library, Embase, and the SciELO virtual library. The following DeCS descriptors were used: Mental Health Assistance/Mental Health, Public Power/State Government, and Public Policy and Human Rights in conjunction with the Boolean operators AND and OR, for the construction of search strategies. The research question was: What is the Role of the State in guaranteeing human rights in Mental Health care? Initially, the identified studies were evaluated by analyzing the titles, discarding duplicate research in the databases, as well as those that had no implication for the research objective. **Results:** Of 1,833 studies initially identified, 10 were included in the review, being both qualitative and quantitative. To characterize the articles included in the review, the following information was extracted: title; author/year, place of study, type of study, sample, and objectives. The analyzed publications were published from 2009 to 2022. They include studies developed in the United States of America, Mexico, Africa, Canada, and Brazil. The results describe the challenges of a policy that, as it cares, segregates, isolates, and controls. Furthermore, they demonstrate that, although a minimum level of public policy already exists, there are not sufficient infrastructural conditions, nor social, environmental, biological, and psychological factors to consider mental health as a human right, questioning the role of the State in relation to mental health policies. **Conclusion:** The protection of the constitutional right to health also covers mental health care. The State is responsible for providing adequate health care conditions for the entire population, proposing strategies for the development of a mental health policy based on its principles such as deinstitutionalization, care in freedom, and respect, with the State being responsible for the effectiveness of this action.

**Keywords:** Mental Health, Public Policies, State, Human Rights. **Financial support:** FAPES Call - PROCAP 2023 13/2023



## 86. ENVIRONMENTAL PERCEPTION OF THE ELDERLY: MOBILITY IN URBAN SPACE

Carolina Perciliana Ribeiro<sup>1</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>, Alan Patrício da Silva<sup>2</sup>

<sup>1</sup> Master's Student, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil. <sup>2</sup> Professor, Master's Program in Public Policy and Local Development - Emescam, Vitória, Espírito Santo, Brazil.

**Corresponding author:** carolina.ribeiro@edu.emescam.br

**Introduction:** With population growth and various technologies, cities in a global context automatically undergo transformations, reshaping both their morphology and the structure of social thought. Although there are various social guidelines and norms, the elderly still face mobility difficulties in cities due to a lack of infrastructure. **Objective:** Due to the estimated growth of large cities, it is necessary to identify the main mobility difficulties to which the elderly are exposed in their daily lives. **Method:** This is an integrative review study in which a bibliographic survey was conducted for the foundation of the observational perspective, as well as documentary analyses and data from the PubMed, Lilacs, SciELO platforms, using the following Boolean operators "AND and OR", with the adopted strategy: "Urban Mobility" OR "Urban Accessibility" AND "Aged OR Elderly". This research was expected to answer the following question: "What are the mobility difficulties that the elderly face in their daily lives in the urban environment?", according to COTRAN. Of 568 studies found, 4 were included because they had title criteria related to the theme of the review, one being an exploratory descriptive approach and two observational studies. The analyzed publications were published from 2019 to 2023, conducted in Brazil. **Results:** Through the exploration of space, the individual builds a perception of self-efficacy. During the review, the consistency of data regarding the lack of mobility of the elderly in public transport is observed due to the lack of accessibility, harming not only the elderly but also other individuals with special needs. **Conclusion:** Through the research, it was possible to detect: a) inaccessible sidewalks, b) obstructions in the walkway, c) inaccessible public transport, d) lack of adequate public space for leisure activities. It is the role of the State, as well as the Municipalities, to promote means for the elderly to feel free from any barriers, whether physical or not; therefore, the development of inclusive policies is necessary to safeguard the autonomy of the elderly.

**Keywords:** Elderly Person, Infrastructure, Mobility, Urban Space.



**87. ANTHROPOMETRIC AND SOCIODEMOGRAPHIC PROFILE OF CHILDREN AND ADOLESCENTS PARTICIPATING IN THE SCOLIOSIS SCREENING ACTION PROMOTED BY THE BRAZILIAN SCOLIOSIS SOCIETY**

Cinara Thamires da Costa Silva<sup>1</sup>, Áurea Barcelos Sperandio<sup>1</sup>, Beatriz Gazzoni Caetano<sup>1</sup>, Thaynara Stelzer<sup>2</sup>, Aébe Alves Torres<sup>3</sup>, Priscila Rossi de Batista<sup>3</sup>

<sup>1</sup> Students, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, ES, Brazil. <sup>2</sup> Physical Therapist graduated from the Federal University of Espírito Santo – UFES, President of the Brazilian Scoliosis Society. Vitória, ES, Brazil. <sup>3</sup> Professors, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, ES, Brazil.

**Corresponding author:** cinara.silva@edu.emescam.br

**Introduction:** Scoliosis is a progressive deformity of the spine, whose clinical repercussions include postural changes, musculoskeletal dysfunctions, reduced respiratory capacity, and psychological impacts, affecting quality of life. Therefore, early diagnosis is fundamental for the best management of scoliosis, as it allows for optimizing the results of surgical and conservative treatment, offering a more favorable prognosis for the patient and the guarantee of a better quality of life, in addition to reducing the chances of needing surgical intervention and its respective risks. **Objective:** To describe the anthropometric and sociodemographic profile, as well as the prevalence of scoliosis, of children and adolescents participating in the screening promoted by the Brazilian Scoliosis Society, at the Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). **Method:** This is a cross-sectional, observational, descriptive study with a quantitative approach, conducted in October 2024, at EMESCAM. Individuals of both sexes up to 16 years of age participated in the study. To characterize the epidemiological profile of the sample, a questionnaire was applied, followed by a physical evaluation conducted by a physical therapist to check for signs of scoliosis through the Adams Test, a scoliometer, and analysis of postural asymmetries. The data were analyzed using the SPSS statistical software. This study is in accordance with the guidelines and regulatory norms for research involving human beings of Resolution 466/12 of the National Health Council/Ministry of Health. **Results:** The sample consisted of 16 participants between 6 and 16 years old, equally distributed between the sexes, with a median age of 12.5 years (Q1=10; Q3=14.7), median height of 1.50 m, and weight of 46.8 kg. The majority were white (62.5%), residing in Vitória (56.3%), with a family income of three minimum wages or more (75% of the sample). In addition, more than half had completed elementary school (81.3%), while their mothers had completed higher education (56.3%) and their fathers, high school (35.7%). 31.3% had a family history of scoliosis. Of the total sample, 87.5% showed no clinical signs of scoliosis. **Conclusion/Final Considerations:** It is concluded that, among the screening participants, the prevalence of clinical signs of scoliosis was low (12.5%), even with a family history of 31.3%. The sample, composed mainly of residents of Vitória and of the white race, reflected a sociodemographic profile of a higher level of education among parents and an income above three minimum wages, factors that may influence access to information and preventive follow-up.

**Keywords:** Adolescent, Early Diagnosis, Scoliosis, Screening.



## 88. ANTHROPOMETRIC PROFILES OF MILITARY FIREFIGHTERS FROM ESPÍRITO SANTO IN THE SERGEANTS' IMPROVEMENT COURSE (CAS)

Geanderson Sampaio de Oliveira, Karolina Machado Ferreira, Florisvaldo Ribeiro, Camila Vilarinho Vidigal, Matheus Florindo de Deus, Livia Avelino de Lima, Roberta Luksevicius Rica, Danilo Sales Bocalini

**Corresponding author:** geanderson.sampaio@gmail.com

**Introduction:** The anthropometric profile is an essential tool for assessing the health of military firefighters, professionals subjected to high physical and psychological demands. The occupational routine, combined with aging, can lead to changes in body composition, affecting functional capacity and increasing metabolic and cardiovascular risks. Thus, understanding the physical state of these professionals is fundamental to developing interventions that promote health and performance over time.

**Objective:** To evaluate the anthropometric profile of military firefighters who are students in the sergeants' improvement course. **Methodology:** 29 active military firefighters with 22 years in the corporation were evaluated. The collected data included body circumferences (arm, waist, abdomen, and hip), skinfolds, body mass, height, BMI, fat percentage, and muscle mass. The waist-hip ratio was calculated as a marker of cardiovascular risk. The obtained values were analyzed based on standardized anthropometric criteria. **Results:** The average age of the firefighters was  $48.17 \pm 3.0$  years. Overweight was present in 50% of the participants and obesity in 20%. The waist-hip ratio (WHR) was elevated in 30% of the individuals, and about 55.17% of the evaluated firefighters had a waist-to-height ratio (WHtR) greater than 0.50, with both parameters being associated with a higher cardiovascular and metabolic risk. The average waist circumference was 91 cm, with some firefighters exceeding the safe limit for cardiovascular risks. Together, these data reinforce the need for targeted interventions to reduce abdominal fat in these individuals. The fat percentage ranged from 8.75% to 29.7%, with an average of  $21.1 \pm 4.9\%$ , with only 40% being within the ideal range. In contrast, 60% had muscle mass classified as "Good" or "Excellent," reflecting possible functional preservation, despite the accumulation of fat. **Conclusion:** Although the military firefighters maintain good muscle mass, the overweight, obesity, and high WHR indexes highlight the need for preventive strategies. Personalized nutritional interventions and regular physical activity programs are recommended to adjust body composition and reduce metabolic and cardiovascular risks. The promotion of public policies and continuous monitoring is essential to ensure long-term health and functional performance, promoting the safety and efficiency of these professionals in the face of the extreme demands of the profession.

**Keywords:** Health; Anthropometry, Worker's Health.



### 89. PROFILE OF ELDERLY PEOPLE IN THE METROPOLITAN HEALTH REGION OF ESPÍRITO SANTO WHO WERE VICTIMS OF FALLS AND TREATED BY SAMU 192 IN 2020 AND 2021

Jordana Barcelos Pinto<sup>1,4</sup>, Isadora de Oliveira Liparizi<sup>1,4</sup>, Maria Eduarda Polido Lemos<sup>1,4</sup>, Vitoria Lumy Nagao<sup>1,4</sup>, Erika Soares da Silva Andreatti<sup>2,4</sup>, Caio Duarte Neto<sup>3,4</sup>, Luciana Carrupt Machado Sogame<sup>3,4</sup>

<sup>1</sup> Medical Student, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM, Vitória, Espírito Santo, Brazil. <sup>2</sup> Student, Postgraduate Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM, Vitória, Espírito Santo, Brazil. <sup>3</sup> Professor, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM, Vitória, Espírito Santo, Brazil. <sup>4</sup> Interdisciplinary Research Nucleus of the Urgency and Emergency Network (NUPI-RUE), Vitória, Espírito Santo, Brazil.

**Corresponding author:** barcelosjordana2@gmail.com

**Introduction:** Falls in the elderly constitute a public health problem, as they occupy the second worldwide position for deaths from unintentional injuries. With the increase in the population's life expectancy, the elderly become even more susceptible to these accidents. Thus, there is an urgent need to articulate and systematize emergency care through a quality Pre-Hospital Mobile Care. **Objective:** To identify the profile of elderly fall victims assisted by SAMU 192/ES. **Method:** This is a cross-sectional research with retrospective data collection from the SAMU 192/ES regulation center for the years 2020 and 2021. Information was collected from 5,443 occurrence reports of primary care provided by SAMU 192/ES to elderly people ( $\geq 60$  years) due to falls. Data were recorded regarding the victims' profile (sex and life cycle); municipality of occurrence; attendance characteristics (period of the week, time of request, origin of the call, presumed severity by the regulating physician, type of resource sent, transport to a health service, referral location) and type of fall (from one's own height,  $<$  or  $>$  6 meters). A descriptive analysis with absolute and relative frequency was performed. **Results:** Regarding demographic characteristics, the majority of victims were female (53.9%) and aged between 60 and 79 years (61.3%). Of the 22 municipalities assisted by SAMU 192 in the metropolitan health region, the highest frequency of occurrence was in: Vila Velha (23.5%), Vitória (18.5%), Cariacica (18.5%), and Serra (17.5%). Regarding the characteristics of the attendance, it was evidenced that the majority occurred from Monday to Friday (71%), in the afternoon period (39.4%), with calls originating from home (82.4%), presumed severity yellow, i.e., moderate risk (77.5%), basic support unit (USB) resource (89%), transfer (81.5%), hospital referral (70.1%), and fall from one's own height (79%). **Conclusion:** It is concluded that the highest prevalence of falls in the elderly assisted by SAMU 192/ES occurred in women between 60 and 79 years old in the metropolitan region of Vitória, where the majority of the state's population is concentrated, on weekdays, in the afternoon, in their residences, with an intermediate clinical state, and required removal to the tertiary sector by means of the USB, due to falls from their own height. Thus, such findings may serve as a basis for future health policies, assisting in the prevention of falls in the elderly and facilitating emergency procedures in the rescue of victims.

**Keywords:** Health Profile, Elderly, Accidental Falls, Emergency Medical Services.

**Funding:** Espírito Santo Research Support Foundation - FAPES call No. 05/24 - PIBICES 2024.



## 90. EPIDEMIOLOGICAL PROFILE OF CONGENITAL SYPHILIS IN BRAZIL AND IN CASTELO

Rosanea Fornaciari Garcia<sup>1</sup>; Fernando Rocha Oliveira<sup>2</sup>

<sup>1</sup> Master's Student in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. <sup>2</sup> Professor, Master's Program in Public Policy and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM.

**Corresponding author:** rosanea.garcia@edu.emescam.br

**Introduction:** Syphilis is a chronic infectious disease, which is transmitted through sexual contact and vertical transmission. Vertical transmission from an infected, untreated, or inadequately treated pregnant woman passes to her conceptus via the transplacental route, resulting in congenital syphilis. **Objective:** The objective of this article is to compare the epidemiological profile of congenital syphilis in Brazil and in Castelo. **Method:** A descriptive, epidemiological study, conducted by surveying secondary data collected through the Indicators and Basic Data of Syphilis in Brazilian Municipalities. The data were analyzed according to the variables of congenital syphilis: age group, mother's education level, prenatal follow-up, race or color, in the period from 2020 to 2023. **Results and Discussion:** Regarding Syphilis, the results indicate that the Southeast Region presented the highest rates of Syphilis cases in the four years researched. Regarding the level of education, both at the Brazilian level and in the Municipality of Castelo, the highest cases of congenital syphilis were with mothers of lower education, and the lowest cases presented were pregnant women with complete higher education. With respect to the age group, the highest number of cases is between 20 and 29 years, while the 10 to 14 years group had the lowest rate. It was also noted regarding race/color that mixed-race (pardas) and Black women have more cases, both in Brazil and in the Municipality of Castelo, but the lowest rate in Brazil is among indigenous women, as the Municipality of Castelo did not present any. Both in Brazil and in the Municipality of Castelo, in the majority of cases researched, the pregnant women undergo prenatal care. It is worth noting that even with prevention and control actions, there are still pregnant women who are unassisted and vulnerable to the disease. **Conclusion:** The study found a high rate of congenital syphilis in recent years; this reflects that it is necessary to intensify actions for the detection and treatment of the disease.

**Keywords:** Congenital Syphilis; Epidemiology; Vertical Transmission.





## 91. SOCIODEMOGRAPHIC PROFILE OF ADOLESCENT PATIENTS UNDERGOING SCOLIOSIS CORRECTION SURGERY

Áurea Barcelos Sperandio<sup>1</sup>, Cinara Thamires da Costa Silva<sup>1</sup>, Igor Machado Cardoso<sup>2</sup>, Igor de Barcellos Zanon<sup>3</sup>, Priscila Rossi de Batista<sup>4</sup>, Charbel Jacob Junior<sup>4</sup>

<sup>1</sup> Students, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, ES, Brazil. <sup>2</sup> Head of the Spine Surgery Service at the Medical Hospital Center of Vila Velha and Santa Casa de Misericórdia de Vitória, Vitória, ES, Brazil. <sup>3</sup> Assistant Physician of the Spine Surgery Service at the Medical Hospital Center of Vila Velha and Santa Casa de Misericórdia de Vitória, Vitória, ES, Brazil. <sup>4</sup> Professors, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM, Vitória, ES, Brazil.

**Corresponding author:** aurea.sperandio@edu.emescam.br

**Introduction:** Scoliosis is characterized by a lateral curvature of the spine with associated rotation, in which the Cobb angle is equal to or greater than 10°. The progression of the curvature during periods of rapid growth can result in significant deformity and lead to complications, making surgical intervention necessary for scoliosis correction and improvement of quality of life. Adolescent Idiopathic Scoliosis, which begins after 10 years of age, is the most common. **Objective:** To identify the sociodemographic profile of patients undergoing arthrodesis surgery for scoliosis correction. **Method:** This is a retrospective, observational, descriptive, and quantitative study, developed by recruiting data through telephone calls from 82 patients who underwent scoliosis surgery between 2017 and 2024 at the Hospital Santa Casa de Misericórdia de Vitória (HSCMV) and the Hospital Estadual Infantil e Maternidade Alzir Bernardino Alves (HIMABA). The inclusion criteria included patients of both sexes who underwent arthrodesis for the correction of scoliotic curvature, between 10 and 18 years of age. Participants with a previous history of spinal surgery were excluded. Sociodemographic information was gathered through a Data Collection Form developed by the researchers. The data were analyzed using SPSS statistical software and expressed in frequency and percentage and measures of central tendency. The study was approved by the Research Ethics Committee (opinion no. 6.923.793). **Results:** The sample consisted of 82 patients with a median age of 14 years (Q1 = 13; Q3 = 16), of whom 75% were female, 62.5% identified as white, and 55.31% resided in the Greater Vitória region with a median family income of 3 minimum wages (Q1= 2; Q3=5). Regarding education, 37.5% of the patients were in high school and 20.3% in elementary school. Among the guardians, 50% had completed higher education, while 39.6% had completed high school. **Conclusion/Final Considerations:** It was possible to observe that the patients belong to a predominant profile of girls undergoing the growth spurt phase. The education of the patients is concentrated in high school, while among the guardians, a high educational level is observed, in addition to a more favorable family income, suggesting a socioeconomic context that may positively influence access to specialized treatment. Identifying the sociodemographic profile allows for a better understanding of the specific needs of individuals, in addition to assisting in the planning of public health policies and prevention and screening programs.

**Keywords:** Scoliosis, Adolescent Health, Arthrodesis, Orthopedics.



## 92. PUBLIC POLICY ON DRUGS IN THE STATE OF ESPÍRITO SANTO: A REPORT ON THE “REDE ABRAÇO PROGRAM”

Carlos Augusto Lopes<sup>1</sup>, Nathalia Borba Raposo Pereira<sup>2</sup>, Aline Borel Monteiro de Castro<sup>3</sup>, Getúlio Sergio Souza Pinto<sup>4</sup>, Carla Jordão Silva<sup>5</sup>

<sup>1</sup> PhD student in the Postgraduate Program in Social Sciences at the Federal University of Espírito Santo – UFES, Vitória, Espírito Santo, Brazil. <sup>2</sup> Master's student in the Postgraduate Program in Psychology at the Federal University of Espírito Santo – UFES, Vitória, Espírito Santo, Brazil. <sup>3</sup> Master's student in the Postgraduate Program in Education in Sciences and Mathematics at the Federal Institute of Espírito Santo – IFES, Vitória, Espírito Santo, Brazil. <sup>4</sup> Undersecretariat of State for Drug Policies/Secretariat of the Government of the State of Espírito Santo. <sup>5</sup> Master's student in the Postgraduate Program in Social Sciences at the Federal University of Espírito Santo – UFES, Vitória, Espírito Santo, Brazil.

**Corresponding author:** carlos.lopes@seg.es.gov.br

**Introduction:** With the mission of articulating and operationalizing the drug policy in Espírito Santo, the State Program of Integrated Actions on Drugs – Rede Abraço acts to offer education, reception, care, and social reintegration to people with problems arising from drug use and their families. Its planning considers emerging social demands and needs, recommendations from organizations in the area, and evidence from empirical studies, adopting the critical perspective of the failure of approaches centered on prohibition and punitiveness. It also aligns with the goals of strengthening the prevention and treatment of substance abuse, from the United Nations' 2030 Agenda for Sustainable Development. **Objective:** To briefly present the work developed in Espírito Santo by the Rede Abraço Program and some of its results. **Method:** The Program is organized into four axes - prevention; care and treatment; social reintegration; and studies, research, and evaluations - which have specific guidelines, objectives, and actions, but intersect in the achievement of the policy. The actions are systematically planned and monitored by a Management Committee, and social control is exercised by the State Council on Drug Policies, with parity composition between government and civil society. **Results:** Between 2019 and 2024, more than 13,000 people were served by the Program, including substance users and family members. The Program developed actions with the Secretariat of Education to prevent drug use in schools; supported 147 projects in the territories, with actions of prevention, education, care, and social reintegration; made referrals for insertion into the world of work, professional qualification, and increased schooling; conducted training; fostered the implementation of drug councils in the municipalities; fostered three research projects in the field of drug policy carried out by educational institutions in the state; and implemented the Capixaba Observatory of Information on Drugs – OCID, a portal that brings together indicators and information on the state's drug policy. **Final Considerations:** The entire scope of the Rede Abraço Program is available for open access on the OCID. A panel of indicators with information on the services provided is also made available, with systematic updates, and an annual report of actions. Despite the challenges present in the field of drug policy, in Brazil and worldwide, the Rede Abraço Program has been seeking to develop actions integrated with other sectoral policies, always based on human rights and the principles of autonomy, reception, and dignity.

**Keywords:** public policy; drug policy; substance use.



### 93. PUBLIC POLICIES AND THE JUDICIALIZATION OF HEALTH IN BRAZIL: IMPACTS AND CHALLENGES FOR STATE-LEVEL MANAGEMENT

Cristiano Luiz Ribeiro de Araújo<sup>1</sup>, Ricardo de Lima Soares<sup>2</sup>

<sup>1</sup> Social Worker, State Health Secretariat of Espírito Santo. Master in Social Policies from UFES. Espírito Santo, Brazil. <sup>2</sup> Judicial Social Worker, Court of Justice of the State of São Paulo. PhD student in Social Work at PUC-SP. São Paulo, Brazil.

**Corresponding author:** cristianolra@outlook.com

**Introduction:** Brazilian public health policies aim to guarantee universal and equal access to health services, as established by the 1988 Constitution and the Unified Health System (SUS). However, judicialization has become a frequent route for access to treatments, medications, and procedures at the state level, challenging resource management. Although essential in certain cases to ensure individual rights, this practice can negatively affect the distribution of resources and the effectiveness of public health policies, harming collective access. **Objective:** To analyze the effects of judicialization on the management of health resources at the state level, evaluating how judicial intervention impacts the execution of public health policies and the balance between individual and collective rights. The research aims to understand the limitations imposed on public management and identify strategies to reduce the negative impact of judicialization on equitable access to health services. **Method:** The research is qualitative, guided by historical-dialectical materialism, and uses a bibliographic and documentary approach. The analysis includes books, academic articles, and official documents. **Results:** The results indicate that the judicialization of health compromises the efficient management of state resources, forcing the redirection of funds and harming the execution of previously planned health programs. In addition, unequal access to the judicial system aggravates regional disparities, creating a scenario of non-equitable access to health services, which compromises the universality and equity promoted by the SUS. **Final Considerations:** Judicialization, although necessary to ensure the individual right to health, can harm budgetary management and the effective implementation of public policies at the state level. It is fundamental to strengthen public health policies with strategies that minimize the need for judicial intervention, ensuring a more equitable and efficient allocation of resources, aligned with the principles of the SUS.

**Keywords:** public policies; judicialization of health; state-level management; SUS; equitable access.



#### 94. PUBLIC POLICIES AND THE ABANDONMENT OF CHILDREN AND ADOLESCENTS DURING THE COHABITATION STAGE IN ADOPTION PROCESSES: AN EXPERIENCE REPORT

Amanda Sales da Silva<sup>1</sup>, Ricardo de Lima Soares<sup>2</sup>

<sup>1</sup> Court of Justice of São Paulo (TJSP), São Paulo, SP, Brazil. <sup>2</sup> Court of Justice of São Paulo (TJSP), São Paulo, SP, Brazil.

**Corresponding author:** amanda.salesds@hotmail.com

**Introduction:** The abandonment of children and adolescents during the cohabitation stage in adoption processes reflects the fragility of public policies in Brazil. This phase, essential for the formation of bonds between adoptees and prospective parents, can result in a new rejection for children already marked by the rupture with their family of origin. The idealization attached to this process, being reinforced by the social imaginary as an "act of love," raises the expectations of the applicants, which do not align with the real adoption process that concerns a protection measure, provided for by law, which aims to guarantee the right to family life for the child and adolescent. **Objective:** This study seeks to report experiences of abandonment during the cohabitation stage, highlighting the relationship between this phenomenon and the insufficiency of public policies for the protection of children and adolescents. It also aims to propose interventions that prevent new rejections and ensure comprehensive support for prospective adopters. **Method:** This is a qualitative study based on the authors' experience report as social workers at the Court of Justice of São Paulo. The historical-dialectical materialist method is adopted, with data collected through documentary analysis, literature review, and empirical observations during the cohabitation stage. The critical analysis considers the historical, social, and institutional factors that influence abandonment. **Results:** The results indicate that the abandonment and returns of children and adolescents in the cohabitation stage are associated with the inadequate preparation of the adopters to deal with the complexities of the adoptees, which are revealed in daily life. The insufficiency of public policies aggravates this situation, resulting in new ruptures of affective bonds. **Conclusion:** The study reveals the urgent need for integrated public policies that promote continuous and intensive support, both for the adoptees and for the prospective parents. Greater investment in interventions that ensure adequate reception is suggested, minimizing the recurrence of abandonment.

**Keywords:** Abandonment, Adoption, Children and adolescents, Public policies, Cohabitation stage.



## 95. PUBLIC POLICIES IN THE ADOPTION OF CHILDREN AND ADOLESCENTS: APPLICANTS' UNDERSTANDING OF THE PROCESS AND ITS IMPACTS

Ricardo de Lima Soares<sup>1</sup>, Adriana Ribeiro Delgado<sup>2</sup>

<sup>1</sup> PhD student in Social Work at PUC-SP, São Paulo, SP, Brazil. <sup>2</sup> Judicial Social Worker at the Court of Justice of the State of São Paulo, SP, São Paulo, Brazil.

**Corresponding author:** ricardoservicosocial@gmail.com

**Introduction:** Public policies related to the adoption of children and adolescents in Brazil play an extremely relevant role in protecting the rights of adoptees. However, the insufficient understanding of the adoption process by prospective applicants is a persistent challenge that can result in returns and situations of violence. This lack of understanding negatively impacts the well-being of children and adolescents, compromising the effectiveness of public policies aimed at adoption. **Objective:** The study seeks to understand how prospective adopters perceive the process and to identify the gaps in understanding that compromise the application of public policies on adoption. It also aims to analyze how this lack of clarity can generate negative consequences for the development of children and adolescents, highlighting the importance of more informative and effective public policies. **Method:** The research adopts a qualitative approach, combining documentary and bibliographic methods, based on historical-dialectical materialism. This methodology allows for a critical analysis of socioeconomic relations and the challenges of public policies in the context of adoption, addressing the limited understanding of applicants and its impacts on adoptees. **Results:** Initial results indicate that existing public policies are not sufficiently effective in ensuring that applicants understand all phases of the adoption process. The lack of preparation and adequate guidance can lead to family conflicts, returns, and even episodes of violence, revealing the need to improve public adoption policies to ensure a safe and stable process. **Conclusion/Final Considerations:** It is concluded that there is an urgent need to strengthen public policies related to adoption, with a focus on the training and preparation of applicants. The promotion of educational and awareness measures can contribute to minimizing risks and ensuring the right of children and adolescents to a stable and safe family environment, guaranteeing the success of the adoption process.

**Keywords:** Public policies; Adoption; Children and adolescents; Return; Violence



## 96. PUBLIC POLICIES TO COMBAT HUNGER IN BRAZIL: AN INTEGRATIVE REVIEW

Júlia Mayse Soares Gonçalves<sup>1</sup>, Geovanna Vermelho da Silva<sup>1</sup>, Lyvia Elena Klawka Cau<sup>1</sup>, Victoria Maria Vimercati Moreira Duarte de Souza<sup>1</sup>, Fabiana Rosa Neves Smiderle<sup>2</sup>.

<sup>1</sup> Nursing student. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória, ES, Brazil.

<sup>2</sup> Professor of the nursing course. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória, ES, Brazil.

**Corresponding author:** juliamayse7@gmail.com.

**Introduction:** In Brazil, in 2022, 70.3 million people faced moderate food insecurity, and 21.1 million were in severe food insecurity, characterized by hunger. SDG 2 aims to "End hunger, achieve food security and improved nutrition and promote sustainable agriculture." This focus makes it essential to promote healthy habits and a quality diet, provided by sustainable agriculture, in order to prevent global malnutrition problems. The goal is part of the 2030 Agenda and is monitored by UN indicators, which assess the progress of nations. To improve these indicators, a multinational effort is necessary, with the support of public policies and programs to eradicate hunger. **Objective:** To describe public policies that assist in combating child hunger as a path to zero hunger (SDG 2). **Method:** This is a bibliographic review carried out by reading articles from the PUBMED database, using the descriptors: Public Policies AND Hunger AND Children. **Results:** The initial search comprised a total of 373 articles. Subsequently, the inclusion criteria were applied: full text in English and publications from the last five years. After this filtering, 124 articles remained. From reading the titles, 20 articles were selected, and after analyzing the respective abstracts, 5 articles were identified to compose the final sample. Public policies aimed at SDG 2 in Brazil play a crucial role in combating hunger and promoting food security. The National School Feeding Program (PNAE) also stands out, offering nutritious meals in schools, in addition to supporting family farming through the direct purchase of food. Complementing these actions, the Food Acquisition Program (PAA) strengthens small farmers by purchasing their products and directing them to public institutions, combating food insecurity. The National Food and Nutritional Security Policy (PNSAN) integrates several actions to ensure that everyone has access to adequate and nutritious food. These policies benefit the population by combating hunger, improving nutrition, and promoting sustainable agricultural practices, which are fundamental to ensuring food security and achieving zero hunger. **Conclusion:** It was observed that these policies are fundamental to completing the agenda by 2030 but are still insufficient for the goals to be achieved. However, for the objectives to be fully reached, it is necessary to continue investing in the expansion and improvement of these policies, ensuring that zero hunger becomes a reality throughout the country.

**Keywords:** Hunger. Children. Public Policies.



## 97. PUBLIC HEALTH POLICIES AND THE ROLE OF NURSING IN MENTAL HEALTH CARE

Lygia Furtado de Almeida<sup>1</sup>, Ricardo de Lima Soares<sup>2</sup>.

<sup>1</sup> Postgraduate in Health Management from UFES, Vitória, ES, Brazil.

<sup>2</sup> PhD candidate in Social Work at PUC-SP, São Paulo, SP, Brazil.

**Corresponding author:** lygiafurtadodealmeida@gmail.com

**Introduction:** Mental health public policies in Brazil have sought to promote comprehensive and humanized care for patients, but still face significant challenges, especially in integrating nursing professionals into the care of individuals with mental disorders. The role of nursing is essential to ensure the welcoming and continuous monitoring of patients; however, these professionals often do not receive the necessary training and institutional support to deal with the complexities of mental health, which can impact the quality of care provided. **Objective:** This study aims to analyze the role of nursing in mental health care within the context of public health policies, focusing on the training and preparation of these professionals to deal with patients who present with mental disorders. The research also aims to identify the challenges faced by nursing in care and propose measures that can strengthen practices and welcoming in the mental health context. **Method:** The research adopts a qualitative approach, based on documentary and bibliographic review, using the historical-dialectical materialism method. This methodology allows for a critical analysis of the socioeconomic challenges that permeate public mental health policies, in addition to examining the preparation and institutional support offered to nursing professionals. **Results:** Preliminary results indicate that public mental health policies are still insufficient in terms of support and training for nursing professionals. The lack of adequate training and institutional resources negatively affects the welcoming and care of patients, demonstrating the need for more structured and inclusive policies. **Conclusion:** It is concluded that there is an urgent need to strengthen public mental health policies, with a specific focus on training and supporting nursing professionals. The implementation of training and awareness programs can contribute to improving care and ensuring a humanized and effective approach to mental health care.

**Keywords:** Public health policies; Nursing; Mental health; Psychosocial care; Professional training.



**98. FOR A FAIR AND EQUITABLE SOCIETY: THE STATE POLICY PLAN FOR WOMEN  
OF ESPÍRITO SANTO AND THE FIGHT FOR FEMALE AUTONOMY AND EQUAL  
RIGHTS**

Luana Marques Ribeiro<sup>1</sup>, Lucielli Pimenta Bonifacio<sup>1</sup>, Eliziane dos Santos Corrêa Soromenho<sup>1</sup>, Maria do Perpétuo Socorro Oliveira de Souza<sup>1</sup>, Jordana Cansian Fiorenze<sup>2</sup>, Fernando Rocha Oliveira<sup>3</sup>.

<sup>1</sup> Master's student in Public Policies and Local Development. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória, ES, Brazil.

<sup>2</sup> Nursing undergraduate student at Escola Superior da Santa Casa de Misericórdia de Vitória, Vitória – ES, Brazil.

<sup>3</sup> Professor in the Master's Program in Public Policies and Local Development. Escola Superior de Ciência da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória-ES, Brazil.

**Corresponding author:** luanamarquesribeiro2@gmail.com

**Introduction:** The struggle for gender equality and the protection of women's rights have been fundamental in the construction of public policies over the last decades. In Espírito Santo, this commitment was formalized with the State Plan for Policies for Women (PEPMES), created from a collaborative method between government and civil society. This plan aims to promote equality, combat discrimination based on gender, race, and other social markers, and overcome the historical inequalities that affect women. Aligned with the Sustainable Development Goals, PEPMES advises building a more just and equitable society, where all women can fully exercise their rights, with a focus on economic autonomy, inclusive education, health, and combating violence. **Objective:** To analyze all forms of violence and discrimination against women, based on PEPMES. **Method:** This is a descriptive documentary study, conducted during the month of October 2024, based on the analysis of the State Plan for Policies for Women of Espírito Santo, available online from the State Council for the Defense of Women's Rights of Espírito Santo – CEDIMES 2019/2022. **Result:** The State Plan for Policies for Women of Espírito Santo (PEPMES) is the result of a collective effort involving the voices and hands of women from all regions of the state. The plan is structured into six strategic axes that address fundamental scenarios for promoting gender equity: Combating the feminization of poverty and promoting women's economic autonomy, inclusive education aimed at eliminating illiteracy and sexist, racist, and homophobic discrimination, women's health and sexual and reproductive rights with special attention to the specifics of race, ethnicity, and sexual orientation, combating all forms of violence against women including the implementation of the Maria da Penha Law and strengthening the network of specialized services, combating racism, sexism, and homophobia with affirmative and inclusive measures for vulnerable groups, and management and monitoring of the plan ensuring its continuous and effective implementation. **Conclusion:** This plan recognizes the diversity of women in Espírito Santo and their multiple realities, whether they are urban, rural, black, quilombola, gypsy, or from traditional communities. Thus, through concrete actions such as strengthening economic autonomy, educational inclusion, and combating violence, PEPMES aims to profoundly transform the society of Espírito Santo, promoting social justice and gender equality in all spheres.

**Keywords:** State. Public Policies. Woman.





## 99. INTEGRATIVE PRACTICES AND FEMALE EMPOWERMENT: CONTRIBUTIONS TO MENTAL HEALTH AND THE 2030 AGENDA

Daniela Marques Freire<sup>1</sup>, Katty Maribell Gonzales Flores<sup>1</sup>, Tassiane Cristina Morais<sup>1</sup>.

<sup>1</sup> Postgraduate Program in Public Policies and Local Development. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, ES, Brazil.

**Corresponding author:** [daniela.freire@edu.emescam.br](mailto:daniela.freire@edu.emescam.br)

**Introduction:** Integrative and Complementary Practices (ICPs) aim to promote health, prevent diseases, and improve quality of life by addressing physical, emotional, mental, and energetic aspects. These practices have the potential to promote female empowerment by stimulating autonomy, self-knowledge, and the promotion of physical and mental care, thus contributing to the objectives of the United Nations' 2030 Agenda, especially in promoting health and well-being and gender equality. **Objective:** To discuss the interconnection between mental health, female empowerment, and integrative and complementary practices. **Method:** A literature review study was conducted, using the descriptors: Integrative and Complementary Practices, mental health, and empowerment, with articles searched in the Lilacs and Scielo databases. Articles in Portuguese, published in the last 5 years, and addressing the theme were included in the study. After exclusions, 14 studies were selected. **Results:** The medicinal treatment of female depressive experiences does not favor personal empowerment. It is recommended to create strategies that integrate the benefits of medicalization with empowerment. Empowerment involves self-esteem, self-efficacy, and self-determination, contributing to the emotional well-being of women. The increase in self-confidence and internal capacity allows for overcoming obstacles. Depression can cause significant disabilities and impact the quality of life. Practices such as acupuncture, yoga, and meditation are effective in treating depression, helping to reduce symptoms and side effects of antidepressant medications. Therapies such as auriculotherapy, reiki, lian gong, phytotherapy, ayurveda, and dance and music therapy benefit conditions like anxiety, psychosis, depression, and sleep disorders, in addition to improving quality of life, interpersonal relationships, and stimulating self-knowledge and self-care. **Final Considerations:** The benefits of ICPs on mental health help women recognize the importance of psychological well-being, promoting empowerment and behavioral changes. Mental health and empowerment are essential for female well-being. It is still necessary to expand studies that analyze this relationship, so that public policies that favor the use of more humanized practices that promote autonomy and female empowerment, essential items for fulfilling the sustainable development goals, can be strengthened.

**Keywords:** Integrative and Complementary Practices, mental health, female empowerment.

**Acknowledgments:** This work results from research conducted during the master's program, funded by the Foundation for Research and Innovation Support of Espírito Santo (FAPES), to whom we are grateful for the support.



## 100. PREVALENCE OF OSTEOMYOARTICULAR PAIN IN PEOPLE WHO HAD COVID-19 IN GREATER VITÓRIA, ESPÍRITO SANTO: A DESCRIPTIVE ANALYSIS

Daiane Kelly Kuster<sup>1</sup>, Alice Beliene Pecly<sup>1</sup>, Esther De La Fuente Gabrielle<sup>1</sup>, Júlia Rezende Scheidegger<sup>2</sup>, Fernanda Mayrink Gonçalves Liberato<sup>3</sup>, Roberta Ribeiro Batista Barbosa<sup>4</sup>, Aébe Alves Torres<sup>4</sup>.

<sup>1</sup> Undergraduate students of the Physiotherapy Course. Escola Superior de Ciência da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES, Brazil.

<sup>2</sup> Physiotherapist graduated from Escola Superior de Ciência da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES, Brazil.

<sup>3</sup> Professor at the Federal University of Espírito Santo – UFES. Vitória-ES, Brazil.

<sup>4</sup> Professor at Escola Superior de Ciência da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES, Brazil.

**Corresponding author:** aebe.torres@emescam.br

**Introduction:** COVID-19, an infection caused by the SARS-CoV-2 virus, can result in prolonged symptoms, known as Long COVID, manifested from three months after infection. Among the persistent symptoms, osteomyoarticular pain stands out as a common and clinically relevant symptom, requiring attention in the follow-up of this population. **Objective:** To analyze the prevalence of osteomyoarticular pain between three and six months after COVID-19 infection in individuals in the municipalities of Greater Vitória, Espírito Santo. **Method:** This is a cross-sectional observational study, conducted with individuals over 18 years of age, with a positive RT-PCR test for COVID-19, registered in the Compulsory Disease Notification System of the Health Surveillance of Espírito Santo, who signed the Informed Consent Form (ICF). Those who did not complete the interview or withdrew from participating at any point in the protocol and those with severe neurological or cognitive disease were excluded. Participants were contacted by telephone and, after being informed about the research, those who agreed to participate received the ICF via WhatsApp. After receiving the participant's signature, sociodemographic and pain questionnaires were administered. The pain questionnaire included eight questions about the manifestation of pain before, during, and after COVID-19 contamination and its consequences on daily life. **Results:** 573 individuals participated in the study, with 376 (65.6%) being female. Among the participants, 37.7% reported pain prior to the COVID-19 infection, in 17% the pain worsened after the infection, and 33% mentioned the onset of a new painful symptom up to 3 months after COVID-19. Of the 573 individuals, 14% reported severe pain, with a score of 8 on the Visual Analog Scale (VAS), 20% indicated moderate pain, scored between 5 and 7 on the VAS, and 11% claimed mild pain, scored between 1 and 4 on the VAS. Individuals affected by pain pointed out social implications resulting from this condition. Among them, 20% stopped visiting friends, 23% did not leave home for fun, 18.5% did not participate in religious activities, and 24.4% were absent from classes or other activities. **Conclusion:** This study identified a high prevalence of osteomyoarticular pain in individuals who developed Long COVID in Greater Vitória, revealing that a third of the sample reported the onset of new painful symptoms, and 17% of the interviewees claimed pre-infection pain that intensified in the 3 months following contagion. These findings highlight the need for further research and reinforce the importance of targeted follow-up and intervention strategies, aiming to minimize pain and promote a better quality of life for this population.

**Keywords:** COVID-19. Long COVID. Pain. Osteomyoarticular.



## 101. DRUG PREVENTION IN SCHOOLS: A PRACTICE REPORT

Carlos Augusto Lopes<sup>i</sup>, Nathalia Borba Raposo Pereira<sup>ii</sup>, Aline Borel Monteiro de Castro<sup>iii</sup>.

<sup>i</sup> State Undersecretariat for Drug Policies/Secretariat of the Government of the State of Espírito Santo, PhD candidate in the Postgraduate Program in Social Sciences at the Federal University of Espírito Santo – UFES, Vitória, Espírito Santo, Brazil.

<sup>ii</sup> State Undersecretariat for Drug Policies/Secretariat of the Government of the State of Espírito Santo, Master's student in the Postgraduate Program in Psychology at the Federal University of Espírito Santo – UFES, Vitória, Espírito Santo, Brazil.

<sup>iii</sup> State Undersecretariat for Drug Policies/Secretariat of the Government of the State of Espírito Santo, Master's student in the Postgraduate Program in Science and Mathematics Education at the Federal Institute of Espírito Santo – IFES, Vitória, Espírito Santo, Brazil.

**Corresponding author:** carlos.lopes@seg.es.gov.br

**Introduction:** Two out of every ten high school adolescents in the state have used some drug. This is shown by the recent Survey on Drug Use among Students in Espírito Santo (in press). Although studies point to an increase in drug use among adolescents and show that the earlier the use begins, the greater the risks of developing associated disorders, prevention does not always receive due attention in public policies. Prevention is understood as preventing drug use from occurring, delaying its onset, or mitigating associated problems. That being said, and considering that education is a strategic sector for accessing the child and adolescent population, the Undersecretariat for Drug Policies – Sesd and the Secretariat of Education – Sedu of Espírito Santo have developed a drug use prevention strategy in schools. **Objective:** To foster drug use prevention practices in schools aligned with prevention evidence. **Method:** The strategy included: joint elaboration of the Methodological Notebook – Drug Use Prevention with guidelines and suggestions for practices applicable to the school context, aligned with drug policy and curricular guidelines, aimed at the elementary and high school network; availability of the Notebook in print and online versions; offering of online training for educators; conducting workshops for educators; and launching a Call for Pedagogical Practices to encourage teachers to develop prevention projects in the classroom. **Results:** The Methodological Notebook was launched in 2024 and can be accessed in its online version on the portals of Sedu and the Capixaba Observatory of Information on Drugs – Ocid. The printed version was distributed to 408 public state schools. To date, in-person workshops have been held with teachers from the education network of two municipalities in the state, and the online course on Drug Use Prevention in Schools has had 80 graduates. The Call for Proposals benefited 28 teachers from the public education network, who have been developing drug use prevention projects in the schools where they work. **Final Considerations:** The results presented provide only a partial picture of the strategy, which is still in its initial phase. The prevention proposal that guides the work is centered on the development of socio-emotional skills consistent with each life cycle, which not only promote drug use prevention but also facilitate the safe and healthy development of students.

**Keywords:** Prevention; Substance Use; Socio-emotional Skills.



## 102. MAIN PREDISPOSING FACTORS IN THE DEVELOPMENT OF STROKE: A LITERATURE REVIEW

Cauã Oliveira de Carvalho<sup>1</sup>, Isadora Mantovani Freitas<sup>1</sup>, Mariana Lourdes Tibério Pereira<sup>1</sup>, Bruna Loureiro Leoncio Blanck<sup>1</sup>, Lays Hemerly Almeida<sup>1</sup>, Vitoria Pereira Santos<sup>1</sup>, Fernando Ronchi<sup>2</sup>.

<sup>1</sup> Escola Superior de Ciências da Santa Casa de Vitória, Vitória, Espírito Santo, Brazil

<sup>2</sup> Escola Superior de Ciências da Santa Casa de Vitória, Vitória, Espírito Santo, Brazil

**Corresponding author:** Isadora.freitas@edu.emescam.br

**Introduction:** Stroke is an emergency characterized by an alteration of blood flow to the brain, leading to an increase in intracranial pressure, nerve cell death, and other impairments to neurological function.

**Objective:** To describe the main predisposing factors for the development of stroke. **Method:** This literature review was conducted after consulting the PubMed, SCIELO, and Virtual Health Library (VHL) databases in October 2024. The descriptors "Stroke" AND "Causality" were combined, according to the Health Sciences Descriptors (DeCS) and Medical Subject Headings (MeSH). **Results:** After applying the search method, the final sample consisted of eight articles. The main predisposing factors for the development of stroke include male sex, older age, arterial hypertension, dyslipidemia, smoking, excessive alcohol consumption, obesity, physical inactivity, diabetes, and metabolic syndrome. Sarcopenia is also a risk factor, as it contributes to insulin resistance and endothelial dysfunction, increasing the risk of ischemic stroke. Unhealthy lifestyles, such as poor diet and lack of physical activity, aggravate these risks. **Conclusion:** Stroke has several risk factors, with the main ones present in patients being: arterial hypertension, type II diabetes, hyperlipidemia, coronary diseases, smoking, alcohol abuse, obesity, a sedentary lifestyle, and others.

**Keywords:** Stroke, Causality, Risk Factors.



### 103. PULMONARY REHABILITATION PROGRAM AS A PROPOSAL FOR HEALTH AND WELL-BEING

Gabriele Bortolini França<sup>1</sup>, Leylane Bispo Pereira de Novaes<sup>1</sup>, Luana Ribeiro dos Santos Dias<sup>1</sup>, Giovana Machado Souza Simoes<sup>2</sup>, Letícia Guimarães Peyneau<sup>2</sup>.

<sup>1</sup> Undergraduate student of the Physiotherapy Course at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil;

<sup>2</sup> Professor of the Undergraduate Physiotherapy Course at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM), Vitória, ES, Brazil.

**Corresponding author:** leticia.peyneau@emescam.br

**Introduction:** Pulmonary rehabilitation is a multidisciplinary therapeutic approach aimed at improving the quality of life of patients with chronic respiratory diseases, such as Chronic Obstructive Pulmonary Disease (COPD), asthma, and pulmonary fibrosis. This process involves a series of interventions, including physical exercises, respiratory training techniques, disease education, psychological support, and nutritional guidance. The main objective is to optimize pulmonary function, relieve symptoms such as shortness of breath, cough, and fatigue, as well as increase patients' physical capacity and promote their independence in daily activities. **Objective:** To describe the perception of Physiotherapy students regarding a rehabilitation program as a proposal for health and well-being. **Method:** This is a descriptive study of the experience report type, conducted with patients participating in a pulmonary rehabilitation program that includes physical training, disease education, respiratory techniques, and emotional support. This program is adapted to the specific needs of each patient, with the aim of maximizing benefits. **Results:** During our experience, we observed significant improvements in patients who participated in pulmonary rehabilitation. Although it is not possible to cure the underlying disease, rehabilitation contributes to general well-being, with emphasis on the reduction of hospitalizations and exacerbations, control of respiratory symptoms, improvement in functional capacity, and increased psychological well-being. Rehabilitation also promotes autonomy, teaching the correct use of medications, breathing techniques, and infection prevention, essential elements in disease management. Furthermore, education empowers patients to better understand their condition, facilitating treatment adherence and encouraging lifestyle changes, such as smoking cessation and the adoption of healthy habits. These advances reflect positive impacts not only on symptoms but on the way patients cope with the disease, improving their quality of life. **Conclusion:** Pulmonary rehabilitation is essential for improving the physical and emotional health of patients with chronic respiratory diseases and for optimizing health system resources. Incorporated into public policies, it can reduce the burden of these diseases, promoting more efficient and integrated care. For this, it is important to invest in professional training, encourage patient adherence to rehabilitation programs, and expand access to services. Thus, in addition to improving quality of life, pulmonary rehabilitation can reduce costs and promote more effective care focused on the well-being of the population.

**Keywords:** Pulmonary rehabilitation, COPD, Quality of life, Public health.



#### 104. DOOR-TO-DOOR PROGRAM: SERVICE CHALLENGES AND LIMITATIONS

Carla Loureiro Portuense Siqueira<sup>1</sup>, Eloiza Toledo Bauduina<sup>1</sup>, Nathalya das Candeias Pastore Cunha<sup>1</sup>, Maria Clara Sossai de Almeida<sup>1</sup>, Rodrigo Scoassante Tavares<sup>1</sup>, Fernando Rocha Oliveira<sup>2</sup>.

<sup>1</sup> Master's student in Public Policies and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM

<sup>2</sup> Professor of the Postgraduate Program in Public Policies and Local Development, Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM

**Corresponding author:** rodrigo.st.tavares@gmail.com

**Introduction:** The Door-to-Door is a public transportation service for people with mobility impairments (wheelchair users) to bring accessibility to citizens living in the Capital (Vitória-ES), facilitating the displacement of people who depend on adapted transport and cannot interrupt their activities. It can be used for work, education, health, and leisure. The service is free and operates every day, from 4 a.m. to midnight, including weekends and holidays, and was implemented through Decree No. 17,357, published on April 11, 2018, by the mayor of Vitória, as provided in item III of Art. 5 of Decree No. 12,163, of December 27, 2004. **Objective:** To evaluate the implementation of the Door-to-Door service, as well as the reality experienced by its users. **Method:** This is a qualitative and exploratory documentary analysis and a public policy analysis. The theoretical concept of the Public Policy Cycle was adopted, specifically the policy formulation phase, as an analytical framework. **Results:** The "Door-to-Door" accessible transport system in Vitória serves 445 registered users in 2023, all eligible to use the service. This program is exclusive to people with disabilities who use wheelchairs, highlighting the municipal administration's commitment to promoting mobility and social inclusion for this group. The documentary analysis underscores the importance of targeted public policies that ensure access to essential services, such as adapted transport, reinforcing the need for maintenance and expansion of initiatives that guarantee the autonomy and quality of life for people with reduced mobility. Furthermore, it was found that the utility of the service has been changing according to the demands and requests of users, and it seeks to improve it through increasing the fleet, improving the application, and having vehicles with greater schedule flexibility. **Conclusion:** The Door-to-Door policy is an important step towards a more inclusive society, but it still requires adjustments to become fully effective and to serve everyone fairly and efficiently. For the project to achieve its full efficiency, it is necessary to improve the accessibility of cities, invest in an adequate fleet, train employees, and optimize route planning.

**Keywords:** Door-to-Door. Public Transport. Wheelchair Users. Public Policy.



**105. INCLUSION PROGRAM FOR VISUALLY IMPAIRED INDIVIDUALS IN  
COLATINA-ES: PROMOTING HEALTH AND WELL-BEING ALIGNED WITH SDG 3**

Amanda Calzi Roldi<sup>1</sup>, Stefania Schimith Bergher<sup>1</sup>, Karoline Carneiro Ferreira da Silva<sup>1</sup>, Sabrina Aparecida Prado Lucas<sup>1</sup>, Fernando Rocha Oliveira<sup>2</sup>.

<sup>1</sup> Master's student in the Public Policies and Local Development Program - Emescam, Vitória, Espírito Santo, Brazil

<sup>2</sup> Professor of the Master's Program in Public Policies and Local Development - Emescam, Vitória, Espírito Santo, Brazil

**Corresponding author:** amanda.roldi@edu.emescam.br

**Introduction:** Promoting social inclusion and ensuring health and well-being for individuals with visual impairments and other associated conditions are important for human development and social equity. The health policy establishes a partnership between the Municipality of Colatina-ES and the Colatinense Association for the Visually Impaired (ACDV), aligning with the UN's Sustainable Development Goal (SDG) 3, which aims to ensure health and well-being for all. The project addresses the social inclusion of children and young people with visual impairments, autism, and paralysis, contributing to the promotion of health and quality of life. **Objective:** To describe the impacts of the public promotion policy established between the Municipality of Colatina and the ACDV in promoting the social inclusion and well-being of people with visual impairments and associated conditions. **Method:** A documentary research was conducted, analyzing the public promotion policy that regulates the partnership between the Municipality of Colatina and the ACDV, based on the analysis of Promotion Agreement No. 006/2023. The partnership provides for investments in infrastructure and equipment, ensuring safe and accessible environments, strengthening the right to health and inclusion. **Results:** The expected results include the expansion of beneficiaries' skills, improvements in mobility and orientation through assistive technologies, and the effective school reintegration of participants. Furthermore, the project seeks to strengthen family relationships and promote a better quality of life, with specialized support and adequate transportation. In total, 125 people will benefit from the project, including 27 children, 23 adolescents, 39 young people, and 36 families. The project's execution also aims to ensure that the mental and social health conditions of the beneficiaries are met, contributing to the achievement of SDG 3 targets. **Conclusion:** With a total investment of R\$ 214,899.93, the project will be monitored by the public administration and will require accountability from the ACDV. The project reinforces the relevance of partnerships between the public sector and civil society to promote social and educational inclusion and ensure health and well-being. Aligned with SDG 3, it contributes to building a more just and equitable society, ensuring the integral development of people with disabilities.

**Keywords:** Health Policies, Social Inclusion, Public Administration, People with Visual Impairments.



**106. PROMOTING MENTAL HEALTH: GUIDANCE ON THE USE OF  
PHYTOTHERAPEUTIC TEAS FOR A WOMEN'S GROUP**

Zieli Marcolino de Melo<sup>1</sup>, Lea Da Silva Bianchi<sup>1</sup>, Maria José Rodrigues Da Rocha Castro<sup>1</sup>, Fernanda Baldo Gomes<sup>1</sup>, Nathalia Borba Raposo Pereira<sup>1</sup>, Carla Jordão Silva<sup>1</sup>.

<sup>1</sup> Center for Reception and Comprehensive Care on Drugs (CAAD), Vitória, Espírito Santo, Brazil

**Corresponding author:** [zieli.marcolino@gmail.com](mailto:zieli.marcolino@gmail.com)

**Introduction:** Disorders related to the abusive use of psychoactive substances have become a global public health problem. In 2021, in Brazil, 400.3 thousand consultations were registered for people with mental and behavioral disorders due to the use of drugs and alcohol. The chronic use of psychoactive substances correlates with mental health disorders such as depression and anxiety, exacerbating symptoms. Anxiety is one of the most common mental health disorders, affecting 18.6 million Brazilians in 2022. The application of management practices to minimize its symptoms is necessary. **Objective:** To provide a case report on an educational session held with a group of women served by the Center for Reception and Comprehensive Care on Drugs (CAAD) about the consumption of phytotherapeutic teas in the management of anxiety. **Method:** An exploratory, descriptive study was conducted with the group of women served by the CAAD, a facility of the Rede Abraço Program, linked to the State Undersecretariat for Drug Policies (SESD), which welcomes people with problems arising from the abusive use of psychoactive substances. There is an exclusive group for women as they need their own space for sharing experiences, as they have gender-specific experiences. In August 2023, a training session on "Anxiety and Use of Phytotherapeutic Teas" was promoted. "Anxiety" was defined, and risk factors were addressed by the Psychiatrist. Subsequently, the nutritionist worked on possibilities for managing anxiety and mild insomnia, including the use of phytotherapeutics, based on the Phytotherapeutic Formulary and the Phytotherapeutic Memento. **Results:** The Psychiatrist, Psychologist, and Social Worker responsible for the group were present, along with 12 women who actively participated in the discussion of the proposed topic. There was a tasting of teas prepared according to the indicated use and unsweetened, seeking to expand knowledge and interest. A booklet with the provided guidance was distributed, compiling information from the Phytotherapeutic Formulary. **Conclusion:** Good adherence from the group was observed, bringing contributions from daily life, experiences with tea use, and questions about other possibilities of use.

**Keywords:** Food and Nutritional Security, Anxiety, Phytotherapeutics.





**107. PROMOTION OF FOOD AND NUTRITIONAL SECURITY WITH A GROUP OF FAMILIES: COMPLETE USE OF FOOD**

Zieli Marcolino de Melo<sup>1</sup>, Leovegilda Maria Gomes<sup>1</sup>, Nathalia Borba Raposo Pereira<sup>1</sup>, Carla Jordão Silva<sup>1</sup>.

<sup>1</sup> Center for Reception and Comprehensive Care on Drugs (CAAD), Vitória, Espírito Santo, Brazil

**Corresponding author:** [zieli.marcolino@gmail.com](mailto:zieli.marcolino@gmail.com)

**Introduction:** In Brazil, 39 thousand tons of usable food are discarded every day. However, Food and Nutritional Insecurity in Brazil affects 33.1 million people. This discrepancy reveals the need for better utilization of food, especially regarding access for populations in social vulnerability, as this situation can restrict access to sufficient food to meet nutritional demands, diminishing the Human Right to Adequate Food and Food and Nutritional Security (FNS). **Objective:** To present a case report on a lecture given to families served by the Center for Reception and Comprehensive Care on Drugs (CAAD), as a tool to combat food waste, enabling the complete use of food as an FNS strategy. **Method:** An exploratory, descriptive study was conducted. The intervention took place with the family group of CAAD, a facility of the Rede Abraço Program, linked to the State Undersecretariat for Drug Policies (SESD). The group is composed of family members of people who abuse psychoactive substances and seek CAAD for reception and guidance. In September 2023, the nutritionist gave a lecture on "Complete Use of Food" to the group, working on alternatives to avoid food waste, exposing ways of complete utilization and recipes. **Results:** The Social Worker responsible for the group and 9 women were present, who actively participated in the discussion, showing great interest in the proposed topic. Afterwards, a tasting of recipes produced from the use of food scraps was held (peel and stalk tart, orange juice with papaya peel, pumpkin peel chips, cauliflower leaf cream, stalk curd). At the end, a booklet with the recipes was distributed so they could be prepared at home, multiplying the acquired knowledge to other family members. **Conclusion:** The group participants adhered to the proposal with contributions from daily life about other recipes for using food scraps and with suggestions for improvements. The action had repercussions in the preparation of the recipes in their homes, according to later reports.

**Keywords:** Food and Nutritional Security, Complete Use of Food, Food Waste.



**108. FUNCTIONAL RECOVERY OF THE UPPER LIMB OF HEMIPARETIC PATIENTS  
POST-STROKE BEFORE AND AFTER AN EXOSKELETON PROTOCOL**

Dayana Reis Subtil<sup>1</sup>, Livia de Cerqueira Gonçalves<sup>1</sup>, Thaís Siqueira Campos<sup>1</sup>, Mariângela Braga Pereira Nielsen<sup>2</sup>.

<sup>1</sup> Physiotherapy student at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES, Brazil.

<sup>2</sup> Professor of the Physiotherapy course at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES, Brazil.

**Corresponding author:** Mariangela.Pereira@emescam.br

**Introduction:** A Cerebrovascular Accident (CVA), or stroke, occurs when the blood supply to the brain is interrupted, causing the death of nerve cells in the affected brain area. Depending on the location, extent, and severity of the lesion, post-CVA participants may present a series of deficits, with impairment of the upper limb motor functions being prominent. An alternative treatment is robot-assisted therapy, which is an innovative rehabilitation approach. **Objective:** To evaluate the recovery after using an upper limb exoskeleton on the functional impairment of hemiparetic stroke patients at a physical therapy teaching clinic in Vitória. **Methods:** This is a quasi-experimental study, composed of a convenience sample of 8 hemiparetic post-CVA participants who were undergoing physical therapy treatment at the teaching clinic from August to December 2023. The participants underwent 10 rehabilitation sessions using the upper limb exoskeleton. Sociodemographic and clinical data were collected, as well as pre- and post-treatment assessments of muscle strength, tone, and electromyography. At the end of the protocol, a Self-Perception Efficacy of Rehabilitation with the Exoskeleton Questionnaire was applied. The project was previously submitted for approval to the Research Ethics Committee of the Federal University of Espírito Santo (UFES) under number 41368820.3.0000.5542. **Results:** Of the 8 participants, 62.5% were female, with an average age of 54.5 years, 62.5% were black and single. The majority (87.5%) resided in the city of Vitória, and (37.5%) had a monthly income of 1 to 2.5 minimum wages. Half of this population had completed higher education, with 62.5% being retired. Seven had an ischemic stroke, with an average time of 6.3 years since the event. All presented muscle hypertonia and altered muscle strength in the affected limb. Electromyography showed a significant increase in triceps contraction, the main muscle for elbow extension, and a reduction in biceps activation, the antagonist. 75% had positive affirmations of improvement in motor skills and task performance in the Self-Perception Efficacy of Rehabilitation Questionnaire. **Conclusion:** The exoskeleton improved functional capacity and facilitated activities of daily living, although there were no major improvements in functional impairments. Electromyography indicated improvements in muscle synergy and the precision of muscle movements.

**Keywords:** stroke. functionality. hemiparesis. rehabilitation. exoskeleton.



### 109. EXPERIENCE REPORT: A PROPOSAL FOR HEALTH EDUCATION IN THE PULMONARY REHABILITATION PROJECT

Bianca Elias<sup>1</sup>, Diego Gonçalves<sup>1</sup>, Mariana Ferreira da Fonseca Scopel<sup>1</sup>, Victória Nass<sup>1</sup>, Giovana Machado Souza Simões<sup>2</sup>, Letícia Guimarães Peyneau<sup>2</sup>.

<sup>1</sup> Physiotherapy student at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória – ES

<sup>2</sup> Professor of the Physiotherapy course at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória – ES

**Corresponding author:** victorianassmello@gmail.com

**Introduction:** The health education proposal in the Pulmonary Rehabilitation Program (PRP) aims to instruct patients and their caregivers in the effective management of the disease, promoting the adoption of healthier life practices as a complement to physiotherapy sessions. In this context, education can be offered through lectures, informational sessions, and didactic materials. This approach has proven to be an effective strategy in the PRP, especially for patients with chronic pulmonary diseases, such as Chronic Obstructive Pulmonary Disease (COPD), chronic restrictive disease, asthma, and post-COVID conditions. The health education proposal in the PRP seeks to teach the patient and their families how to manage the disease and adopt healthier life practices. **Objective:** The main objective of this research was to investigate the impact of health education on the pulmonary rehabilitation process of patients with chronic respiratory diseases, where patients were subjected to a multidisciplinary program that included physical exercise sessions, music therapy, breathing training, and health education activities, with the aim of analyzing changes in patients' knowledge and skills regarding self-care and identifying possible improvements in quality of life and functional capacity of the participants. **Method:** This is a descriptive study of the experience report type, conducted with patients with chronic cardiopulmonary diseases participating in a cardiopulmonary rehabilitation program. The intervention was developed in a philanthropic physiotherapy clinic, linked to a higher education institution, and conducted by students linked to an extension project focused on health education and cardiopulmonary rehabilitation. **Results:** The study demonstrated that health education had a positive impact on the pulmonary rehabilitation of patients, increasing adherence to the program, improving self-care, and promoting changes to healthy habits. Participants reported a reduction in respiratory symptoms, improvement in the ability to perform daily activities, and greater general well-being. **Conclusion:** The implementation of a health education program in the context of cardiopulmonary rehabilitation proved to be a valuable intervention, capable of promoting significant benefits in both physical capacity and the general well-being of patients. Health education plays a crucial role in the context of cardiopulmonary rehabilitation, as it promotes awareness and self-care, fundamental elements for long-term therapeutic success. By providing clear and practical information, patients are empowered to make informed decisions about their health, which contributes to the prevention of complications and the reduction of the progression of chronic diseases.

**Keywords:** Project, Rehabilitation, Education and Health.



**110. SOCIAL REPRESENTATIONS: ANALYSIS OF THE PERCEPTION OF LEPROSY IN THE DUALITY OF VICTIM AND HEALTHCARE PROFESSIONAL THINKING**

Francisco Albino de Araújo<sup>2,3,4</sup>, Leandro Dias Aragão<sup>2</sup>, Luiz Carlos de Abreu<sup>1,3,4</sup>.

<sup>1</sup> Department of Integrated Health Education, Federal University of Espírito Santo, Vitória, ES, Brazil.

<sup>2</sup> Faculty of Medical Sciences Afya Cruzeiro do Sul.

<sup>3</sup> Member of the Laboratory of Study Design and Scientific Writing, Centro Universitário FMABC, Santo André, SP, Brazil.

<sup>4</sup> Postgraduate Program in Health Sciences, Centro Universitário FMABC, Santo André, SP, Brazil.

**Corresponding author:** francisalbino@gmail.com

**Introduction:** The social stigma surrounding leprosy is still a significant barrier to early diagnosis and treatment adherence, even with advances in disease control. This study analyzes how the social representations of leprosy among patients and health professionals in Cruzeiro do Sul, Acre, contribute to this stigmatization. Understanding these representations is crucial for improving the doctor-patient relationship and promoting a more efficient approach to leprosy control. **Objective:** This study aims to investigate the social representations of leprosy, highlighting the main elements that compose the central nucleus of these representations and the differences between the perception of patients and health professionals. The focus is on understanding how these perceptions influence stigma and treatment. **Method:** The research used the Free Word Association Test (FWAT), applied to a sample of patients and health professionals in public health institutions. The inducing term "leprosy" was used to capture evocations, and the data were analyzed based on the Theory of the Central Nucleus of Social Representations, allowing the identification of the most important elements for each group. **Results:** Among patients, the terms "prejudice," "deformity," and "pain" formed the central nucleus of the representations, indicating a strong stigmatizing burden. Among health professionals, the terms "lesion," "prejudice," and "spot" were more evoked, reflecting a clinical and social view of the disease. The difference in perceptions between the groups points to challenges for leprosy control, especially in overcoming stigma. **Conclusion:** The social representations of leprosy among patients and health professionals share common perceptions but with different emphasis. It is necessary to reinforce education and awareness programs to reduce stigma, improve early diagnosis, and increase treatment adherence, thus facilitating disease control.

**Keywords:** Leprosy, Stigma, Social representations, Public health, Cruzeiro do Sul – AC.



### 111. HEALTH AND IMMIGRATION: ANALYSIS OF DISPARITIES IN BRAZIL AND DEVELOPED COUNTRIES

Graziella Almeida Salazar Veloso<sup>1</sup>, Carla Patrícia Pires Xavier de Carvalho<sup>1</sup>, Renata Braga Rodrigues<sup>1</sup>, Wilson Espósito Júnior<sup>1</sup>, Paulo Andre Stein Messetti<sup>1</sup>, Beatriz de Barros Souza<sup>2</sup>.

<sup>1</sup> Student of the stricto-sensu Postgraduate Program in Public Policies and Local Development at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória.

<sup>2</sup> Professor of the stricto-sensu Postgraduate Program in Public Policies and Local Development. Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória, ES.

**Corresponding author:** graziella.veloso@edu.emescam.br

**Introduction:** Migration is a global phenomenon that generates significant health disparities among immigrants, influenced by varied sociopolitical contexts and health systems. In Brazil and Latin countries, migration is motivated by adverse economic conditions, political insecurity, and social crises. This analysis of health disparities in different contexts is fundamental to understanding the needs faced by these vulnerable populations. **Objective:** The objective of this summary is to analyze the health disparities between immigrants in Brazil and in other countries, highlighting the public policies and sociopolitical realities that impact these groups, aligned with SDG 10. **Method:** The analysis was carried out through a narrative literature review, considering studies on the situation of immigrants in Brazil, the United States, and Europe. **Results:** Legal, cultural, and epidemiological aspects were found, as well as the experiences of community organizations that offer support to immigrants and facilitate their access to health services. In Brazil, despite Law No. 13,445 of 2017, which establishes principles of equality and combats xenophobia towards immigrants, there are still gaps in access to health services and in insertion into the labor market. In the United States, more restrictive immigration policies and a fragmented health approach create barriers for immigrants. Studies identify the "immigrant paradox" in the USA, where the health of this population deteriorates over time due to social stressors and discrimination. In Europe, the situation is diverse; some countries adopt more inclusive policies, while others face discrimination, xenophobia, and significant obstacles to integration. **Conclusion:** To address social disparities, it is necessary to adopt inclusive public policies that guarantee the appreciation of cultural diversity and access to essential services. SDG 10 should guide these actions, promoting a more just and egalitarian society.

**Keywords:** health care disparities, immigration, health policies, public health.



**112. TOOTH LOSS IN ADULTS: A PREVALENCE ASSESSMENT OF THE SOUTHEAST REGION OF BRAZIL WITH DATA FROM THE NATIONAL HEALTH SURVEY (PNS - 2019)**

Luis Mille Monteiro de Sousa<sup>1-2</sup>, Ariadina Galdino dos Santos<sup>1-2</sup>, Romeu Paulo Martins Silva<sup>2</sup>, Luiz Carlos de Abreu<sup>1-3</sup>, Tamires dos Santos Vieira<sup>1</sup>.

<sup>1</sup> Laboratory of Scientific Writing, Federal University of Espírito Santo, Espírito Santo, Brazil.

<sup>2</sup> Postgraduate Program in Nutrition and Health, Federal University of Espírito Santo, Espírito Santo, Brazil.

<sup>3</sup> Department of Integrated Health Education, Federal University of Espírito Santo, Espírito Santo, Brazil; Adjunct Professor. University of Limerick, Ireland; COVID-19 Observatory Brazil and Ireland.

**Introduction:** Tooth loss is an important indicator of oral health, influenced by social, demographic, and economic factors, which can negatively impact quality of life, self-esteem, masticatory function, and social interactions, also highlighting inequalities in access to health. **Objective:** To analyze the prevalence of tooth loss in different age groups and the main risk factors. **Method:** The data were obtained from the National Health Survey (PNS 2019), conducted by IBGE, with a sample of 94,114 people. Adolescents aged 15 to 19 years (n = 22,425), adults aged 35 to 44 years (n = 41,460), and elderly people aged 65 to 74 years (n = 18,633) were included. Tooth loss was classified as mild (1 to 2 teeth), moderate (3 to 4 teeth), and severe (5 or more teeth) per dental arch. The analyzed variables included socioeconomic factors (family income below or above 2 minimum wages), demographic factors (sex and southeast region), and behavioral factors (brushing frequency and smoking). The analyses were performed with the IBM SPSS Statistics software (version 26.0). **Results:** Among young people aged 15 to 19, the majority had mild loss, with RJ (96.1%) and SP (88%) standing out. Non-smokers (96.6%) and women (94.7%) had the lowest rate. In the 35 to 44 age group, 77.7% of men and 76.2% of women lost up to 2 lower teeth; in MG, 78.3% had loss of upper teeth, while in RJ, 71.9% had loss of lower teeth. Among the elderly aged 65 to 74, severe tooth loss was predominant, with 52.6% in MG, 47.8% in RJ, and 44.6% in ES, being more prevalent among women (48.5%) and smokers (52.3%). Low frequency of dental appointments and irregular oral hygiene habits (58.8%) were associated with severe tooth loss, as was lower income (24.4%) compared to those who earn more (16.9%). **Conclusion:** It is perceived that tooth loss is influenced by behavioral habits and limited access to health, highlighting family income as a more relevant factor across age groups. These findings reinforce the importance of Sustainable Development Goal 3 (SDG 3) to ensure a healthy life and promote well-being for all, evidencing the need for public policies that promote the reduction of socioeconomic inequalities that impact access to oral health.

**Keywords:** Dental Loss. Oral Health. Oral Hygiene. Income.



### 113. SOCIAL SUPPORT FOR CAREGIVERS OF ELDERLY PEOPLE IN THE MUNICIPALITY OF VITÓRIA

Keffyne Gonçalves Stein da Silva<sup>1,3</sup>, Millena Morellato de Souza<sup>1,3</sup>, Luciana Carrupt Machado Sogame<sup>2,3,4</sup>, Maria Carolina Pereira e Silva<sup>2,3</sup>.

<sup>1</sup> Academic of the Physiotherapy course at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM, Vitória, Espírito Santo, Brazil

<sup>2</sup> Professor of the Physiotherapy course at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM, Vitória, Espírito Santo, Brazil

<sup>3</sup> Nucleus of Studies in Public Health, Life Cycles and Interdisciplinary Care – EMESCAM, Vitória, Espírito Santo, Brazil

<sup>4</sup> Professor of the Master's in Public Policies and Local Development at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM, Vitória, Espírito Santo, Brazil

**Corresponding author:** millena.msouza@edu.emescam.br

**Introduction:** The global aging population results in a longer life expectancy and a demand for caregivers, who face challenges due to the lack of regulation and training. Despite the recognition of the profession, these professionals deal with economic and social difficulties. Social support is fundamental to improving their quality of life, and the Medical Outcomes Study Social Support Survey (MOS-SSS) scale is an important tool to assess this support, although little used in this context. **Objective:** To verify the domains of social support in caregivers of elderly people assisted by a Family Health Unit (USF) in Vitória-ES. **Methods:** This is a case series with a quantitative approach and descriptive analysis, carried out at the USF Luiz Castellar da Silva in Vitória-ES. 23 caregivers whose elderly were registered at the USF were included. The variables of the sociodemographic and economic profile and the caregiver's perception of social support were analyzed. Social support was evaluated using the MOS-SSS social support scale, which consists of 19 questions that begin with the guidance: "If you need it, how often do you have someone...?" and the possible answers are: 1 – never, 2 – rarely, 3 – sometimes, 4 – almost always, 5 – always. It has 5 domains: positive social interaction, affective support, emotional support, informational support, and material support. **Results:** It was found that among the interviewed caregivers, the sociodemographic and economic profile is characterized by a majority of women (69.53%), aged 60 and over (52.56%), who have children (78.26%) and partners (52.17%), with complete high school education (43.47%), retired (47.83%), with an income of up to one (1) minimum wage (52.17%). In addition, this sample shows a totality of family caregivers (100%), without professional training and who have been providing care for more than 5.1 years (60.86%), with children being the most common caregivers (34.78). Regarding health condition, 91.30% have some type of illness and use medication frequently (82.6%), do not practice physical activity (69.56%), and do not engage in leisure activities (60.83%). In relation to the domains, an average of 12.65 (63.25%) was observed in positive social interaction, 11.78 (78.53%) in affective support, 13.47 (67.35%) in emotional support, 13.95 (65.75%) in informational support, and 16.95 (84.75%) in material support. **Conclusion:** These findings indicate the urgent need for public policies that strengthen social support networks and offer training to caregivers, ensuring adequate support and improvement in the quality of life of caregivers and the care provided to the elderly.

**Keywords:** Elderly person, Caregivers, Social support.



#### 114. SUSTAINABILITY IN THE HOSPITAL ENVIRONMENT, IS IT POSSIBLE?

Mariana Zamprogno Zottele<sup>1</sup>, Lara Machado de Oliveira<sup>1</sup>, Francine Alves Grativel Raposo<sup>2</sup>.

<sup>1</sup> Medical student at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM;

<sup>2</sup> Professor of the Medical Course at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM;

**Corresponding author:** marianazzottele@gmail.com

**Introduction:** In 2019, the production of 11 million tons of plastic waste per year was estimated in Brazil, demonstrating the country's great responsibility in the global environmental scenario, negatively impacting human health and quality of life. Aiming to reduce the environmental impact of each country, the United Nations established sustainable development goals in 2015, including the promotion of sustainable communities and cities. However, a significant difficulty is noted for underdeveloped countries in implementing such changes, especially in the health area, which generates significant amounts of waste. Socio-environmental awareness by managers and employees in the hospital environment also generates a positive impact for the hospital itself, as it implies cost reduction, greater implementation of technology, and prominence in the market and international policies. **Objective:** To sensitize health professionals to adopt sustainable measures within the hospital environment. **Method:** This is an experience report carried out by 11th-period medical students from a college in Greater Vitória, Espírito Santo. In partnership with a Non-Governmental Organization for stray animals, an empty and customized water gallon was placed in the living space of the medical interns at the teaching hospital, for students to dispose of caps and seals of any kind (juice, milk, toothpaste, soda). **Results:** More than 2000 caps were collected over a period of 6 months and sent to the NGO, which generated resources for spaying stray animals and to cover veterinary and rescue expenses. Several students not only put in caps from products used throughout the day but also started collecting and bringing them from home and mobilizing friends and family for the cause. **Final considerations:** The hospital environment, by itself, already generates a significant amount of infectious and non-reusable waste. Therefore, small measures such as the implementation of bins with segregation of recyclable objects in places like: medical and nursing well-being areas, kitchen, and operating rooms, already contribute positively to the sustainable cause. Another feasible measure would be the implementation of structures for the disposal of printed medical records by students during academic activities and by the management itself for bureaucratic purposes, such as paper shredders (to preserve patient information), and, subsequently, sending them for selective collection.

**Keywords:** Sustainability. Recyclables. Hospital.





### 115. SUSTAINABILITY IN THE LIVED TERRITORY: THE TRAINING OF ECO-EDUCATORS FROM A LIVING LABORATORY

Sirlene Dias Araujo<sup>1</sup>, Aline Beatriz Pimentel Doelinger Oliveira<sup>1</sup>, Maria das Graças Ferreira Lobino<sup>1</sup>.

<sup>1</sup> Federal Institute of Espírito Santo, Vila Velha, Espírito Santo, Brazil

**Introduction:** The lived territory is not just a geographical delimitation, but a dynamic space shaped by social, economic, and political relations, and also by the contradictions that emerge in the urban and environmental context. These contrasts—such as social disparities and conflicts over the use of space—highlight the need for an understanding of the environment as a totality, which overcomes fragmented views and contributes to a societal project based on environmental citizenship. In this scenario, the Living Laboratory, located in the City of Innovation, in Jardim da Penha, Vitória (ES), positions itself as an educating space that promotes Critical Environmental Education, articulating extension actions, permanent training courses, planting drives, study groups, and scientific dissemination. The methodology of the Living Laboratory thus seeks to integrate knowledge and practices aimed at forming critical and environmentally conscious citizens. **Objective:** This work aims to report the contributions of the Living Laboratory's methodology to emancipatory educational processes, highlighting how the extension course "Training for Eco-educators" fosters critical and transformative educational practices in the socio-environmental context. This structure emphasizes the territory's contradictions and how the Living Laboratory works to overcome them, linking the LV's practice to the construction of active environmental citizenship. The introduction reinforces the scenario and the challenges addressed, and the objective connects the report's focus to the transformative impact of the training course. **Method:** The study has a qualitative approach, complemented by elements of the Thematic Approach, a methodology applied in Science Education, where the concepts worked on arise from the problems experienced by the community itself. The socio-environmental rooting methodology was adopted to ensure that the knowledge generated in the workshops spreads and takes root in the participants' contexts of action. **Results:** About 1200 people were directly and indirectly impacted by the Training for Eco-educators, covering formal and non-formal educators, representatives of social movements, and high school students from municipal, state, and federal networks. **Final Considerations:** Emancipatory educational processes are fundamental for the construction of a truly sustainable society. The Sciences must occupy a central role in this project, forming citizens who integrate the relationship between human beings and the environment in an inseparable way, and promoting social development. The Training for Eco-educators and other strategies of the Living Laboratory, guided by Critical Environmental Education, seek to strengthen this continuous training, promoting a transformative and conscious involvement with the environment.

**Keywords:** Living Laboratory, Training of Eco-educators, Critical Environmental Education, Extension, Socio-environmental Rooting.



**116. NON-PHARMACOLOGICAL TECHNIQUES, PAIN INTENSITY, AND TYPE OF DELIVERY IN PARTURIENTS AT A PHILANTHROPIC MATERNITY HOSPITAL IN VITÓRIA-ES**

Beatriz Rocha de Paula Nighini<sup>1</sup>, Rayssa Vieira Tavares<sup>1</sup>, Thalita Souza Soares<sup>1</sup>, Flávia Azevedo de Brito<sup>2</sup>.

<sup>1</sup> Undergraduate students of the Physiotherapy Course. Escola Superior de Ciência da Santa Casa de Misericórdia de Vitória (EMESCAM). Vitória, Espírito Santo. Brazil;

<sup>2</sup> Specialist physiotherapist in functional rehabilitation and women's health by the Brazilian Association of Physiotherapy in Women's Health (ABRAFISM). Professor of the Undergraduate Physiotherapy Course. Federal University of Espírito Santo (UFES). Vitória, Espírito Santo. Brazil;

**Corresponding author:** beatriz.paula@edu.emescam.br

**Introduction:** Childbirth is historically considered a cultural event attended by family or community members, which has undergone progressive transformations for the greater safety of the woman and child. With the intention of abandoning interventionist practices, techniques have been discussed in order to obtain comprehensive care and allow the parturient access to non-pharmacological resources.

**Objective:** To describe the use of non-pharmacological techniques, pain intensity, labor duration, and type of delivery in parturients at a Philanthropic Maternity Hospital in Vitória-ES. **Methods:** This is an observational, cross-sectional, quantitative, and descriptive study. A sample of 100 medical records of parturients from the Hospital Santa Casa de Misericórdia de Vitória, Maternidade Pró-Matre, was included, carried out between July and December 2023, from the analysis of physical records that met the inclusion criteria. Based on the information from the medical records, variables related to sociodemographic characteristics, gynecological-obstetric profile, and non-pharmacological techniques were collected, which were noted on a specific collection form. **Results:** All 100 parturients included in the study received non-pharmacological techniques during labor. Ambulation was performed in 85% of cases, followed by a warm bath in 86%. The Swiss ball and active exercises were applied in 91% of the sample, and slow, deep breathing exercises were performed in 96% of the parturients. Massage was less common, applied in 32% of cases. Within the sample, 82% presented moderate pain upon arrival at the maternity hospital, 79% of the parturients experienced a shorter duration of labor, and 66% progressed to vaginal delivery. **Conclusion:** This study highlighted the intrapartum intervention in low-risk pregnant women, increasing the use of non-pharmacological methods, such as slow and deep breathing. These methods promote control and autonomy during childbirth, relieving pain and reducing cesarean section rates. The continuation of research is fundamental to improve the application of these techniques and the quality of obstetric care, aiming to humanize the birth process.

**Keywords:** Pregnant women. Non-pharmacological interventions. Childbirth. Labor pain.



### 117. MORTALITY TRENDS IN WOMEN OF FERTILE AGE IN ACRE, BRAZIL, 2000-2023

Antonio Willian de Souza Farias<sup>1</sup>, Claudiane Barbary de Mesquita Soares<sup>1</sup>, RonnÍla da Silva Costa<sup>1</sup>, Stefanny Furtado de Assis<sup>1</sup>, Iago Sales Orlandi<sup>2</sup>, João Batista Francalino da Rocha<sup>1,2</sup>.

<sup>1</sup> Integrated Multiprofessional Residency in Family and Community Health. Federal University of Acre. Rio Branco, AC, Brazil.

<sup>2</sup> Laboratory of Study Design and Scientific Writing. Center for Health Sciences, Federal University of Espírito Santo. Vitória, ES, Brazil.

**Corresponding author:** willian.farias199@gmail.com

**Introduction:** The term Women of Fertile Age (WFA) in Brazil corresponds to the age group of 10 to 49 years, which constitutes a majority, representing 51.6% of the total female population, according to data from the National Household Sample Survey (PNAD). Deaths in WFA account for 24% of deaths worldwide, mostly associated with sexual and reproductive life. In Acre, it is necessary to fill gaps in regional scientific knowledge and support the Sustainable Development Goals (SDGs). **Objective:** To analyze the mortality trend in women of fertile age in the state of Acre, Brazil, from 2000 to 2023. **Method:** An ecological time-series study based on secondary data from the Mortality Information System (SIM/DATASUS) of the Brazilian Ministry of Health. The analysis of the mortality trend pattern in Women of Fertile Age (WFA) used the Annual Percent Change (APC) and Average Annual Percent Change (AAPC). The interpretation considered results statistically different from zero at an alpha level ( $p < 0.05$ ). A positive APC and AAPC with statistical significance indicated an increasing trend, while negative values revealed a decreasing trend. Positive or negative results without statistical significance indicated stability. The mortality rate in women of fertile age (MRWFA) was calculated by the ratio of the number of deaths of women of fertile age to the population of women in the same age group, multiplied by 10,000. Analyses were performed with Microsoft Excel 2019 and Joinpoint Regression 5.2.0 software. **Result:** A total of 6,036 deaths in WFA were recorded, with an annual average of  $252 \pm 56$  standard deviation (SD) (95%CI: 228; 479) and a percent change (PC) of 26.91%. This corresponded to an MRWFA of 10.12, with an average of  $10.14 \pm 1.47$  SD (95%CI 9.67; 19.67) and a PC of -26.95%. Regarding the ICD-10 Chapter, WFA deaths were concentrated in neoplasms (19.57%), followed by external causes (19.27%), diseases of the circulatory system (14.61%), infectious and parasitic diseases (10.77%), symptoms and abnormal findings (8.17%), and diseases of the respiratory (7.26%) and digestive (4.94%) systems. The AAPC of the MRWFA indicated a decreasing trend (-1.21; 95%CI -2.28; -0.51;  $p = 0.0168$ ). The APC revealed three segments: 2000-2017, a decreasing trend (-1.02; 95%CI -2.10; -0.31;  $p = 0.0204$ ), 2017-2021, an increasing trend (9.30; 95%CI 3.16; 16.64;  $p = 0.0208$ ), and 2021-2023, a decreasing trend (-20.62; 95%CI -20.62; -7.84;  $p = 0.0208$ ). **Conclusion:** There was a decreasing trend in the MRWFA over the complete period, with a critical period of worsening between 2017-2021, followed by a sharp reduction after 2021. The pattern of causes of death reflects a typical epidemiological transition, with a predominance of chronic non-communicable diseases (neoplasms) and external causes.

**Keywords:** Women's Health, Morbidity, Mortality, Violence against Women.



### 118. TRENDS IN MATERNAL DEATH IN ACRE, BRAZIL, 2000-2023

Jainy de Souza Dantas<sup>1,2</sup>, Sarah Thavyne Alencar Cabral<sup>1,2</sup>, Heloisa Mel Machado Maciel<sup>1,2</sup>, Iasmin Vasconcelos Souza Rodrigues<sup>1,2</sup>, Jair Rios Neto<sup>3</sup>, João Batista Francalino da Rocha<sup>1,2,3</sup>.

<sup>1</sup> Multidisciplinary Laboratory of Studies and Scientific Writing in Health Sciences. Rio Branco, AC, Brazil.

<sup>2</sup> Federal University of Acre. Rio Branco, AC, Brazil.

<sup>3</sup> Laboratory of Study Design and Scientific Writing. Center for Health Sciences, Federal University of Espírito Santo.

**Corresponding author:** jainydantas1@gmail.com

**Introduction:** The maternal mortality ratio, the number of female deaths in fertile age from causes associated with pregnancy, childbirth, and the puerperium per 100,000 live births, is a global indicator of the quality of women's health care. In Brazil, the main etiologies include pregnancy-specific hypertension (20%), hemorrhages (12%), puerperal infection (7%), and abortion (5%). High rates of this parameter indicate deficiencies in the provision of health services. In Acre, it is necessary to fill gaps in regional scientific knowledge and support the Sustainable Development Goals (SDGs).

**Objective:** To analyze the trend of maternal mortality in the state of Acre, from 2000 to 2023. **Method:** An ecological time-series study, with secondary data from the Mortality Information System (SIM) of the Department of Information and Informatics of the Unified Health System (DATASUS), Ministry of Health (MS) of Brazil. The analyzed outcome was the trend pattern of maternal mortality, according to Chapter XV of ICD-10 "Pregnancy, Childbirth and the Puerperium" (except codes O96 and O97), including maternal deaths classified in other ICD chapters, in women aged 10 years or more. The predictor was time (calendar year). The analysis employed the calculation of the average annual percent change (AAPC). Statistically significant results ( $p < 0.05$ ) were interpreted: positive indicating an increasing trend, negative indicating a decreasing trend. Results not significantly different from zero were interpreted as stability. The maternal mortality rate (MMR) was calculated by the ratio between the number of deaths of resident women from causes related to pregnancy, childbirth, and the puerperium, and the number of live births of resident mothers, multiplied by 100,000. The analyses were performed with Microsoft Excel 2019 and Joinpoint Regression 5.2.0 software. **Result:** In the period from 2000 to 2023, 176 maternal deaths were recorded, with an average of  $7 \pm 2$  standard deviation (SD) (95%CI: 6.30-8.37), corresponding to an MMR of 41.55 per 100,000 live births, with an average of  $45.02 \pm 15.08$  SD (95%CI: 38.65-51.38). The analysis of the temporal trend revealed a significant increase in the MMR, with an AAPC of 2.5 (95%CI: 1.13-3.87;  $p < 0.000001$ ). Mortality from direct obstetric causes represented 84.39% of cases, with an average of  $87.06\% \pm 17.89\%$  SD (95%CI: 79.51%-94.61%), while indirect non-obstetric causes corresponded to 15.61%, with an average of  $12.94\% \pm 17.89\%$  SD (95%CI: 5.39%-20.49%). The causes of death, classified according to ICD-10, were distributed as follows: O00-O08 - pregnancy with abortive outcome (10.80%); O10-O16 - edema, proteinuria and hypertensive disorders in pregnancy, childbirth and the puerperium (23.86%); O20-O29 - other maternal disorders predominantly related to pregnancy (2.84%); O30-O48 - maternal care related to the fetus and amniotic cavity and possible delivery problems (10.80%); O60-O75 - complications of labor and delivery (22.16%); O85-O92 - complications predominantly related to the puerperium (14.77%); O94-O99 - other obstetric conditions not elsewhere classified (13.64%); and A30-A49 - other bacterial diseases and B20-B24 - human immunodeficiency virus (HIV) disease (0.57% both). **Conclusion:** The temporal analysis showed an upward trend in maternal mortality, with a predominance of deaths attributed to direct obstetric causes.

**Keywords:** Maternal Mortality, Maternal Health, Causes of Death, Pregnancy, Labor.



### 119. TRENDS IN HOSPITALIZATIONS FOR DISEASES OF THE NERVOUS SYSTEM IN ACRE, BRAZIL, 2000-2023

Beatriz Queiroz de França<sup>1</sup>, Waleska do Nascimento Olivares<sup>1</sup>, Jair Rios Neto<sup>2</sup>, João Batista Francalino da Rocha<sup>1</sup>.

<sup>1</sup> Multiprofessional Hospital Residency Program in Intensive Care, Federal University of Acre. Rio Branco, AC, Brazil.

<sup>2</sup> Laboratory of Study Design and Scientific Writing. Federal University of Espírito Santo. Vitória, ES, Brazil.

**Corresponding author:** walleskaolivares@gmail.com

**Introduction:** Hospitalizations for neurological diseases represent a significant burden on health systems, with high medical and social costs associated with diagnosis, treatment, and long-term care. In Acre, it is necessary to fill gaps in regional scientific knowledge to support the Sustainable Development Goals (SDGs). **Objective:** To analyze the trend of hospitalizations for diseases of the nervous system (DNS) in the state of Acre, Brazil, from January 2008 to December 2023. **Method:** An ecological time-series analysis study, with secondary data from the Hospital Information System (SIH) of the Department of Information and Informatics of the Unified Health System (DATASUS), Ministry of Health (MS) of Brazil. The trend pattern of hospitalizations for DNS, Chapter VI, codes G00-G99 - "Diseases of the Nervous System," of ICD-10, was analyzed. For the interpretation of the trend: increasing, decreasing, or stability, the annual percent change (APC), interrupted trend, and the average annual percent change (AAPC), long-term trend, were calculated. The interpretation, when APC and AAPC are statistically different from zero ( $p < 0.05$ ), a positive value indicates increasing, if negative, decreasing, and not statistically different from zero ( $p > 0.05$ ), positive or negative, stability. To calculate the hospitalization rate for a selected cause, the number of hospitalizations of residents paid by the SUS was divided by the total resident population in the considered period multiplied by 10,000. The analyses were performed with Microsoft Excel 2019 and Joinpoint Regression 5.2.0 software. **Result:** In the period from January 2008 to December 2023, 7,817 hospitalizations for DNS were recorded, with an annual average of  $489 \pm 81$  standard deviation (SD) (95%CI 445-532), with a percent change (PC) of 18.09% and an AAPC of 2.89 (95%CI 0.31; 5.10;  $p = 0.0248$ ), indicating growth. This corresponded to a global hospitalization rate of 6.09, an average of  $6.09 \pm 0.87$  SD (95%CI 5.63-6.55), with a PC of -3.24 and an AAPC (2008-2023) of 1.33 (95%CI -1.20; 3.35;  $p = 0.2755$ ), indicating stability. The APC of the time series of the risk of hospitalizations for DNS showed two segments: from 2008-2018 (APC -2.02; 95%CI -15.88; 11.96;  $p = 0.1408$ ) and from 2018-2023 (APC 8.38; 95%CI -0.06; 30.61;  $p = 0.0520$ ). **Conclusion:** There was an increase in the absolute number of hospitalizations for DNS, but when adjusted for the population (rate), stability is observed. The segmented analysis suggests a change in the pattern from 2018, with a more pronounced increasing trend in the last years of the study period. This divergence between the absolute number (increasing) and the rate (stable) suggests that the increase in the number of hospitalizations may be more related to population growth than to a real increase in the risk of hospitalization for DNS in the population.

**Keywords:** Hospitalization, Nervous System Disease, Time Series Analysis, Morbidity.



## 120. TRENDS IN MORTALITY FROM EXTERNAL CAUSES IN ACRE, BRAZIL, 2000-2023

Eduarda Araújo e Silva<sup>1,2</sup>, Gabriele da Silva Pais de Assis<sup>1,2</sup>, Lucielia Silva Ferreira<sup>1,2</sup>, Maria Beatriz de Arruda<sup>1,2</sup>, Nicolly Rodrigues Braga<sup>1,2</sup>, Vanessa Souza da Silva<sup>1,2</sup>, Aline Bergamini Effgen Sena<sup>2</sup>, João Batista Francalino da Rocha<sup>2</sup>.

<sup>1</sup> Multiprofessional Hospital Residency Program with emphasis on Intensive Care. Federal University of Acre. Rio Branco, AC, Brazil.

<sup>2</sup> Laboratory of Study Design and Scientific Writing. Center for Health Sciences, Federal University of Espírito Santo. Vitória, ES, Brazil.

**Corresponding author:** eduarda.silva@sou.ufac.br

**Introduction:** Deaths from external/non-natural causes, accidents, and violence, although restricted to the Justice/Public Security sphere, are multisectoral, having roots in various governmental sectors, including health. Traffic accidents, homicides, and suicides account for about two-thirds of deaths from external causes in Brazil. In Acre, it is necessary to fill gaps in scientific knowledge for action in the Health sector and to support the Sustainable Development Goals (SDGs). **Objective:** To analyze the trend of mortality from external causes in Acre, from 2000 to 2023. **Method:** An ecological time-series analysis study using secondary data on external causes of mortality, Chapter XX, codes V01–Y98 of the ICD-10, from the Hospital Information System (SIH) of the Department of Information and Informatics of the Unified Health System (DATASUS), Ministry of Health (MS) of Brazil. For trend interpretation, the Annual Percent Change (APC), which indicates the interrupted trend, and the Average Annual Percent Change (AAPC), which reflects the long-term trend, were calculated. The trend was classified considering statistical significance ( $p < 0.05$ ) as increasing, decreasing, or stable. The mortality rate from external causes (MREC) was calculated by the ratio between the number of deaths of residents from external causes and the total resident population, multiplied by 100,000 inhabitants. The analyses were performed with Microsoft Excel 2019 and Joinpoint Regression 5.2.0 software. **Result:** There were 11,459 deaths from external causes, with an annual average of  $477 \pm 134$  standard deviation (SD) (95%CI 421; 534) and a percent change (PC) in the period of 84.77%. This corresponds to an MREC of 63.62/100,000 inhabitants, with an average of  $11.38 \pm 4.81$  SD (95%CI 58.81; 68.43) and a PC of 20.62%. Regarding the Major ICD-10 Group, there was a higher concentration in the assault group (X85-Y09) (44.84%), followed by transport accidents (V01-V99) (24.31%), other external causes of accidental injury (W00-X59) (18.56%), and intentional self-harm (X60-X84) (9.78%). The AAPC indicated stability (-0.22; 95%CI -1.40; 0.77;  $p = 0.62$ ). The APC revealed 3 segments: stability from 2000-2005 (-4.04; 95%CI -15.97; 1.22;  $p = 0.17$ ); increasing from 2005-2017 (4.12; 95%CI 2.53; 14.67;  $p = 0.01$ ); and decreasing from 2017 to 2023 (-5.31; 95%CI -14.82; -0.85;  $p = 0.02$ ). **Conclusion:** There was a significant increase in mortality from external causes, with a complex pattern of periods of stability, growth, and subsequent reduction. After 2017, there was a significant downward trend, which may indicate improvements in public policies for preventing deaths from external causes.

**Keywords:** External Causes, Mortality, Health Regionalization, Epidemiology.



**121. TEMPORAL TREND OF MORTALITY FROM CHRONIC NON-COMMUNICABLE DISEASES IN THE POPULATION OF ACRE, BRAZIL, 2000-2022**

Ana Clara Ferreira Asbeque<sup>1</sup>, Mauro José de Deus Morais<sup>1</sup>, Daniel Ribeiro Pinheiro<sup>1</sup>, Amanda Vitória Rodrigues dos Santos<sup>1</sup>, Francisco Naildo Cardoso Leitão<sup>1</sup>.

<sup>1</sup> Federal University of Acre. Rio Branco, AC, Brazil.

**Corresponding author:** claraasbeck@outlook.com

**Introduction:** Chronic Non-Communicable Diseases are described by various etiologies, diverse risk factors, long latency periods, and disease course. As a consequence, their evolution can result in incapacity in daily life activities and long-term functional disabilities. For the most part, they are caused by modifiable individual risk factors. They constitute approximately 74% of the causes of mortality in the world, totaling about 41 million deaths per year. **Objective:** To analyze the temporal trend of hospitalizations and hospital mortalities from chronic non-communicable diseases (NCDs) in the population of the state of Acre, Brazil, from 2000 to 2022. **Method:** An ecological study of retrospective exploratory time series analysis, with secondary data from the Hospital Information System of hospitalizations and mortalities from NCDs: chronic renal failure, diabetes mellitus, obesity, hypertensive diseases, and musculoskeletal and connective tissue diseases, covering the pre-pandemic period (2000-2019) and the years 2020 to 2022 of the COVID-19 pandemic. It covered the population of Acre from 2000 to 2022, corresponding to an annual average of 774,715 inhabitants. The object is the trend of hospitalizations and hospital mortalities. The predictor (independent) variable is the calendar year time. To analyze the trend, a segmented and non-segmented linear regression model was used, using the Joinpoint Regression Analysis program, verifying the statistical significance of lines with one or multiple inflection points. **Results:** The period totaled 42,799 hospitalizations, with an annual average of 1,861 ( $\pm 275$  standard deviations) and 1,335 hospital deaths, with an average of 58 ( $\pm 16$  standard deviations). The analysis of hospitalizations for NCDs reveals: for renal failure, an increase of 729.55%; diabetes mellitus increased by 46.13%; hypertensive diseases declined by 60.71%; and musculoskeletal and connective tissue diseases remained stable. Obesity began to be recorded from 2002, with a significant increase (2400%). The proportions of hospital mortality from NCDs revealed distinct trends for the different conditions of hospitalizations and mortality analyzed. Chronic renal failure showed a significant decline of 54.32%. Diabetes mellitus increased rates by 31.84% in the period. Hypertensive diseases exhibited a trend of stability. Musculoskeletal and connective tissue diseases showed a decline of 79.57%. For obesity, the available data are insufficient for trend analysis, with a single record of hospital mortality proportion of 4.35% in 2018. **Conclusion:** Hospitalizations for NCDs in Acre increased, especially for Renal Failure and Obesity, while mortality from Diabetes rose and that of Chronic Renal Failure decreased.

**Keywords:** chronic non-communicable diseases, mortality, public health.



## 122. CHILD MORTALITY TRENDS IN ACRE, BRAZIL, 2000-2023

Vanusa Portela Ribeiro<sup>1</sup>, Cristiane Lopes Guillen<sup>1</sup>, Moani Lopes Mendes<sup>1</sup>, Alyne Fidelis Duarte<sup>1</sup>, Jorgimar Ferreira Peres<sup>1</sup>, Iago Sales Orlandi<sup>2</sup>, João Batista Francalino da Rocha<sup>1,2</sup>.

<sup>1</sup> Integrated Multiprofessional Residency Program in Family and Community Health. Federal University of Acre. Rio Branco, AC, Brazil.

<sup>2</sup> Laboratory of Study Design and Scientific Writing. Center for Health Sciences. Federal University of Espírito Santo. Vitória, ES, Brazil.

**Corresponding author:** vanusa.ribeiro@sou.ufac.br

**Introduction:** Despite progress in reducing infant mortality (in children under 1 year of age), it is estimated that in 2022 about 4.9 million children died before reaching the age of five in the world, which is equivalent to one death every 6 seconds. Given the significant impact, it is necessary to understand the dimension of this problem in Acre, in order to support the UN's Sustainable Development Goals (SDGs). Objective: To analyze the trend of infant mortality in the state of Acre, Brazil, from 2000 to 2023. **Method:** An ecological, retrospective time-series study with secondary data from the Mortality Information System (SIM/DATASUS) of the Ministry of Health (MS) of Brazil. The trend pattern of infant mortality (< 1 year) was analyzed. For interpretation, the annual percent change (APC) and average annual percent change (AAPC) were calculated. Results statistically different from zero ( $p < 0.05$ ), if positive, indicated an increasing trend, if negative, a decreasing trend. APC and AAPC without statistical significance indicated stability. The infant mortality rate (IMR-1) was calculated by the ratio between the number of deaths of children < 1 year of age of resident mothers and the total number of live births (LB) of resident mothers, multiplied by 1,000. Analyses were performed with Microsoft Excel 2019 and Joinpoint Regression 5.2.0 software. **Result:** A total of 7,241 total infant deaths were recorded, with an annual average of  $302 \pm 55$  standard deviation (SD) (95%CI 278; 325) and a percent change (PC) of -48.32%, from 2000 to 2023. This corresponded to a global IMR-1 of 18.54 per 1,000 LB, with an average of  $18.60 \pm 3.66$  SD (95%CI 17.06; 20.15) and a PC of -45.50%. The causes of death were concentrated in conditions originating in the perinatal period (46.49%), congenital malformations, deformities and chromosomal abnormalities (14.85%), symptoms, signs and abnormal clinical and laboratory findings (9.69%), diseases of the respiratory system (8.81%), certain infectious and parasitic diseases (7.90%), and endocrine, nutritional and metabolic diseases. The AAPC of the IMR-1 indicated a decreasing trend (-2.25; 95%CI -2.86; -1.29;  $p < 0.0001$ ). The APC revealed three segments: 2000-2002, a decreasing trend (-14.99; 95%CI -19.82; -3.22;  $p < 0.0001$ ), 2002-2017, decreasing (-2.46; 95%CI -3.96; -0.67;  $p = 0.0372$ ), and 2017-2023, stability. **Conclusion:** There was a decreasing trend in infant mortality, with an intense reduction in the first years (2000-2002), followed by a period of gradual reduction (2002-2017), until reaching stabilization in recent years (2017-2023). This suggests effective health policies and interventions, with a need for renewal.

**Keywords:** Infant Mortality, Perinatal Care, Maternal and Child Health.





**123. OVERCOMING BARRIERS: THE STIGMA IN HEALTHCARE ACCESS FOR  
WOMEN WITH ABUSIVE USE OF ALCOHOL AND DRUGS**

Warlen Ribeiro da Cruz Oliveira<sup>1</sup>, Flaviane Cristina de Oliveira Ferreira Delanos<sup>2</sup>.

<sup>1</sup> Master's student in Public Health, Federal University of Espírito Santo - UFES

<sup>2</sup> Professor at Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória - EMESCAM. Vitória-ES, Brazil. PhD candidate in Public Health – UFES.

**Corresponding author:** ribeirowarlen@gmail.com

**Introduction:** The stigma associated with women who abuse alcohol and other drugs is a complex issue, influenced by numerous social and gender factors. The use of psychoactive substances by women is strongly impacted by cultural constructions and social expectations, which leads to discrimination and marginalization of these women, especially in contexts of social vulnerability. This socially constructed stigma not only hinders or imposes barriers regarding access to health services but can also affect self-esteem and the willingness to seek support among these women. **Objective:** To analyze the impacts of the stigma suffered by women who abuse alcohol and other drugs and its influence on access to health services. **Method:** This is an integrative review based on a search on the PubMed platform, using the descriptors: Stigma AND Women AND Drugs. The inclusion criteria were: free full texts, available in Portuguese and English, published in the last 5 years. Articles that, after reading the title and abstract, were not related to the theme, were literature reviews, or did not make an association with health access were excluded. **Results:** Stigma affects the treatment received, as health professionals often reproduce social prejudices, negatively impacting the quality of care for these women. The Harm Reduction approach emerges as an important alternative, by proposing less punitive and more inclusive strategies, facilitating access to necessary care and promoting a vision of comprehensive health, in addition to offering reception to this public aiming for equitable health. **Conclusion:** To confront stigma, greater awareness and training of health professionals are necessary, so that they understand the social determinants that influence the abusive use of alcohol and other drugs, especially among women, and develop less stigmatizing, less moralistic, and more inclusive care approaches. Strengthening the Harm Reduction Policy is another necessary strategy in understanding the intersections that permeate the reality of these individuals and aims for healthcare that respects the singularities and autonomy of the subjects, in addition to investments in public policies anchored in equity and social justice that offer humanized care to this public.

**Keywords:** Stigma. Women. Drugs. Health Care.



## 124. MARIJUANA USE AMONG ADOLESCENTS IN THE METROPOLITAN REGION OF VITÓRIA, ES

Getulio Sérgio Souza Pinto<sup>1</sup>, Micael Franco Alves<sup>2</sup>, Milene Diniz Paulucio<sup>3</sup>, Isaura Barros Alves Pinto<sup>3</sup>,  
Fernanda Garcia Gabira<sup>3</sup>, Carlos Augusto Lopes<sup>4</sup>, Franciéle Marabotti Costa Leite<sup>5</sup>.

<sup>1</sup> Laboratory for Studies on Health, Violence and Accidents (LAVISA)/Undersecretariat for Drug Policies of the State of Espírito Santo (SESD-SEG/ES).

<sup>2</sup> Laboratory for Studies on Health, Violence and Accidents (LAVISA)/Postgraduate Program in Public Health. Federal University of Espírito Santo, Vitória – ES, Brazil. Municipal Government of Vila Velha.

<sup>3</sup> Laboratory for Studies on Health, Violence and Accidents (LAVISA)/Postgraduate Program in Public Health. Federal University of Espírito Santo, Vitória – ES, Brazil.

<sup>4</sup> Laboratory for Studies on Health, Violence and Accidents (LAVISA)/Undersecretariat for Drug Policies of the State of Espírito Santo (SESD-SEG/ES).

<sup>5</sup> Laboratory for Studies on Health, Violence and Accidents (LAVISA)/Department of Nursing, Center for Health Sciences, Postgraduate Program in Public Health. Federal University of Espírito Santo, Vitória – ES, Brazil.

**Corresponding author:** francielemarabotti@gmail.com

**Introduction:** In adolescence, factors such as curiosity, social pressure, and the environment can stimulate drug use, with marijuana being one of the most common. It is at this stage of life that important physiological, hormonal, and behavioral changes occur in the individual, resulting in doubts and internal conflicts, which generate natural anxiety, which can contribute to drug use. Marijuana is a substance of considerably easy access and its consumption is frequently motivated by the belief that it helps to alleviate emotional issues, but its effects and impacts on health are still an unknown. It is noteworthy, however, that its use in adolescence can have deleterious results for development. **Objectives:** To identify the prevalence and characteristics of use and consumption among adolescents in the Metropolitan Region of Greater Vitória. **Methodology:** A cross-sectional, school-based epidemiological study, conducted in the Metropolitan Region of Greater Vitória, involving 63 public and private schools, with a total of 4,614 participants between 14 and 19 years old. **Results:** About 17% (95%CI: 16.5-18.7) of adolescents stated they had tried marijuana at least once in their life, with a slightly higher prevalence among girls 18.8% (95%CI: 17.3-20.4), than among boys 16% (95%CI: 14.5-17.7). The majority, 63.5% (95%CI: 60.2-66.8) used it for the first time at the age of 15 and over, followed by 35.1% (95%CI: 31.9-38.5) who were between 11 and 14 years old. Almost half of those who had ever used it say they got the substance from friends (49.5% 95%CI: 46.1-53.0). Current use of marijuana occurs for 6.7% of adolescents (95%CI: 6.0-7.4). **Conclusion:** The data reinforce the high prevalence of experimentation and current use of marijuana among adolescents and point to the naturalization of the consumption of this drug in this group. Thus, it is important to emphasize the development of preventive policies and educational actions for schoolchildren, contributing to strategies that seek to reduce drug consumption and diminish the negative impacts on the health of adolescents. Joint actions with health and education professionals should be emphasized and invested in for a better confrontation of this problem.

**Keywords:** Drugs; Marijuana Use; Adolescent Behavior; Adolescent Health.



**125. USE OF ANORECTIC MEDICATIONS AND STIMULANTS BY ADOLESCENTS: A SCHOOL-BASED STUDY IN THE METROPOLITAN REGION OF VITÓRIA**

Luíza Eduarda Portes Ribeiro<sup>1,7</sup>, Laura Fontes Silva<sup>2,7</sup>, Nathália Miguel Teixeira Santana<sup>3,7</sup>, Carlos Augusto Lopes<sup>4,7</sup>, Nathalia Borba Raposo Pereira<sup>5,7</sup>, Franciéle Marabotti Costa Leite<sup>6,7</sup>.

<sup>1</sup> PhD candidate in the Postgraduate Program in Public Health (UFES), Vila Velha, Espírito Santo, Brazil.

<sup>2</sup> Master's student in the Postgraduate Program in Public Health (UFES), Vitória, Espírito Santo, Brazil.

<sup>3</sup> PhD candidate in the Postgraduate Program in Public Health (UFES), Vitória, Espírito Santo, Brazil.

<sup>4</sup> PhD candidate in the Postgraduate Program in Social Sciences (UFES), Vitória, Espírito Santo, Brazil.

<sup>5</sup> Master's student in the Postgraduate Program in Psychology (UFES), Vitória, Espírito Santo, Brazil.

<sup>6</sup> Department of Nursing/PhD in Epidemiology, Professor of the Postgraduate Program in Public Health (UFES) and Coordinator of LAVISA, Vitória, Espírito Santo, Brazil.

<sup>7</sup> Laboratory for Studies on Violence, Health and Accidents - LAVISA

**Corresponding author:** francielemarabotti@gmail.com

**Introduction:** The use of stimulant and anorectic medications can lead to effects such as dependence, cardiovascular problems, and psychological disorders. Knowing the pattern of use is fundamental to promoting actions to prevent the inadequate use of these substances. **Objective:** To describe the use of anorectic and stimulant medications by high school students in the metropolitan region of Vitória. **Method:** A descriptive epidemiological study, with data from a survey conducted with 4,614 students from public and private schools in the Metropolitan Region of the state of Espírito Santo, between March and December 2023. The raw and relative frequencies of the data were calculated with a significance of 0.05 and the statistical program used for the analysis was Stata version 17. Ethical issues were respected. **Results:** The use of anorectics and stimulants without a medical prescription by schoolchildren was 9.3%, totaling 428 adolescents. Regarding those who had ever used them in their lifetime, a large part had access at a later age, 47.2% used for the first time at 15 years or older and 43.6% between 11 and 14 years old. In addition, almost 23% of the adolescents gained access to the medication through the offer of a family member, 22.4% reported not remembering how they got it, 19.4% claimed to have taken it secretly, and 13.6% bought it in some type of commerce. Considering the permanence of use, about 60% of the cases were not currently using the medication. **Conclusion:** Anorectics or stimulants are mostly accessed in the domestic environment, mainly after the age of fifteen, and can lead to substance dependence, in addition to severe consequences for the health of adolescents and their families, thus becoming a serious and silent public health problem.

**Keywords:** Appetite depressants, Stimulants, Adolescent Health, Inappropriate use of medications.



## 126. USE OF TRANQUILIZERS AND NARCOTICS BY HIGH SCHOOL STUDENTS IN THE METROPOLITAN REGION OF A BRAZILIAN CAPITAL

Laura Fontes Silva<sup>1,7</sup>, Luíza Eduarda Portes Ribeiro<sup>2,7</sup>, Fernanda Garcia Gabira Miguez<sup>3,7</sup>, Carlos Augusto Lopes<sup>4,7</sup>, Nathalia Borba Raposo Pereira<sup>5,7</sup>, Franciéle Marabotti Costa Leite<sup>6,7</sup>.

<sup>1</sup> Master's student in the Postgraduate Program in Public Health (UFES), Vitória, Espírito Santo, Brazil

<sup>2</sup> PhD candidate in the Postgraduate Program in Public Health (UFES), Vila Velha, Espírito Santo, Brazil.

<sup>3</sup> Post-doctoral student in the Postgraduate Program in Public Health (UFES), Vitória, Espírito Santo, Brazil.

<sup>4</sup> PhD candidate in the Postgraduate Program in Social Sciences (UFES), Vitória, Espírito Santo, Brazil.

<sup>5</sup> Master's student in the Postgraduate Program in Psychology (UFES), Vitória, Espírito Santo, Brazil.

<sup>6</sup> Department of Nursing/PhD in Epidemiology, Professor of the Postgraduate Program in Public Health (UFES) and Coordinator of LAVISA, Vitória, Espírito Santo, Brazil.

<sup>7</sup> Laboratory for Studies on Violence, Health and Accidents - LAVISA

**Corresponding author:** francielemarabotti@gmail.com

**Introduction:** Tranquilizers and narcotic drugs have the potential to cause dependence and require strict control and a medical prescription for their use. Adolescence, marked by intense discoveries, makes young people vulnerable to health risks, such as experimenting with chemical substances that can lead to inappropriate use. **Objective:** To describe the use of tranquilizers and narcotic drugs by schoolchildren in the metropolitan region of Vitória according to the frequencies and patterns of this use. **Method:** A school-based, cross-sectional study was conducted with high school students from public and private schools in the Metropolitan Region of the state of Espírito Santo, between March and December 2023. 4,614 students participated in the study. Raw and relative frequencies were calculated with a significance of 5% and the statistical program used for the analysis was Stata version 17. The study received approval from the research ethics committee. **Results:** 16.7% of adolescents reported having used tranquilizers in their lifetime without a medical prescription and almost 3% had used narcotics. The reported age of first use for both drugs was 15 years or older. Furthermore, for 35.5% of those who used tranquilizers, a family member provided the medication, and as for narcotics, the majority do not remember how they got the drug (25.4%), however, 19% stated that they took it secretly at home. The motivations for using the drugs were stress reduction, for 52.4%, and for approximately 40% the consumption was to be able to sleep. **Conclusions:** The study indicates a significant frequency of use of tranquilizers and narcotic drugs without a medical prescription by adolescent students in Espírito Santo. The evaluation of this data can support health promotion and prevention policies that direct health professionals and managers in combating the irrational use of medicines by adolescents, minimizing impacts on health and quality of life in the short and long term.

**Keywords:** Tranquilizers, Narcotics, Adolescent, Adolescent Health, Irrational use of medicines.



127. VAPORIZERS IN FOCUS: A COMPREHENSIVE ANALYSIS OF THE USE OF  
ELECTRONIC CIGARETTES

Gisele dos Santos<sup>1</sup>, Ingrid Dias de Souza<sup>1</sup>, Nádia Rodrigues Dias Ramos<sup>1</sup>, Sara Monique Gama da Silva<sup>1</sup>,  
Flaviane Cristina de Oliveira Ferreira Delanos<sup>2</sup>.

<sup>1</sup> Students at Escola Superior de Ciência da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES, Brazil.

<sup>2</sup> Professor at Escola Superior de Ciência da Santa Casa de Misericórdia de Vitória – EMESCAM. Vitória-ES, Brazil. PhD candidate in Public Health at UFES. Coordinator of the "Fact or Fake" Scientific Initiation Project.

**Corresponding author:** [ingrid.souza@edu.emescam.br](mailto:ingrid.souza@edu.emescam.br)

**Introduction:** The popularity of electronic cigarettes has increased in recent years, often seen as a safer alternative to traditional cigarettes. However, there are controversies about the benefits and risks of these devices. It is essential to clarify erroneous information and present scientific data so that users can make informed decisions about their use. **Objective:** To analyze more broadly the health impacts associated with the use of electronic cigarettes. **Method:** This research is part of the Technological Innovation Project, linked to PIBITI – IC-55, edict n°03/2023 of EMESCAM. It is a qualitative study based on an integrative literature review, with articles selected from the Virtual Health Library Brazil (BVS Brasil). **Results:** Electronic cigarettes, often promoted as a less harmful option compared to conventional cigarettes, may, in fact, contain fewer toxic substances. However, studies indicate that these devices still pose significant health risks. The vapor produced can contain toxic and carcinogenic substances, associated with respiratory and cardiovascular diseases. In addition, the presence of nicotine, which is highly addictive, perpetuates the risk of dependence, which can keep users in a cycle of tobacco addiction. Another notable risk is the possibility of explosions caused by battery failures, which can result in serious injuries to users. **Conclusion:** It is concluded that, although electronic cigarettes may be pointed out as an alternative for smokers of traditional cigarettes, they are not completely safe. The dissemination of accurate and scientifically based information is essential to combat myths and ensure that users are aware of the potential dangers. Even though they contain fewer toxins than traditional cigarettes, electronic cigarettes still represent a significant public health risk.

**Keywords:** Electronic Cigarette. Health impacts. Nicotine.



**128. SILENCED VOICES: COMBATING VIOLENCE AS A MECHANISM TO PROMOTE  
THE DIGNITY OF THE LGBTQIA+ POPULATION**

Daniela Marques Freire<sup>1</sup>, Katty Maribell Gonzales Flores<sup>1</sup>, Neuziane José de Castro Neris<sup>1</sup>, Sabrina Lamas Costa<sup>1</sup>, Paulo André Stein Messetti<sup>1</sup>, Beatriz de Barros Souza<sup>1</sup>.

<sup>1</sup> Postgraduate Program in Public Policies and Local Development/Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória – EMESCAM/Vitória/Espírito Santo/Brazil.

**Corresponding author:** daniela.freire@edu.emescam.br

**Introduction:** Gender-based violence is a complex problem that disproportionately impacts the LGBTQIA+ community, intensifying experiences of discrimination and trauma linked to sexual orientation and gender identity. In recent years, an alarming increase in violence rates against this population has been observed, demanding urgent intervention from both society and those responsible for formulating public policies to promote the gender equality provided for in the United Nations' 2030 Agenda. **Objective:** To analyze studies on violence against the LGBTQIA+ population in Brazil. **Methodology:** The summary represents a narrative literature review on violence and the LGBTQIA+ population, with articles searched in the Lilacs and Scielo databases. The Boolean operator "AND" was used in all searches along with the descriptors: violence, LGBTQIA+ population, and gender inequality. Inclusion criteria were established to select articles in Portuguese, published in the last 5 years, and that addressed the topic. 10 articles were selected, of which 2 were excluded for duplication, resulting in 8 Brazilian articles used for the research. **Results:** LGBTQIA+ individuals suffer systemic and interpersonal violence, including childhood victimization, acute and chronic abuse, and covert and overt forms of aggression throughout their lives. Intimate partner violence includes emotional abuse, psychological abuse, physical harm, sexual abuse, isolation, stalking, intimidation, and coercive control. Heteronormative violence affects the LGBTQIA+ population through the elimination of asexuals and bisexuals, the injustice of transgender individuals, and the social language that imposes rigid gender roles and norms. This manifestation highlights cultural and social intolerance in these communities, exposing a pattern of aggressions that affect the dignity and quality of life of LGBTQIA+ people. Given this reality, it is crucial to analyze and understand the dynamics of violence faced by this population, with the objective of developing strategies that promote gender equality and help resolve this issue, which are goals of the 2030 Agenda. **Conclusion:** The analysis of the literature reveals the severity of the violence faced by the LGBTQIA+ population, evidencing their suffering due to the different forms of aggression throughout their lives. In this sense, specific interventions and public policies that guarantee their rights and dignity are crucial, which are essential elements to achieve Sustainable Development Goal 5 for 2030.

**Keywords:** Gender Inequality, LGBTQIA+ Population, Violence.



**129. VULNERABILITIES FACED BY HEALTH PROFESSIONALS IN A CONTINUING EDUCATION PROCESS ON THE 2030 AGENDA IN THE AMAZON REGION: A QUALITATIVE STUDY**

Frederyk Kluyvert Ryjkaard Barbosa e Silva<sup>1</sup>, Larissa Pereira de Moura<sup>1</sup>, José Tomás Mateos Garcia<sup>2</sup>, Herleis Maria De Almeida Chagas<sup>1</sup>, Montserrat Gea Sánchez<sup>2</sup>, and Rozilaine Redi Lago<sup>1</sup>.

<sup>1</sup> Federal University of Acre, Rio Branco, Acre, Brazil

<sup>2</sup> University of Lleida, Lleida, Spain

**Corresponding author:** frederyk.silva@sou.ufac.br

**Introduction:** Social vulnerability results from the negative combination of an individual's or group's lack of material or symbolic resources and the absence of access to social, economic, and cultural opportunities. The 2030 Agenda, with its 17 Sustainable Development Goals, seeks to address these inequalities, promoting intersectoral actions and public policies that reach vulnerable populations. The residents of the Western Brazilian Amazon have historically faced multiple vulnerabilities, deepened by inter-regional inequities. **Objective:** To understand the approach to social vulnerability within the scope of a continuing education action in the Western Brazilian Amazon. **Method:** This is an exploratory-descriptive case study, with a qualitative approach, using the dimensions of vulnerability in the context of a training course aimed at the internalization of the Sustainable Development Goals of the 2030 Agenda. The data sources were documents derived from the project and interviews with the course participants. The qualitative data analysis was performed through Thematic Analysis, from the perspective of the theory of Dimensions of Vulnerability proposed by Ayres, using the Atlas.ti software to organize and visually represent the data. The study obtained approval from the research ethics committee of the Federal University of Acre (opinion no. 6,737,797 and CAAE: 76675223.3.1001.5010). **Results:** 25 course participants were interviewed, including managers, nurses, and technicians working in the Western Amazon. The vulnerability of health professionals during a continuing education action was influenced by several factors, including work overload, difficulties in agenda management, lack of human, financial, and structural resources, natural disasters, professional turnover, unstable internet connection, and power outages. The course included the creation of health intervention projects by the participants, evidencing the programmatic vulnerability faced by the professionals. In addition, it highlighted aspects of social and individual vulnerability that affect both the professionals and the assisted community. **Final considerations:** The study observed how the vulnerability experienced by the population also impacted the qualification of health professionals in the Western Amazon, during a continuing education project. Furthermore, it promoted reflections on the importance of considering these local vulnerabilities to improve access to health services. Understanding the lived scenario and clarifying the challenges faced is essential to support decisions and strengthen public policies in this region, aiming to mitigate socio-environmental vulnerability and improve the conditions of the health services offered to the population.

**Keywords:** Sustainable Development; Continuing Education; Public Health.



**130. THE USE OF NEW TECHNOLOGIES IN EPIDEMIOLOGICAL SURVEILLANCE  
SYSTEMS: PROMOTING TRANSPARENCY AND JUSTICE IN EPIDEMIC CONTROL  
IN ALIGNMENT WITH SDG 16**

Amanda Calzi Roldi<sup>1</sup>, Lyvia Elena Klawa Cau<sup>2</sup>, Geovanna Vermelho da Silva<sup>2</sup>, Luana Marques Ribeiro<sup>1</sup>, Fabiana Rosa Neves Smiderle<sup>3</sup>.

<sup>1</sup> Master's student in the Public Policies and Local Development Program - Emescam, Vitória, Espírito Santo, Brazil

<sup>2</sup> Undergraduate student of the Nursing Course - EMESCAM, Vitória, Espírito Santo, Brazil

<sup>3</sup> Professor of the Master's Program in Public Policies and Local Development - Emescam, Vitória, Espírito Santo, Brazil

**Corresponding author:** amanda.roldi@edu.emescam.br

**Introduction:** The digital transformation in health enhances epidemiological surveillance with technologies to monitor and control epidemics. Aligned with SDG 16, the importance of transparency and justice is highlighted, facilitating the collection and analysis of real-time data for rapid responses to disease outbreaks. **Objective:** To identify new technologies in epidemiological surveillance and how they promote transparency and justice in epidemic control, aligned with SDG 16. **Method:** An integrative review was conducted, with searches on the Pubmed, Scielo, and VHL platforms, with the following descriptors and Boolean operators: ("Epidemiology" OR "Public Health Surveillance") AND ("Artificial Intelligence" OR "Big Data" OR "Information Technology") AND ("Equity" OR "Social Justice" OR "Privacy" OR "Transparency"). The inclusion criteria used were: full text and publications in the last 5 years, in English, Spanish, and Portuguese. **Results:** 195 articles were found, with 15 on Pubmed, 0 on Scielo, and 180 on VHL, of which 15 were selected to compose this study after applying the previously established inclusion criteria. The research identified that technologies such as Artificial Intelligence (AI), Big Data, Blockchain, and participatory surveillance enhance epidemiological surveillance, promoting transparency and justice in epidemic control. Big Data refers to the analysis of large volumes of data to identify patterns and optimize resource allocation. Blockchain is a technology that records information in a decentralized and secure manner, ensuring data transparency and integrity. AI allows for real-time screening and monitoring. However, challenges such as algorithmic bias, digital exclusion, and privacy need to be overcome. **Conclusion:** Digitalization enhances epidemiological surveillance with AI, Big Data, and Blockchain, promoting transparency and justice in epidemic control, aligned with SDG 16. Big Data optimizes resources, Blockchain ensures data integrity, and AI facilitates monitoring; however, inclusive policies are important to overcome bias, digital exclusion, and protect privacy.

**Keywords:** Epidemiology. Artificial Intelligence. Medical Informatics. Health Equity. Sustainable Development.





### 131. CHARACTERIZATION OF BEAN CONSUMPTION IN THE ADULT POPULATION OF THE SOUTHEAST REGION ACCORDING TO VIGITEL 2023

Gleicilene Lima Alves Peixoto<sup>1,2</sup>, Romeu Paulo Martin Silva<sup>2</sup>, Luiz Carlos de Abreu<sup>1-3</sup>, Tamires dos Santos Vieira<sup>1,2</sup>.

<sup>1</sup> Laboratory of Scientific Writing, Federal University of Espírito Santo, Espírito Santo, Brazil.

<sup>2</sup> Postgraduate Program in Nutrition and Health, Federal University of Espírito Santo, Espírito Santo, Brazil.

<sup>3</sup> Department of Integrated Health Education, Federal University of Espírito Santo, Espírito Santo, Brazil, Adjunct Professor. University of Limerick, Ireland; COVID-19 Observatory Brazil and Ireland.

**Corresponding author:** tamiresvieiraalim@gmail.com

**Introduction:** Constant changes in the economy, food and nutrition policies, and food processing can affect the consumption of dietary macronutrients and their quality. Data from national surveys and inquiries show a decline in bean consumption by the Brazilian population. **Objective:** To analyze the frequency of bean consumption, socioeconomic level, eating habits, and nutritional status in the adult population of the Southeast region. **Method:** The VIGITEL 2023 survey consists of a probabilistic cluster sample, collected between December 26, 2022, and April 24, 2023, organized by the Ministry of Health. The first sampling was carried out through a draw of 64,000 telephone lines (44,000 landlines and 20,000 mobile lines). The sampling for the southeast region presented 9,167 eligible lines and 3,231 interviews conducted. The selected variables were categorized and tabulated in spreadsheets, and the sample weight was considered for the calculations. The IBM SPSS STATISTICS ® software, version 25.0.00, was used. **Results:** The capital city of Belo Horizonte consumed the most beans every day (59.20%). The male sex (44.70%) and the age group of 50 years or older (44.10%) had the highest daily consumption. In addition, the 18 to 29 age group (42.40%) was the second category that consumed the most beans every day. Individuals classified as underweight for BMI were the group that consumed beans daily (52%). Individuals who self-declared as black and brown were those who had the highest daily consumption (49.10% and 45.60%, respectively). Another point observed is that for individuals with less than 12 years of schooling, daily bean consumption was 48.30%, people who do not work 45.90%, and single people 43.30%. **Conclusion:** The analysis showed that bean consumption is predominant among low-income families, highlighting its essential role in the diet of many Brazilian families. Given the transformations in eating patterns over the years, the Dietary Guidelines for the Brazilian Population reinforces the importance of prioritizing minimally processed foods, which is crucial for health promotion and food security. This guidance is also aligned with the Sustainable Development Goals (SDGs), especially goals 1 (No Poverty), 2 (Zero Hunger and Sustainable Agriculture), 10 (Reduced Inequalities), and 12 (Responsible Consumption and Production), promoting healthy and sustainable eating practices for society.

**Keywords:** Food consumption. Dietary patterns. Food traditions. Population survey.



### 132. ANALYSIS OF THE PROFESSIONAL PROFILE OF HEALTH WORKERS IN THE MUNICIPALITY OF CRATO

Fabília Franklin Do Nascimento<sup>1</sup>, Maria Sofia de Melo Feitosa<sup>1</sup>, Raissa Geovana De Barros<sup>1</sup>, Rayane de Souza Silva<sup>1</sup>, Sumaya da Silva Lima<sup>1</sup>, Olívia de Almeida Duarte<sup>1</sup>.

<sup>1</sup> Regional University of Cariri, Crato, Ceará, Brazil

**Corresponding author:** Fabricia.franklin21@urca.br

**Introduction:** The study "Profile of health professionals with COVID-19 in the municipality of Crato, Ceará" examines the incidence of the disease among essential workers, widely exposed to the virus in the exercise of their functions. Data from IntegraSUS indicate that nursing technicians and assistants were the most affected, with 123 cases, followed by nurses (109) and doctors (70), which highlights the vulnerability of these groups on the front line. In the analysis by age group and sex, women between 35 and 39 years old stand out, with 117 cases, and men between 25 and 29 years old, with 39 cases, reflecting possible exposure patterns. Additionally, the registration of two deaths, one doctor and one community agent, underlines the severity of the impact of COVID-19 on this group. This data provides a crucial basis for substantiating more effective protection strategies, contributing to the health and safety of professionals and strengthening the local health system's response to future health emergencies.

**Objective:** To analyze the number of COVID-19 cases among health professionals in the municipality of Crato, in the state of Ceará (CE). **Method:** This is a descriptive study based on secondary data. Data on deaths and confirmed cases by age and sex were analyzed, with a focus on distributions by age group to identify the groups most affected by COVID-19. **Results:** Among health professionals, in terms of confirmed cases, a higher preponderance was found among young women, especially in the age groups of 35 to 39 years, 30 to 34 years, and 25 to 29 years, with 117, 109, and 104 cases, respectively. Male professionals also had cases, but in smaller numbers in the same age groups. Regarding the data obtained, the occurrence of two deaths in male individuals was observed. These deaths were distributed in the age groups of 60 to 64 years and 75 to 79 years, indicating the presence of cases in different age groups among the analyzed men. **Conclusion:** Health professionals are one of the most vulnerable populations to infection, partly due to constant and direct exposure to patient infection. The analysis of the profile of these workers showed that factors such as age, comorbidities, and the use of PPE affect the risk of infection and negative symptoms. The psychological impact, marked by indicators such as stress, anxiety, and physical exhaustion, was also significant. This data highlights the importance of strong prevention strategies, which should ensure accessibility to PPE, training, and psychological support. Any policy that protects workers from diseases and health services is important, especially because it guarantees the quality and continuity of health services in times of pandemic.

**Keywords:** COVID-19, Health Professionals, deaths, Sex, age group.



**133. ROLE OF PUBLIC POLICIES IN THE ENVIRONMENT OF INSTITUTIONALIZED  
ELDERLY PEOPLE IN LONG-STAY INSTITUTIONS: AN INTEGRATIVE REVIEW  
STUDY**

Carolina Perciliana Ribeiro<sup>1</sup>, Fabiana Rosa Neves Smirdele<sup>2</sup>, Alan Patrício da Silva<sup>2</sup>.

<sup>1</sup> Master's student of the Public Policies and Local Development Program - Emescam, Vitória, Espírito Santo, Brazil

<sup>2</sup> Professor of the Master's Program in Public Policies and Local Development - Emescam, Vitória, Espírito Santo, Brazil

**Corresponding author:** carolina.ribeiro@edu.emescam.br

**Introduction:** The life expectancy of the world population has increased. The forecast for 2050 is about 1.6 billion people in the world over 65 years old. The population increase leads to the need for reflection on the State's position as a provider of Social Rights, questioning the role of society, as well as Public Policies, in the environment of the institutionalized elderly in LSIs. **Objective:** To map studies that solidify the participatory presence of the State in relation to Elderly Care Institutions. **Method:** This is an integrative review study in which searches were carried out in the PubMed, Lilacs, and SciELO databases, using the following operators: “Aged OR Elderly” AND “Homes for the Aged OR Housing for the Elderly” AND “Humans Right”. The guiding question of this review was "What is the role of Public Policies in the Environment of the Institutionalized Elderly in LSIs?". From 202 initially identified studies, 24 were selected, and 6 were included in the review: three qualitative studies, two studies mediated by interviews, and one cross-sectional study. The analyzed publications were published from 2013 to 2024. The studies were conducted in the United States of America, England, India, Sweden, Norway, and Brazil. **Results:** The following points are noted: a) environmental factors that negatively influence the well-being of the institutionalized elderly; b) non-inclusive policies affect social well-being, so that the institutionalized elderly do not feel included in society; c) alarming consequences on the physical and mental health of the elderly. It was also identified that the World Health Organization (WHO) emphasized that elder abuse was the least addressed topic in governmental action plans when compared to other forms of interpersonal violence. **Conclusion:** It is the duty of the State to develop Public Policies for the inclusion of elderly people residing in long-stay institutions, in interaction with society, as well as their security in the residential environment.

**Keywords:** Rights of the Elderly, Human Rights, State.



### 134. DIGITAL EXCLUSION IN HEALTHCARE ACCESS: CHALLENGES AND PERSPECTIVES FOR PROMOTING EQUITY IN THE CONTEXT OF SDG 3

Amanda Calzi Roldi<sup>1</sup>, Lyvia Elena Klawka Cau<sup>2</sup>, Geovanna Vermelho da Silva<sup>2</sup>, Andréia Barboza Pastor<sup>1</sup>, Fabiana Rosa Neves Smiderle<sup>3</sup>.

<sup>1</sup> Master's student in the Public Policies and Local Development Program - Emescam, Vitória, Espírito Santo, Brazil

<sup>2</sup> Undergraduate student of the Nursing Course - EMESCAM, Vitória, Espírito Santo, Brazil

<sup>3</sup> Professor of the Master's Program in Public Policies and Local Development - Emescam, Vitória, Espírito Santo, Brazil

**Corresponding author:** amanda.roldi@edu.emescam.br

**Introduction:** Digital exclusion, characterized by inequality in access to and use of digital technologies, directly affects the health sector. Technological advancement makes the internet and digital devices important for social and economic inclusion and access to services. However, this exclusion affects vulnerable groups, such as the elderly, low-income individuals, and residents of rural areas, increasing existing inequalities. In the context of health, the lack of access to technologies, such as telemedicine and electronic health records, prevents equity in care. In addition, privacy and personal data protection emerge as fundamental ethical issues. **Objective:** To investigate how digital exclusion compromises equitable access to digital health services, analyzing the barriers faced by vulnerable populations. **Method:** This study is a narrative literature review, where searches were conducted in the Medline and Lilacs databases, using descriptors such as "digital exclusion," "health technologies," and "data protection." Studies discussing the relationship between digital exclusion and access to health were analyzed, with a focus on the ethical implications and current gaps in public policies. **Results:** Digital exclusion widens inequalities in access to digital health among vulnerable groups. The lack of technological infrastructure and digital literacy prevents the effective use of services like telemedicine. The lack of understanding about data protection also leaves these groups exposed to privacy risks. **Conclusion:** Public policies for digital inclusion in health are important to ensure equity. In addition to infrastructure, it is necessary to invest in digital literacy programs, with a focus on marginalized populations. This promotes universal access to health, in accordance with Sustainable Development Goal 3, which aims for health and well-being for all.

**Keywords:** Ethics. Digital health. Human Rights. Sustainable Development.



### 135. GOTA DE VIDA APP: TECHNOLOGY AS A TOOL FOR ATTRACTING AND RETAINING BLOOD DONORS

Alvarenga, Giulyana.<sup>1</sup>; Arruda, Tainan.<sup>1</sup>; Oliveira, Rafael.<sup>1</sup>; Alvarenga, Fábio.<sup>1</sup>.

<sup>1</sup> Capixaba Institute of Teaching, Research and Innovation in Health, ICEPi, Vitória, Brazil.

**Corresponding author:** tainanarruda@saude.es.gov.br

**Introduction:** There is a shortage of blood donors in Espírito Santo. As a consequence, blood centers end up facing prolonged periods of operating at a critical level, which, in turn, affects the supply for those at the other end: the patients who need the blood. Blood is a resource with a short shelf life, so there is a constant need for new donations. Its importance should not be underestimated, as blood transfusions are necessary in various types of surgeries. Thus, blood centers resort to devices such as press releases to call for donors, campaigns, telephone contact, among other strategies. But although these practices are generally sufficient for a specific solution to the problem, they are not enough to guarantee the recurrence of donation. Given the challenges, the project proposes the incorporation of technology to encourage blood donation in Espírito Santo, through the Gota de Vida application.

**Objective:** The application is intended for the general population, with the aim of facilitating access to the services of the public blood network, retaining the blood donor to the blood center – donor retention is important mainly for two reasons: first, the replenishment of blood banks periodically; and second, the increase in the transfusional safety factor, since the individual who makes recurrent donations has the safest profile among the different types of donors, as they adopt a healthier lifestyle to help those in need. In addition, the application assists the work of the blood network employees and supports health managers, mainly by strengthening the service by providing another channel of communication and information to the user. **Results:** The main innovations brought by Gota de Vida are linked to the process of digital transformation of the services offered by the Capixaba public blood network, acting in the recruitment and retention of donors to the blood network. From the application, the user can check if they are a suitable candidate to donate blood, in an intuitive and facilitated way. The application's fitness test does not replace the screening carried out at the blood center, but it foresees impediments that facilitate the donor's planning and gives them access to a countdown that informs the best date of possible fitness, according to the type of impediment. **Conclusion:** The application speeds up access to information, facilitates user service, promotes interaction between the hemotherapy community, and also guarantees another platform for recruiting new donors.

**Keywords:** Blood donation, Health technology, Transfusional safety.



### 136. MENTAL HEALTH: A PUBLIC HEALTH ISSUE

Daiane Marcelle Rêis dos Santos Zava<sup>1</sup>, Paulo André Stein Messetti<sup>2</sup>.

<sup>1</sup> Student of the Academic Master's Program in Public Policies and Local Development - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brazil

<sup>2</sup> Academic Master's Program in Public Policies and Local Development - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brazil

**Corresponding author:** daiane.zava@edu.emescam.br

**Introduction:** Before the pandemic, mental health was already a notable public health problem, such that mental health conditions are related to the increase in suicide and work disability, due to the worsening of the clinical picture and lack of correct follow-up. The Pan American Health Organization states that people with severe mental health conditions die on average 10 to 20 years earlier than the general population. An alert and an important point for why we should talk about this subject. **Objective:** The objective of this study is to identify the importance of discussing mental health as a public health issue. **Method:** This is a reflective review research substantiated by relevant literature on the topic from nationally and internationally published articles and books. Such a method allows for greater detail on the subject to be studied, ensuring greater knowledge about public policies surrounding mental health. **Results:** Mental health cannot and should not be treated in isolation; mental health is a set of various factors, having a biopsychosocial characteristic, being subject to changes by external conditions of the environment in which the citizen is inserted. The right to health includes mental health care, being a duty of the State. In Brazil, mental health policy is guided by the principles of deinstitutionalization and the preservation of human rights. With the commitment to address mental health globally, the United Nations elevates mental health as a priority of the global organization for development, and the inclusion of mental health in the goals of the Sustainable Development Goals is notable. However, there is a growing evolution of mental illness in the population, which is observed in the younger population and among the elderly. **Conclusion:** Many advances are perceived, but the worsening of the health situation indicates that it is necessary to advance on the issue in question. Breaking the prejudice, guaranteeing spaces for speech about the disease, and its acceptance are excellent tools for progress. The mental health assistance network is and must be thought of in terms of prevention, avoiding the user needing hospitalization, which involves the understanding that psychiatric hospitalization is not the solution as a rule.

**Keywords:** Covid-19, Global Health Strategies. Mental Health, Unified Health System.



**137. KERATOCONUS AND VULNERABILITY: CHALLENGES FOR HEALTH AND  
CITIZENSHIP FROM THE PERSPECTIVE OF SDG 3**

Stefania Schimith Bergher<sup>1</sup>, Paulo André Stein Messetti<sup>2</sup>.

<sup>1</sup> Student of the Academic Master's Program in Public Policies and Local Development - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brazil

<sup>2</sup> Academic Master's Program in Public Policies and Local Development - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brazil

**Corresponding author:** stefaniasb@hotmail.com

**Introduction:** Keratoconus is a chronic-degenerative disease that affects the cornea, the transparent structure of the eye, resulting in high diopters and interfering with the patient's quality of vision. In some cases, it can incapacitate the individual from performing their daily activities. The disease usually manifests in the first decades of life, a period of physical, cognitive, and psychosocial development for young people. This process of illness is characterized by a slow evolution, which often goes unnoticed by both the individual and the family. At this moment, the patient faces, for the first time, the challenges imposed by the disability and the limiting obstacles associated with it. **Objective:** This study aims to analyze the individual vulnerability of the keratoconus patient and the limitations they face. **Method:** This is an integrative literature review, with searches conducted in the SCIELO, MEDLINE, and LILACS databases. The analysis focuses on the relationship between keratoconus and vulnerability, also considering the social context of rights, public policies, and access to health. **Results:** The detailed analysis of the findings revealed the social vulnerability of the keratoconus patient due to the gradual and incapacitating evolution of their health condition. However, a scarcity of comprehensive scientific literature that addresses the proposed themes and the limitations associated with the disease, as well as its social consequences, was revealed, leaving room for new research that also evaluates the development of public policies to guarantee the citizenship rights of these patients. **Conclusion:** The study promotes a reflection on the vulnerability of keratoconus patients and the difficulties faced in ensuring health and well-being, in line with the objectives of SDG 3, which provide for a better quality of life, with an emphasis on equity, dignity, and justice for all.

**Keywords:** keratoconus, citizenship, public policy, health vulnerability.



**138. THE ALLOCATION OF FINANCIAL RESOURCES DURING COVID-19 IN THE MUNICIPALITY OF PRESIDENTE KENNEDY, ESPÍRITO SANTO, BRAZIL**

Alice Alves de Oliveira<sup>1</sup>, Paulo André Stein Messetti<sup>2</sup>.

<sup>1</sup> Student of the Academic Master's Program in Public Policies and Local Development - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brazil

<sup>2</sup> Academic Master's Program in Public Policies and Local Development - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brazil

**Introduction:** The COVID-19 pandemic marked world history at the end of 2019, with the arrival of the new virus that spread in several states of Brazil, and in the south of the state of Espírito Santo it was no different. The pandemic brought both economic and social imbalance. Thus, the public health system in the municipality of Presidente Kennedy developed actions and reorganized its structure, and had to review the financial application of oil royalties, which has the Municipal Health Fund as its source of resources. This allocation of resources during the COVID-19 pandemic was of extreme importance to the studied municipality. **Objective:** To describe the applicability of financial resources by the Municipal Health Secretariat of Presidente Kennedy-ES, observing the actions, programs, and contingency plan to combat COVID-19, analyzing the respective transfers from the State government and the total Municipal expenses. **Method:** This is a quantitative observational research based on the review of secondary databases, public documents of free access, notably financial documents available on the Transparency portal of the studied municipality, emergency contracts, and contracts by waiver of bidding. **Results:** When analyzing the financial documents on the municipal free access Transparency portal, it was observed that about 4% of the resources spent by the municipality of Presidente Kennedy on the occasion were, of those administered by the Municipal Health Fund, carried out through emergency contracts and waivers of bidding. It is worth noting that the Government of the State of ES established an emergency financial support in the State Co-financing in the 2020 fiscal year, intended to cover the eventual benefits granted by the municipalities. For Presidente Kennedy, the conceived value was R\$ 90,000.00. However, the transferred amount was not sufficient to cover all expenses during this episode, so the municipality had to resort to the source of resources and financial income from oil royalties. **Conclusion:** The municipality of Presidente Kennedy-ES went through the pandemic using financial income from oil royalties. As it is a relevant topic, this requires further research to deepen the analysis of the use of economic-financial resources before, during, and after the COVID-19 pandemic.

**Keywords:** Health resource allocation; COVID-19, Health investments.





### 139. DIGITAL EXCLUSION IN HEALTHCARE ACCESS: CHALLENGES AND PERSPECTIVES FOR PROMOTING EQUITY IN THE CONTEXT OF SDG 3

Amanda Calzi Roldi<sup>1</sup>, Lyvia Elena Klawa Cau<sup>2</sup>, Geovanna Vermelho da Silva<sup>2</sup>, Andréia Barboza Pastor<sup>1</sup>, Fabiana Rosa Neves Smiderle<sup>3</sup>.

<sup>1</sup> Mestranda do Programa de Mestrado Políticas Públicas e Desenvolvimento Local- Emescam, Vitória, Espírito Santo, Brasil

<sup>2</sup> Discente do Curso de Graduação em Enfermagem- EMESCAM, Vitória, Espírito Santo, Brasil

<sup>3</sup> Docente do Programa de Mestrado em Políticas Públicas e Desenvolvimento Local-Emescam, Vitória, Espírito Santo, Brasil

**Corresponding author:** amanda.roldi@edu.emescam.br

**Introduction:** Digital exclusion, characterized by inequality in access to and use of digital technologies, directly affects the health sector. Technological advancement makes the internet and digital devices important for social and economic inclusion and access to services. However, this exclusion affects vulnerable groups, such as the elderly, low-income individuals, and residents of rural areas, increasing existing inequalities. In the context of health, the lack of access to technologies, such as telemedicine and electronic health records, prevents equity in care. In addition, privacy and personal data protection emerge as fundamental ethical issues. **Objective:** To investigate how digital exclusion compromises equitable access to digital health services, analyzing the barriers faced by vulnerable populations. **Method:** This study is a narrative literature review, where searches were conducted in the Medline and Lilacs databases, using descriptors such as "digital exclusion," "health technologies," and "data protection." Studies discussing the relationship between digital exclusion and access to health were analyzed, with a focus on the ethical implications and current gaps in public policies. **Results:** Digital exclusion widens inequalities in access to digital health among vulnerable groups. The lack of technological infrastructure and digital literacy prevents the effective use of services like telemedicine. The lack of understanding about data protection also leaves these groups exposed to privacy risks. **Conclusion:** Public policies for digital inclusion in health are important to ensure equity. In addition to infrastructure, it is necessary to invest in digital literacy programs, with a focus on marginalized populations. This promotes universal access to health, in accordance with Sustainable Development Goal 3, which aims for health and well-being for all.

**Keywords:** Ethics. Digital health. Human Rights. Sustainable Development.



**140. GOTA DE VIDA APP: TECHNOLOGY AS A TOOL FOR ATTRACTING AND  
RETAINING BLOOD DONORS**

Alvarenga, Giulyana.<sup>1</sup>; Arruda, Tainan.<sup>1</sup>; Oliveira, Rafael.<sup>1</sup>; Alvarenga, Fábio.<sup>1</sup>

<sup>1</sup> Instituto Capixabade Ensino, Pesquisae Inovação em Saúde, ICEPi, Vitória, Brasil.

**Corresponding author:** tainanarruda@saude.es.gov.br

**Introduction:** There is a shortage of blood donors in Espírito Santo. As a consequence, blood centers end up facing prolonged periods of operating at a critical level, which, in turn, affects the supply for those at the other end: the patients who need the blood. Blood is a resource with a short shelf life, so there is a constant need for new donations. Its importance should not be underestimated, as blood transfusions are necessary in various types of surgeries. Thus, blood centers resort to devices such as press releases to call for donors, campaigns, telephone contact, among other strategies. But although these practices are generally sufficient for a specific solution to the problem, they are not enough to guarantee the recurrence of donation. Given the challenges, the project proposes the incorporation of technology to encourage blood donation in Espírito Santo, through the Gota de Vida application.

**Objective:** The application is intended for the general population, with the aim of facilitating access to the services of the public blood network, retaining the blood donor to the blood center – donor retention is important mainly for two reasons: first, the replenishment of blood banks periodically; and second, the increase in the transfusional safety factor, since the individual who makes recurrent donations has the safest profile among the different types of donors, as they adopt a healthier lifestyle to help those in need. In addition, the application assists the work of the blood network employees and supports health managers, mainly by strengthening the service by providing another channel of communication and information to the user. **Results:** The main innovations brought by Gota de Vida are linked to the process of digital transformation of the services offered by the Capixaba public blood network, acting in the recruitment and retention of donors to the blood network. From the application, the user can check if they are a suitable candidate to donate blood, in an intuitive and facilitated way. The application's fitness test does not replace the screening carried out at the blood center, but it foresees impediments that facilitate the donor's planning and gives them access to a countdown that informs the best date of possible fitness, according to the type of impediment. **Conclusion:** The application speeds up access to information, facilitates user service, promotes interaction between the hemotherapy community, and also guarantees another platform for recruiting new donors.

**Keywords:** Blood donation, Health technology, Transfusional safety.



#### 141. MENTAL HEALTH: A PUBLIC HEALTH ISSUE

Daiane Marcelle Rêis dos SantosZava<sup>1</sup>, Paulo André Stein Messetti<sup>2</sup>

<sup>1</sup> Discente do Programa de Mestrado Acadêmico em Políticas Públicas e Desenvolvimento Local - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brasil

<sup>2</sup> Programa de Mestrado Acadêmico em Políticas Públicas e Desenvolvimento Local - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brasil

**Corresponding author:** daiane.zava@edu.emescam.br

**Introduction:** Before the pandemic, mental health was already a notable public health problem, such that mental health conditions are related to the increase in suicide and work disability, due to the worsening of the clinical picture and lack of correct follow-up. The Pan American Health Organization states that people with severe mental health conditions die on average 10 to 20 years earlier than the general population. An alert and an important point for why we should talk about this subject. **Objective:** The objective of this study is to identify the importance of discussing mental health as a public health issue. **Method:** This is a reflective review research substantiated by relevant literature on the topic from nationally and internationally published articles and books. Such a method allows for greater detail on the subject to be studied, ensuring greater knowledge about public policies surrounding mental health. **Results:** Mental health cannot and should not be treated in isolation; mental health is a set of various factors, having a biopsychosocial characteristic, being subject to changes by external conditions of the environment in which the citizen is inserted. The right to health includes mental health care, being a duty of the State. In Brazil, mental health policy is guided by the principles of deinstitutionalization and the preservation of human rights. With the commitment to address mental health globally, the United Nations elevates mental health as a priority of the global organization for development, and the inclusion of mental health in the goals of the Sustainable Development Goals is notable. Contudo, há crescente evolução do adoecimento mental da população, o que se observa na população mais jovem e entre idosos. **Conclusion:** Many advances are perceived, the worsening of the health situation indicates that it is necessary to advance on the issue in question. Breaking the prejudice, guaranteeing spaces for speech about the disease and its acceptance are excellent tools for progress. The mental health assistance network is and must be thought of in prevention, avoiding that the user needs hospitalization, which involves the understanding that psychiatric hospitalization is not the solution as a rule.

**Keywords:** Covid- 19, Global Health Strategies. Mental Health, Unified Health System.



**142. KERATOCONUS AND VULNERABILITY: CHALLENGES FOR HEALTH AND  
CITIZENSHIP FROM THE PERSPECTIVE OF SDG 3**

Stefania Schimith Bergher<sup>1</sup>, Paulo André Stein Messetti<sup>2</sup>

<sup>1</sup> Discente do Programa de Mestrado Acadêmico em Políticas Públicas e Desenvolvimento Local - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brasil

<sup>2</sup> Programa de Mestrado Acadêmico em Políticas Públicas e Desenvolvimento Local - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brasil

**Corresponding author:** stefaniasb@hotmail.com

**Introduction:** Keratoconus is a chronic-degenerative disease that affects the cornea, the transparent structure of the eye, resulting in high diopters and interfering with the quality of vision of the patient. In some cases, it can incapacitate the individual for the realization of his daily activities. The disease usually manifests itself in the first decades of life, a period of physical, cognitive and psychosocial development of young people. This process of illness is characterized by a slow evolution, which often goes unnoticed by both the individual and the family. At this moment, the patient faces, for the first time, the challenges imposed by the disability and the limiting obstacles associated with it. **Objective:** The present study aims to analyze the individual vulnerability of the keratoconus carrier and the limitations faced by him. **Method:** This is an integrative literature review, with searches carried out in the SCIELO, MEDLINE and LILACS databases. The analysis focuses on the relationship between keratoconus and vulnerability, also considering the social context of rights, public policies and access to health. **Results:** The detailed analysis of the findings revealed that there is social vulnerability of the keratoconus carrier due to the gradual and disabling evolution of the health condition. It was revealed, however, a scarcity of comprehensive scientific literature that deals with the proposed themes and the limitations associated with the disease, as well as its social consequences, with room for new research that also evaluates the development of public policies to guarantee the rights of citizenship of these patients. **Conclusion:** The study promotes a reflection on the vulnerability of keratoconus carriers and the difficulties faced to ensure health and well-being, in line with the objectives of SDG 3, which provide a better quality of life, with an emphasis on equity, dignity and justice for all.

**Keywords:** keratoconus, citizenship, public policy, vulnerability in health.



**143. THE ALLOCATION OF FINANCIAL RESOURCES DURING COVID-19 IN THE  
MUNICIPALITY OF PRESIDENTE KENNEDY – ES, BRAZIL**

Alice Alves de Oliveira<sup>1</sup>, Paulo André Stein Messetti<sup>2</sup>

<sup>1</sup> Discente do Programa de Mestrado Acadêmico em Políticas Públicas e Desenvolvimento Local - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brasil

<sup>2</sup> Programa de Mestrado Acadêmico em Políticas Públicas e Desenvolvimento Local - Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória, Vitória, Espírito Santo, Brasil

**Introduction:** The COVID-19 pandemic marked world history at the end of 2019, with the arrival of the new virus that spread in several states of Brazil, and in the south of the state of Espírito Santo it was no different. The pandemic brought both economic and social imbalance. Thus, the public health system in the municipality of Presidente Kennedy developed actions and reorganized its structure, and had to review the financial application of oil royalties, which has the Municipal Health Fund as its source of resources. This allocation of resources during the COVID-19 pandemic was of extreme importance to the studied municipality. **Objectives:** To describe the applicability of financial resources by the Municipal Health Secretariat of Presidente Kennedy-ES, observing the actions, programs and contingency plan to combat COVID-19, analyzing the respective transfers from the State government and the total of Municipal expenses. **Method:** This is a quantitative observational research based on the review of secondary databases, of public documents of free access, notably financial documents available on the Transparency portal of the municipality studied, emergency contracts and contracts by waiver of bidding. **Results:** When analyzing the financial documents on the free access municipal Transparency portal, it was observed that about 4% of the resources spent by the municipality of Presidente Kennedy on the occasion were, of those administered by the Municipal Health Fund, carried out through emergency contracts and waivers of bidding. It is worth noting that the Government of the State of ES established an emergency financial support in the State Co-financing in the 2020 fiscal year, intended to cover the eventual benefits granted by the municipalities. For Presidente Kennedy, the value conceived was R\$ 90,000.00. However, the amount transferred was not enough to cover all expenses during this episode, so the municipality had to resort to the source of resources and financial income from oil royalties. **Conclusion:** The municipality of Presidente Kennedy-ES went through the pandemic using financial income from oil royalties. As it is a relevant topic, this requires a deeper research to analyze the use of economic-financial resources before, during and after the COVID-19 pandemic.

**Keywords:** Allocation of resources in health; COVID-19, Investments in health.