

The made and imposed changes

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The Cartesian model in Health area establishes specific kinds for care assistance process. Three aspects should be considered when the assistance care subject is analyzed based on Cartesian paradigm: the world and the human being perceived as machines, the dualism body and mind and the rationalistic method.

Thus, to take care of the human being as a machine and to perceive it considering the duality body and mind means to potentiate his parts in detriment of the assistance care considering the whole. On the other hand, in this world view, only the rationalistic method is valid and considered as scientific for interpreting reality, which must be objective, tangible and quantifiable and this hindered the professional, the understanding of the disturbances that were out of the biological level.

The discoveries of the electric and magnetic phenomena in the Nineteenth Century and the Relativity and Quantum Theory in the Twentieth Century evidenced the limitations of this Cartesian model.

A "new" human being and world view started to permeate the different fields of the science and among them the Health area that begun to consider the context, the manners of living healthy or ill, as well as the different ways for health attendance. It is the case, for instance, of the adoption in Brazil, as National Policy, the Integrated and Complimentary Health Practices in the Health Unique System,

instituted by the Health Ministry Act 971-May 2006.

The Health Policy recommends the implantation and implementation of actions and services in the Public Health Services with the purpose of preventing damages, for health promotion and recovering, empathizing in the basic attention, proposing the continuity of the humanized and integral assistance health care. It is certainly an inclusionary Health Policy as it contributes, among other aspects, to the system resolutivity, sustainability and social participation.

To insert Integrated and Complimentary Health Practices in health services means to guarantee the right of therapeutic option for all citizens.

However, to build new kinds for health attendance implicates in the need of formation of human resources capable to guarantee the constant transformation, instead of the immutableness of the assistance model, which can be at the same time: safe, practical, effective, efficient and capable of privileging an appropriate relationship among the several knowledge based on different presupposition.

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