Introduction: The integration of mental health (MH) in primary care (PC) is the main guarantee of access to good practices in MH. Although widely recommended for decades, there are few models of effective integration of MH in PC. In 2008 the Brazilian Ministry of Health created the Core of Support for the Family Health Strategy (NASF), to be the responsible for the integration of MH in PC. This study aims understanding the PC manager’s perspective about the integration of MH in PC, their visions about the NASF and their suggestions to improve this model of integrated care. Based on results we will present recommendations to improve NASF’s model of integration MH in PC.

Method: Qualitative research, exploratory and analytical descriptive study. We conducted 10 semi-structured interviews with PC managers, in the metropolitan region of Sao Paulo. We worked with the concept of intentional sampling, using as a criterion for choosing the extreme or deviant cases. We used the Framework Analysis methodological approach, a method of content analysis.

Results: The interviewees considered that there are more barriers than facilitators for the integration of MH in PC. The barriers and facilitators presented were related to the social context, organizational factors, and personal component of the PC staff. Managers’ shows not have clarity about how implement their ideas about integration of MH in PC and about the scope of the interventions of MH in PC. The NASF is still unable to promote the integrated care in managers perception.

Conclusions: The biggest difficulty is not to create a policy of integration of MH in PC, but its implementation. It is recommended to improve
the NASF work process and to research about the nature and feasibility of matrix support in the context of PC.

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