

So, what are we really talking about when we approach integrality?

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*In vain, I look out for you through the Earth,
close to the sky, upon the sea.
If you don't come even in a dream,
why do I insist in imagining you?*

Cecília Meireles

The lack of definition about what would be "integrality" is at the same time a fragility and a potentiality. We can say that integrality is not just a guideline of the National Health System as defined in the constitution. It is a fight flag, a part of the objective image in an statement of such characteristics of the health system, of its institutions and of its practices that are considered desirable by someone. Yet, the subjective image is highlighted as a beaconing element in the health system joined to the ideology of desire, full of feelings, emotion and motivation to the collective construction in the defense of health⁽¹⁾.

The Health Organic Law has established the fundamentals of the National Health System, as based on the article 198 of the Federal Constitution. One of them is the integrality "[...] understood as an articulated and continuous set of preventive and healing actions and services for individuals and population, required for each step in all levels of complexity of the system". In such way, this principle seeks to assure the user an attention which includes actions of promotion, prevention, treatment, and rehabilitation⁽²⁾.

The reflections developed by health care researchers point that other meanings can be added to those, amplifying the conception of integrality. So, three great sense groups for integrality relate to: a) practice attribute of health care professionals, including the values connected to what is defined as a good practice, not only to what is under in the National Health System; b) service organization attributes and c) government response to health problems can be highlighted⁽¹⁾.

In the perspective of integrality, it is possible to affirm, then, that the health production process says about, necessarily, to a collective and cooperative work between subjects, and it is done in a relational network that requires interaction and permanent dialogue. The care, in this relational network, as it is permeated by asymmetries of knowing and power, is a major and imperative demand in health care work and, specially, in Nursing care.

We emphasize that the more conscious and more capable we are the more we will be announcers and denouncers face the commitment we assumed allowing to unveil the reality, looking for to unmask its myth and to reach full completion of human work with transforming actions of reality to make people free.

The integrality replaces the work sense in health and in Nursing in the re-constitution of humanity of the people when facing their health needs. From this perspective, health work rescues its ontological sense, because integral attention in health is focused toward the necessities of the man as a subject of existential production and not as an object of capital accumulation⁽³⁾. In another words, integrality supposes the care of the other in his suffering, not only his illness process.

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