

JABOATÃO DOS GUARARAPES LGBT OUTPATIENT CLINIC: BUILDING PATHS TO STRENGTHEN UNIVERSALITY, INTEGRALITY AND EQUITY

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Abstract: The Unified Health System (SUS) has equity, universality and integrality as doctrinal principles. However, it is known that the difficult access to health by certain minorities, such as the LGBTQIAP+ community, is a very evident reality. In order to strengthen and implement the principles of the SUS, combat prejudice and offer an effective service for the demands of these users, it is necessary to create specialized health services such as the LGBT Ambulatory, founded in the municipality of Jaboatão dos Guararapes - EP, for example. In this perspective, this article presents an account of the experience based on the theoretical principles of the systematization of experiences proposed by Holliday. The experiences stem from the activities of an extension project that integrates the Academic League of Family and Community Health, from a medical course, carried out at the LGBT clinic in Jaboatão dos Guararapes. **Keywords:** Unified Health System. LGBTQIAP+ community. Diversity.

INTRODUCTION

Through the Brazilian Federal Constitution, health has become an inherent right for all individuals, regardless of race, color or gender and nationality, as a result of the struggle waged by the Health Reform movement (NEGREIROS et al., 2019). With the creation of the Brazilian Unified Health System, the SUS, it was noticed that, gradually, policies to promote equity gained meaning, as they are based on a minimization of the vulnerabilities suffered by some population groups, such as the LGBTQIAP+ population (lesbians, gay, bisexual, transvestite, transgender, transgender, queer, intersex, agender, asexual, pansexual and more), victims of prejudice and discrimination throughout history.

This reverberates in the care suffered by these individuals in health services (Basic

Health Units, Emergency Care Units and Hospitals), since, according to studies, the characteristics of this care include the non-humanization of the patient, discrimination regarding their preferences and the resistance to sexual diversity on the part of health professionals, due to the fact that they have difficulties in working with what they do not consider common (MORAIS NETO, 2020).

This way, it is evident that medical training needs special attention to the specific knowledge of the complaints of the LGBTQIA+ population, and it is therefore necessary that the doctrinal principles of the SUS are applied in the promotion of the health of this target audience from the teaching in health. of this theme in the country's medical schools. However, unfortunately, this does not happen in a universal and equitable way in the current way, and the lack of disclosure and lack of knowledge of the social body are aggravating topics of the problem in question. (MORAIS NETO, 2020).

Historically, advances have been made through an expressive struggle for this group, which can be seen through the creation of the National Policy for the Comprehensive Health of Lesbians, Gays, Bisexuals, Transvestites and Transsexuals (LGBT), in 2011, through the Ministry of Health. However, this achievement was not an easy task, as it was only from 1980 onwards that health issues aimed at this public received visibility through the creation of strategies to face the HIV/AIDS epidemic, which contributed, in a certain way, to for the recognition of the existing effects of discrimination and suppression aimed at the health-disease process of the LGBTQIAP+ population (PRADO; SOUSA, 2017).

To gradually change this scenario, the creation of specialized outpatient clinics for the LGBTQIA+ population was an extremely significant milestone, the first of which was built in the city of São Paulo, inaugurated by the

State Coordination DST/Aids-SP in June 2009 (GIANNA, 2011). The state of Pernambuco, soon after, also started to offer support to this population group by announcing the creation of the first outpatient clinic specialized in the care of transvestites and transsexuals during the I State Seminar on Health of the LGBT Population, in August 2012. services provided in specialized outpatient clinics involve a multidisciplinary team composed of urologists, proctologists, endocrinologists, psychologists and social workers, in addition to carrying out evaluations and referrals for implantation of silicone prostheses, sex reassignment surgeries, qualified listening, rapid tests, indication of hormone therapy and offering of treatment for Sexually Transmitted Infections (GIANNA, 2011).

Health care at the LGBTQIA+ Outpatient Clinic is comprehensive, either through counseling on self-care practices or through the adoption of measures regarding the adverse effects of indiscriminate hormone therapy (GIANNA; MARTINS; SHIMA, 2018). The counseling exposed is not the only one that aims to guarantee the health and well-being of the patient, because in the clinics there is organized psychological care for the treatment of this socially excluded group, since there are several stigmas and psychosocial abuses suffered by them. Therefore, the psychic suffering arising from the feeling of inadequacy to the social space, minimized through this action. It becomes evident, then, that in these places, patients feel more welcomed and accepted than in Family Health Units (USF) and Basic Health Units (UBS), and thus make care with the health a habit, always seeking multidisciplinary follow-up in outpatient units (GIANNA, 2011).

As a result of some advances for the LGBTQIA+ population, the LGBT Outpatient Clinic in Jaboatão dos Guararapes aims to meet the health needs of this public,

specifically. We know that, as they are a socially excluded minority, these citizens need attention, respect and integration into the Public Health System. Although it was only implemented on August 17, 2020, this clinic has been changing the reality of the municipality and that of users, being the gateway to health monitoring and prevention for people who were previously invisible to society.

From this perspective, the understanding that the performance and recognition of health professionals regarding care for the LGBTQIAP+ public must start from the academic graduation is highlighted. To this end, the Academic League of Family and Community Health of Faculdade Tiradentes (LASFC-FITS) started, still in 2020, a partnership with the team of the LGBT clinic in Jaboatão dos Guararapes-PE, with the aim of promoting the environment as a field of practice for your internships. Such a partnership constitutes a direct contribution to the training of future health professionals, providing the linker with greater knowledge about the LGBTQIAP+ policy. In this context, in addition to accompanying the outpatient team in consultations, reception and work process of the service, the LASFC-FITS linkers also participate in virtual debates, triggering the roles of moderators of the discussions, surrounded by themes related to the LGBTQIAP+ policy.

Given the above, the project aimed to emphasize humanized and dignified care for the LGBTQIAP+ population through outpatient clinics aimed at this group. Therefore, the time has come to guarantee, not only in the texts of the 1988 Citizen Constitution, but also in the guidelines that govern the SUS, in the LGBT Policy Manual, for example, an egalitarian and fair service and follow-up to all citizens, rich or poor, white or black, male or female, LGBT or not.

The Equity Principle presupposes that people placed in different situations are treated unequally according to their inequality in order to receive a decent contribution. Accordingly, the objective of the present work is to report the experience lived by an extension project that integrates the Academic League of Family and Community Health in the LGBT clinic in Jaboatão dos Guararapes, promoted by a higher education institution of a medical course.

MATERIALS AND METHODS

The experience took place at the LGBT Ambulatory of Jaboatão dos Guararapes-PE, as well as on social networks. To record the experiences, field diaries of students, minutes of meetings between LASFC-FITS components and with service professionals and academic report of the project were used.

This is a reflection reported through the prism of the principles of systematization of experiences, founded by Oscar Jara, in view of the experiences of academic activities carried out in the extension project: "LGBT Ambulatory of Jaboatão dos Guararapes: building paths to strengthen universality, integrality and equity", promoted by the Academic League of Family and Community Health of the Tiradentes College of Jaboatão dos Guararapes medical course. The experiences were systematized according to the moments of the method, namely: "The starting point; opening questions; recovery of the lived process; background reflection and arrival points" (HOLLIDAY, 2006).

RESULT AND DISCUSSION / THE REPORT

THE STARTING POINT

In theoretical activities of LASFC-FITS, which made it possible to learn about the theme exposed in the present work, the impact of the creation of specialized outpatient clinics for

the LGBTQIA+ population on the social body was perceptible, thus arousing the interest of the members of the League in understanding and experience the reality of such a group, thus being able to obtain enrichment in terms of personal and academic experience. This way, the starting point was built and consolidated in the LGBT Outpatient Clinic of Jaboatão dos Guararapes, a service chosen mainly because it is included in the state of Pernambuco, which is a national reference in terms of health care for the LGBTQIA+ population (DE LIMA et al., 2019).

INITIAL QUESTIONS

Initial questions were raised to reach the common denominator of structuring and approach used during the Project. Initially, the importance of the LGBT Ambulatory of Jaboatão dos Guararapes in promoting health for service users was emphasized, with a common desire to understand its particularities and, with that, identify proposals for actions and interventions. Another aspect also considered is the lack of information regarding social rights, struggle, prejudice and discrimination against such a minority, alerting us, therefore, to the urgency of knowledge about health policies, as well as their role in transforming the social context.

Pernambuco is a national reference in terms of health care for the LGBTQIA+ population (DE LIMA et al., 2019), so we identified the possibility of service users benefiting and impacting through the participation of LASFC-FITS members in medical care, according to the supervision of the service doctor, for example. Such consultations were of great importance for strengthening the clinic, as there are still limitations regarding the resources available for the implementation of the office. This approach was included in the Project's action schedule.

RECOVERY OF THE EXPERIENCED PROCESS

The project took place at the LGBT Outpatient Clinic in Jaboatão dos Guararapes, on the initiative of the Academic League of Family and Community Health. The Ambulatory was opened in 2020, with a multiprofessional team in the health area to accommodate spontaneous demand, according to the schedules established for each specialty.

At first, the theoretical study of health policies was necessary for the extension workers to start their activities. The studies were in the form of conversation and debate circles, guided by the National Policy for the Comprehensive Health of Lesbians, Gays, Bisexuals, Transvestites and Transsexuals.

To strengthen theoretical knowledge, practical activities began with the extension workers scheduled on different days under the supervision of a doctor from the service. The consultations and direct contact with the public provided greater care, empathy, attention and respect in communication as future health professionals, in addition to observing demands for the outpatient clinic.

It was also observed the performance of the multiprofessional team regarding the understanding of the service user as an individual with psychic issues to be taken care of, as there is a feeling, on the part of some users, of questioning between their biological and anatomical gender, in addition to the social issues such as the prejudice and rejection by the family and by the social body. Thus, the students were able to understand, within ethical limits, about medical/patient confidentiality and about the importance of psychological monitoring for self -acceptance and insertion of the individual in society, which is something to be sought by a large part of this socially excluded minority as a right to be present in the world, enjoying it exactly as

it is (GIANNA; MARTINS; SHIMA, 2018).

The recent beginning of the LGBT Outpatient Clinic limited the broad knowledge of the unit, so LASFC-FITS, in partnership with the service team, promoted the dissemination of the service on the academic league's social networks. The contents ranged from information about the LGBTQIA + Policy to the location, hours and services provided at the LGBT clinic in Jabotão dos Guararapes, expanding communication between professionals and the target audience.

Finally, in view of the observed and experienced demands, there was a need to draw a profile of users and record such information, for the organization and planning of the service. Outpatient records were re-registered, which made it possible to have profile data on users and the service. The user registration was updated through the Google Forms virtual platform and, in addition, the students scanned the forms, which were previously manual, thus allowing a better organization of the service in question. With the users' profile, and the service itself, it was possible to provide information to assist in the work process and structuring of the outpatient's actions. The records could be evaluated with better criteria, and, with this, more possibilities regarding assertiveness in the planning of the service were possible, envisioning the recommended comprehensive health care at the LGBTQIA+ Outpatient Clinic (GIANNA; MARTINS; SHIMA, 2018).

THE BACKGROUND REFLECTION

There are many interpretations that can be constructed when an event is observed in retrospect. Regarding the impacts and contribution to the development of the assisted public, it is clear that this service user population was benefited and impacted in different ways through the actions carried

out inside and outside the space by the project members. An example of this was what happened through the consultations, which enabled targeted and qualified attention to the service user, since he had at his disposal students and professionals who were actively studying the theme and demands of users, such as the process of hormone treatment, Sexually Transmitted Infections, combined prevention, risks of industrial silicone, among others.

In addition, by observing the details, it was verified how relevant it is to treat the health of the LGBTQIA+ community with a singular look. Thus, given the complexity of the situation of this population, this experience contributed to their health needs being met in a qualified way, respecting not only their intrinsic characteristics, but also reflecting on the consequences of the representations and meanings that fall on their sexual practices and ways of life (LIONÇO, 2008). Therefore, it becomes clear the importance of understanding the gaps and possibilities of the approach offered by professionals involved in health care and management, for the construction of adequate care for the LGBTQIA+ population in the services, thus guaranteeing the full exercise of the citizenship of this population, as well as making visible the ideologies and the real scenario in relation to health care.

THE POINTS AND ARRIVAL

In view of what students experience in this constructive process, it is clear that a very important gain was the "out of the comfort zone" from the moment when "the other", the different, the equal emerged before us. There were many life stories, difficulties and overcoming challenges, on both sides. And this is also a reflection of the entire physical structure and receptivity that we find in this welcoming place.

In this context, historically, LGBTQIA+ are considered a socially excluded minority, according to sociology, however, the creation and opportunity for part of this population to be assisted in an outpatient clinic with professionals prepared to recognize both their individualities and subjectivities, as well as the problems faced, is something unspeakable.

In the meantime, as reaffirmed by the SUS Equity Principle, which presupposes that people placed in different situations are treated unequally, we observe in practice what this very important principle reaffirms.

Despite Brazil being an emerging, unequal country and also being in the ranking of the countries that kill the most LGBTQIA+ population, we had great examples of professionals from the LGBT clinic in Jaboatão dos Guararapes who need to be followed. Health professionals who actually wear the shirt of reception, equality, respect and empathy for others. This experience made it quite evident the need for a qualified multidisciplinary team to welcome, monitor and integrate such a group and that the academic training of these professionals is a big step in the construction of these subjects. We observe that all work needs to be done together, in partnership, with affection and respect.

FINAL CONSIDERATIONS

Finally, it is evident that the existing limitation regarding the assistance of the LGBTQIA+ population in the public health system in Brazil is the result of a historical prejudice, which reverberates in the little knowledge among health professionals about the LGBTQIA+ policy or about how to promote health actions. for that population. Therefore, to change this situation, it is extremely important to understand and discuss Public Health and LGBT health care

models in Brazil, with a view to implementing the principle of universality in practice.

The lack of specific knowledge and skills among medical professionals related to the LGBTQIA+ public directly affects the reception and execution of health actions aimed at this public. With this, the silence on issues related to the health of LGBTQIA+ people is strengthened, moving them away from conditions in integral, equitable and universal health. Therefore, it is necessary to consider that the transformation of the health network for better care for LGBTQIA+ people also depends on the transformation of the way of thinking and behavior of health professionals, as cultural issues under the influence of heterosexual norms subjectively affect care of health professionals to this population (PAULINO, 2019).

In view of this, the aforementioned extension project, as well as the activities developed by the students in the municipality, were carried out with the objective of providing the creation of a support network and strengthening the accessibility to quality health services for this public. Also, the project helped in the process of health education both for professionals working at the LGBT Outpatient Clinic in Jaboatão dos Guararapes and for the students involved, who became multipliers of knowledge and information. The group's performance, in short, worked as a health promotion tool, aiming to reduce the main persistent problems in the LGBTQIA+ population and prevention campaigns.

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