

# Speech-language pathology services in primary health care in the Federal District: overview from 2018 to 2022

## *Fonoaudiologia na Atenção Primária à Saúde no Distrito Federal*

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### Abstract

**Introduction:** The inclusion of speech therapists in Primary Health Care (PHC) helps in the early detection of disorders, in addition to contributing to collective health promotion actions, reducing the flow to secondary care and optimizing the organization of the health system. **Purpose:** to quantify speech-therapy services registered in PHC at the Secretary of Health from the Federal District (SES-DF) between the years 2018 and 2022. **Methods:** this is an ecological study, with consultation of a database of public domain and analysis of the number of speech-therapy services in PHC registered in the SES-DF by Health Region (HR) and by health agency. **Results:** 17,054 speech-therapy services were registered in PHC at the SES-DF between 2018 and 2022, with the majority being registered in the Southwestern HR. Only 38 (17.6%) of the 216 primary health care agencies that appeared in the accessed database registered speech therapy consultations in PHC between 2018 and 2022. There was an average growth rate of 22.75% of consultations in four years, with a drop between the years 2020 and 2022. **Conclusion:** a reduced growth rate of speech-therapy services in PHC in the Federal District was observed in the period evaluated, with these often concentrated in specific primary health care units, limiting the population's access to these professionals and making it difficult the organization of the health system into care networks, according to their complexity.

**Keywords:** language and hearing sciences; Unified Health System; health information systems; primary health care.

### Resumo

**Introdução:** A inserção do fonoaudiólogo na Atenção Primária à Saúde (APS) auxilia na detecção precoce de alterações, além de contribuir para as ações coletivas de promoção de saúde, diminuindo o fluxo para a atenção secundária e favorecendo a otimização da organização do sistema de saúde.

**Objetivo:** Descrever a taxa de variação da quantidade de consultas fonoaudiológicas registradas na APS na Secretaria de Saúde do Distrito Federal (SES-DF) entre os anos de 2018 e 2022. **Métodos:** Trata-se de um estudo do tipo ecológico, com consulta a banco de dados de domínio público e análise do quantitativo de consultas fonoaudiológicas na APS registradas na SES-DF por Região de Saúde (RS) e por estabelecimento de saúde. Foi realizada análise estatística descritiva a partir da variação proporcional percentual do período investigado. **Resultados:** foram registradas 17.054 consultas fonoaudiológicas na APS na SES-DF entre 2018 e 2022, tendo a maioria sido registrada na Região de Saúde (RS) Sudoeste. Apenas 38 (17,6%) dos 216 estabelecimentos de saúde de atenção primária que constavam no banco de dados acessado registraram consultas fonoaudiológicas na APS entre 2018 e 2022. Houve uma taxa de crescimento média de 22,75% de consultas em quatro anos, com queda entre os anos de 2020 e 2022. **Conclusão:** observou-se reduzida taxa de crescimento de atendimentos fonoaudiológicos na APS no Distrito Federal no período avaliado, sendo esses muitas vezes concentrados em UBS específicas, limitando o acesso da população a esses profissionais e dificultando a organização do sistema de saúde em redes de atenção, conforme a sua complexidade.

**Palavras-chave:** fonoaudiologia; Sistema Único de Saúde; sistemas de informação em saúde; atenção primária à saúde

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## Introduction

The Unified Health System (Sistema Único de Saúde - SUS) encompasses a set of actions and services rendered by public federal, state and municipal agencies and institutions, and it is grounded in the provision of egalitarian and universal access, apart from integral services in order to meet the constitutional right of health as a duty of the State<sup>1</sup>.

In the SUS, Primary Health Care (PHC) must ground every care, addressing collective problems at different levels, contemplating the biopsychosocial aspects of the individual, with actions aiming , ultimately, at the health promotion and disease prevention<sup>2</sup>. Therefore, work performed in the PHC is fundamental for the diverse healthcare areas, as it promotes health, prevents disease and reduces waiting time at other levels of the healthcare services to the extent that it collaborates to solve several health complaints by the users.

In that sense, speech therapists' job in the PHC contributes, among other aspects, to prevent unnecessary patient referral to higher complexity health care services.

Speech therapy is still a relatively new Science and requires larger promotion about its fields of work at all levels of health care in the SUS. Thus, it is necessary to discuss about speech therapists' larger inclusion and work in the PHC.

Speech therapists began working in the public service between 1970 and 1980, with services exclusively aiming at individuals' rehabilitation. With the Constitution being enacted and the definition of the SUS<sup>1</sup>, those professionals started to be hired by means of public contest by State Secretaries of Health, thus beginning the inclusion of the Speech Therapy in the Primary Health Care<sup>3</sup>.

Speech therapists' inclusion in the Primary Health Care was expanded in 2008 with the creation of the Family Health Support Centers (Núcleos de Apoio à Saúde da Família - NASF)<sup>4,5</sup>, currently named Expanded Centers of Family Health and Primary Care (Núcleos Ampliados de Saúde da Família e Atenção Básica - NASF-AB)<sup>6</sup>. Speech therapists' actions in the Primary Health Care encompass, among others, the identification of risks for communication disorders, design of therapeutic projects, matrix support, implementation of educational or therapeutic groups, specific services of assessment and screening, referral, continuing education of other health professionals, and sequencing of care within the health care networks<sup>7</sup>.

Despite the importance of the Speech Therapy in the Health Care, it is still insipient, and there are scarce previous studies to define the best distribution and professional allocation, according to the needs of each territory. Thus, it is observed that the distribution of these professionals within SUS is not logical in some regions<sup>8</sup>, apart from the deficit in the provision of this service in the PHC throughout the country, which affects integral care supply in a negative way<sup>9</sup>.

Currently, with the expanded concept of health, and considering the significance of human communication for the integral development of individuals, the importance of the speech therapist in the PHC stands out<sup>10</sup>. In spite of that, in a study<sup>11</sup> conducted in Sergipe State, Brazil, the authors verified increased rate in registers of medium complexity speech-therapy services between 2012 and 2021. That is to say, there was a prevalence of clinical procedures and diagnoses. Further studies are necessary to assess the rate of change of speech-therapy services in the different levels of complexity in SUS in other regions of the country as well.

Therefore, the current study aimed to describe the rate of change in the amount of speech-therapy services registered in the PHC at the Secretary of Health from the Federal District (SES-DF) between 2018 and 2022.

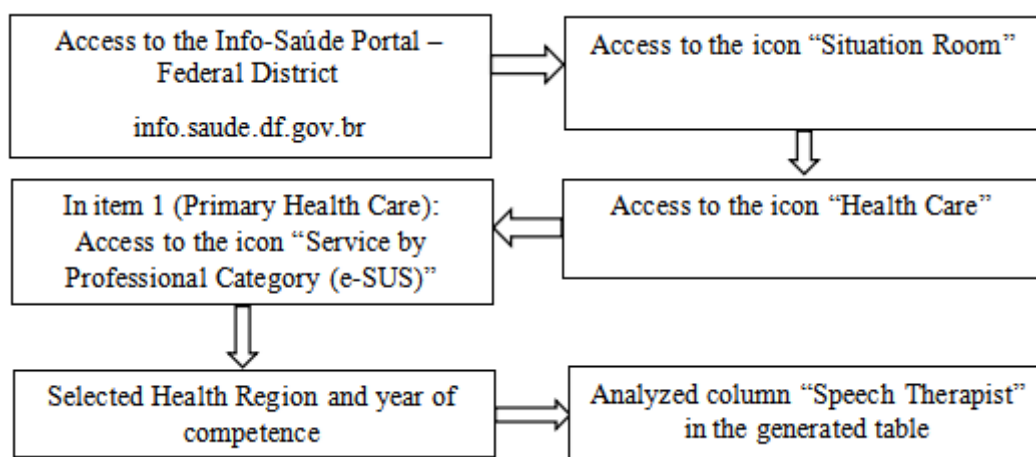
## Materials and Methods

It is an ecological study, search in the database of public domain and analysis of the amount of speech-therapy services within the PHC, registered in the Secretary

of Health, Federal District by Health Region, and by Health Care facility between 2018 and 2022.

Data collection was held in January 2023 by search in the database of the Situation Room, available at the Info Saúde-DF portal<sup>12</sup>, SES-DF. Information on Health Care was accessed in the item of Primary Health Care and sub-item Service for Professional Category (e-SUS) (Figure 1). The access is free and made available to the citizens without login or password.

**Figure 1** - Flowchart of the search in the InfoSaúde Portal – Federal District



Source: the authors of the study

The amount of procedures by health care institution and region was tabulated in Excel spreadsheet, with the descriptive analysis of the data, and analysis of the proportional, percentage change during the investigated period.

## Results

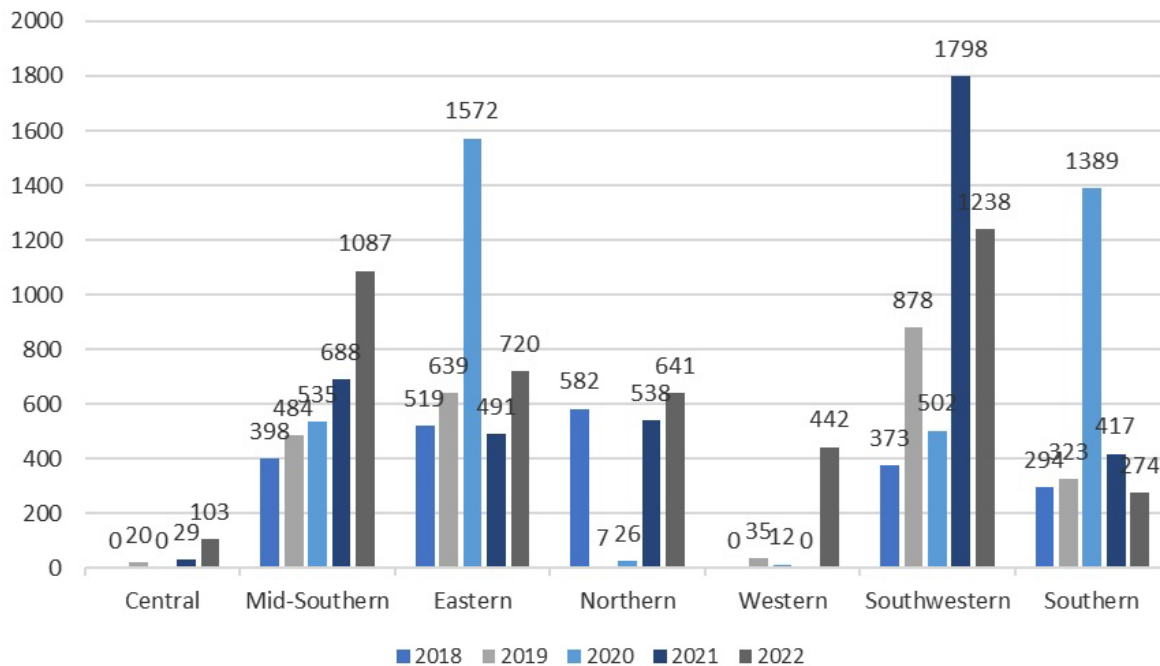
The Health Regions (HRs) from the Federal District are divided as follows<sup>13</sup>: Central HR (Asa Sul, Asa Norte, Cruzeiro, Lago Norte, Varjão and Vila Planalto), Mid-Southern HR (Candangolândia, Estrutural, Guará, Park Way, Núcleo Bandeirante, Riacho Fundo I, Riacho Fundo II, Setor de Indústria e Abastecimento - SIA e Setor

Complementar de Indústria e Abastecimento - SCIA), Northern HR (Planaltina, Sobradinho, Sobradinho II and Fercal), Southern HR (Gama and Santa Maria), Eastern HR (Paranoá, Itapoã, São Sebastião, Jardim Botânico and Jardins Mangueiral), Western HR (Brazlândia and Ceilândia), Southwestern HR (Águas Claras, Recanto das Emas, Samambaia, Taguatinga and Vicente Pires).

Between 2018 and 2022, 17,054 speech-therapy appointments were registered in the PHC at the SES-DF. Regarding the total amount by HR in this period, 152 speech-therapy appointments were verified in the Central HR, 3192 in the Mid-Southern HR, 3941 in the Eastern HR, 1794 in the Northern HR,, 489 in the

Western HR, 4789 in the Southwestern HR, and 2697 in the Southern HR (Figure 2).

**Figure 2** - Number of speech-therapy services rendered in the PHC/SES-DF by Health Region between 2018 and 2022



Source: the authors of the study

The speech-therapy appointments registered in the Southwestern HR accounted for 28.08% of the total amount between 2018 and 2022. As for the Central HR, it has the lowest number of registers for this type of appointment, accounting for only 0.90% of the total amount in the same period, followed by the Western HR, whose registers between 2018 and 2022 accounted for only 2.89% of the total amount.

Only 38 (17.6%) of 216 primary health care centers, included in the table

accessed in the Info Saúde-DF Portal<sup>12</sup>, registered speech-therapy appointments in the PHC between 2018 and 2022. The health care facility that most registered that kind of appointment between 2018 and 2022 was the Primary Health Care Unit (Unidade Básica de Saúde - UBS) 1 from Taguatinga (Federal District), and the facility with the lowest registers was the UBS 6 from Planaltina, Federal District (Table 1).

**Table 1** - Number of speech-therapy services registered in the Primary Health Care from the Federal District by Region and Health Care Facility in the period 2018-2022

<b>Speech-therapy services in the primary health care from the Federal District</b>							
<b>Health Regions</b>	<b>Health Care Agencies</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>Total</b>
<b>Central</b>	UBS 1 – Asa Sul	0	0	0	29	103	132
	HRAN	0	20	0	0	0	20
<b>Mid-Southern</b>	UBS 5 – Riacho Fundo II	0	0	0	0	76	76
	UBS 1 – Riacho Fundo II	292	353	257	423	569	1894
	UBS 1 – Núcleo Bandeirante	0	0	0	0	57	57
	UBS 1 - Estrutural	100	131	278	265	385	1159
<b>Eastern</b>	UBS 9 – São Sebastião	0	0	116	201	307	624
	UBS 6 – São Sebastião	0	0	3	11	2	16
	UBS 4 – São Sebastião	0	0	0	0	6	6
	UBS 2 – São Sebastião	0	0	0	0	3	3
	UBS 19 – São Sebastião	0	0	0	0	19	19
	UBS 12 – São Sebastião	0	0	23	13	19	55
	UBS 11 – São Sebastião	0	0	35	5	23	63
	UBS 10 – São Sebastião	0	0	17	35	29	81
	UBS 1 – São Sebastião	122	280	16	0	0	418
	UBS 1 - Paranoá	0	0	0	0	1	1
	UBS 1 – Jardins Mangueiral	0	0	0	87	309	396
<b>Northern</b>	UBS 1 - Itapoã	392	359	1362	122	0	2235
	UBS 7 - Planaltina	0	0	0	0	4	4
	UBS 6 - Planaltina	0	0	0	0	3	3
	UBS 5 – Sobradinho II	38	7	0	0	0	45
	UBS 5 - Planaltina	0	0	0	0	43	43
	UBS 4 - Planaltina	544	88	26	538	550	1746
	UBS 2 - Planaltina	0	0	0	0	41	41
<b>Western</b>	UBS 8 - Ceilândia	0	35	12	0	295	342
	UBS 16 - Ceilândia	0	0	0	0	147	147
<b>Southwestern</b>	UBS 6 - Samambaia	0	0	5	274	0	279
	UBS 5 - Taguatinga	0	0	0	0	200	200
	UBS 5 - Samambaia	0	0	0	2	180	182
	UBS 4 – Recanto das Emas	143	97	1	108	20	369
	UBS 3 - Samambaia	0	0	26	0	0	26
	UBS 2 - Taguatinga	0	0	42	815	113	970
	UBS 2 - Samambaia	34	0	0	108	212	354
	UBS 2 – Recanto das Emas	14	0	0	0	0	14
<b>Southern</b>	UBS 1 - Taguatinga	166	693	420	491	513	2283
	UBS 6 - Gama	294	229	582	258	226	1589
	UBS 1 – Santa Maria	0	94	805	159	0	1058
	UBS 1 – Gama	0	0	0	0	48	48
<b>Total</b>		2166	2386	4036	3961	4503	17.052

Caption: DF=Federal District; UBS=Primary Health Care Unit; HRAN= Asa Norte Regional Hospital

Source: Info Saúde Portal-DF

There was an increased rate in the number of speech-therapy services registered in the PHC at the SES-DF of 10% between 2018 and 2019, 69% between 2019 and 2020, and 14% between

2021 and 2022. A decline of 2% in the total of services was observed between 2020 and 2021. In four years, the number of speech-therapy appointments in the PHC registered at the SES-DF a little more





than doubled, from a total of 2166 in 2018 to 4503 in 2022, showing an increasing average rate of only 22.75% in that period. Additionally, despite the general amount shows an increasing rate of 14% between 2021 and 2022, by analyzing the HRs isolatedly, it is verified a fall in the registers of PHC services in the Eastern, Western, Southwestern and Southern HRs.

## Discussion

The political-administrative decentralization, with the regionalization of the healthcare service network is an integrating part of SUS tenets<sup>1</sup>. Since 2016, the Federal District has been organized in seven HRs, as follows: Central Region, Mid-Southern Region, Eastern Region, Northern Region, Western Region, Southwestern Region and Southern Region<sup>13</sup>.

The greatest part of the speech-therapy appointments in the PHC was registered in the Southwestern HR between 2018 and 2022. This HR has the largest coverage of the PHC by the SES-DF<sup>14</sup>, where three of the six most populated Administrative Regions (AR) in the Federal District are located: Samambaia, Taguatinga and Águas Claras<sup>15</sup>.

Despite encompassing Ceilândia AR, considered the most populated in the Federal District<sup>15</sup>, the Western HR was the second region which registered the lowest number of speech-therapy services in the PHC at the SES-DF in the assessed period. The fact that, during the aforementioned period, only two health care centers registered this kind of appointment should be taken into consideration. Therefore, there was an uneven supply of speech-therapy service in the PHC of the different HRs in the Federal District between 2018 and 2022, and that service was provided in a reduced number of Health Care Centers, even in the most populated ARs. It is possible that appointments were held, but they were underreported.

The supply of speech-therapy services, at any levels of health care, also depends on the number of professionals working in the region. In 2018, there were 118 speech therapists at work at the SES-DF. By hiring 137 professionals between 2019 and 2022, currently, the number increased to 255 professionals<sup>16</sup>. In January 2023, there were 3303 positions occupied by Health Specialists at the SES-DF<sup>12</sup>. Therefore, the number of speech therapists at the SES-DF accounted for 7.72% of the total number of hired Health Specialists in January 2023. The reduced number of speech therapists in the Federal District had already been pointed by another study<sup>9</sup>, whose authors verified that, in 2008, the territory had the lowest supply of speech therapists in the PHC in the country.

Although rated as increasing, the supply of services/appointments by speech therapists in the PHC is still uneven and restricted as it is also observed in other regions in Brazil<sup>17</sup>, which hinders care integrality in the SUS, once the Speech Therapy has the ideal working scenery in the PHC, applying techniques and strategies of health promotion and disease prevention in communication, fostering the application of the SUS tenets<sup>17</sup>.

Studies have demonstrated the importance of the speech therapists' insertion in the PHC for the development of health education actions to groups from diversified age ranges and addressing diverse themes related to the human communication<sup>19</sup>, apart from actions in Workers' Health Surveillance<sup>15</sup>. A study conducted in Ceará State, Brazil, verified, for example, that the return rate of newborn babies to the re-test of the Newborn Hearing Screening changed from 7.69 to 65.38% after the intervention of the speech therapy team in the PHC<sup>20</sup>.

The low coverage of the PHC in the Federal District is not limited to the Speech Therapy. A study carried out in



2017 showed that the Federal District displayed the lowest percentage of coverage for the infrastructure, team composition and services provided in the PHC<sup>21</sup>.

Despite the efforts of the SES-DF to design specific planning for health promotion<sup>14</sup>, users still rely on hospitals and disbelieve the resolution power of the health care centers<sup>22</sup>. One of the factors that favors users to seek for services is care delivery grounded in the respect, trust, privacy and confidentiality<sup>23</sup>. In this sense, the longitudinality of care in the PHC is associated to some benefits, among them, users' trust<sup>24</sup>. The longitudinality of care assumes a continuing source of care, with strong interpersonal ties, which reflect the joint cooperation between service users and health care professionals<sup>25</sup>. Thus, authors suggest the expansion and enlargement of this model of care to enhance the quality of the PHC<sup>24,25</sup>. Additionally, managers must pay attention to issues related to the insecurity of work in the PHC, as that may bring about the professionals' turnover, which hinders the continuity of work and relationships and bonds established between users and professionals<sup>26</sup>.

By comparing the assessed periods, lower growth rate in the register of speech-therapy services between 2020 and 2022. It is assumed that the fall in the amount of speech-therapy services in the PHC in this period may be related to the pandemic. Data from a UBS in the Federal District evidenced a disruption in the growth pace of appointments during the first wave of the COVID-19<sup>27</sup>. In a study conducted in the Sanitary District of Recife, Brazil, the authors also verified the decrease in dental procedures in the PHC during the pandemic<sup>28</sup>. A study<sup>29</sup> carried out with 15 speech therapists in Paraíba State, Brazil, evidenced that most professionals reported the social isolation as the main obstacle to the speech-therapy services in the PHC

during the COVID-19 pandemic. In addition, they reported the lack of support and necessary resources for their work during this period. Issues regarding public policies and funding should also be considered. Researchers<sup>30</sup> point out that the extinction of the specific funding for the NASF as well as the change in the work process in those centers since 2020, may have hindered the speech-therapy services since then.

Users of the PHC service in the Federal District, interviewed between 2018 and 2019, reported that the amount of professionals in different health areas provided is not enough to meet the population demand, and pointed to the difficulty in getting care services without previous appointment, which makes the access difficult and segments care to the assisted individual<sup>31</sup>. In order to increase coverage in the PHC, one should understand that even extensive supply in certain places may not expand the effective access of users, considering that services with strategic location and easy access, without input, are not able to effect the expected changes in the health care system<sup>20</sup>. In addition, it is important for managers to consider the point of view and opinions of the service users, providing moments to listen to the population, to incorporate strategies in order to achieve the ideal care provision in the PHC<sup>31</sup>.

The limitations in this study are associated with being an ecological study, with data collection in the information system of the SES-DF. Therefore, it depends on the reliability of the information recorded by the professionals during the assessed years. Thus, the absence of registers of care services rendered may be assumed. Additionally, in the Federal District, public health care services are also rendered by affiliated institutions to the SES-DF, which may encompass services from the PHC and may not be recorded in the Info Saúde Portal

from the Federal District. However, the current study focused on the supply of the speech therapy service in the PHC specifically connected with the SES-DF by means of the analysis of the data registered in a public access site. That fact may even raise a discussion on the number of speech therapists associated with the district agency.

Studies that investigate and reflect on the supply of health care actions and services are fundamental to ensure that the commitment to the health care right is safeguarded<sup>22</sup>. The current study is intended to foster debates on the coverage of the PHC in the HRs of the ARs from the Federal District, as well as the need of greater inclusion of speech therapists at this level of health care, not only in this location, but also all over the country. Moreover, the current study also points out the importance that registers of health care data and appointments held at the SES-DF, at the different levels of health care, are recorded properly in the Info-Saúde Portal,

Federal District, in order to enable actual analysis of the service supply.

Further studies are suggested in order to delineate a comparison that verifies the quantitative evolution of the speech-therapy services at the different levels of complexity in the different regions of the country. Further analyses regarding the number of the population by HR and the number of speech therapists by dwellers may also contribute to assess the supply of speech therapy service in the SUS.

## Conclusion

Reduced growth rate of speech-therapy services was observed in the PHC in the Federal District between 2018 and 2022, which were often concentrated at specific UBS, limiting the access of the population to those professionals and hindering the organization of the health system in health care networks, according to its complexity.

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