

# The Health Councils in quarantine? Action and functioning of the Municipal Health Council of Teresina-PI in the face of COVID-19

Conselhos de Saúde em quarentena? Atuação e funcionamento do Conselho Municipal de Saúde de Teresina-PI frente à COVID-19

¿Los Consejos de Salud en cuarentena? Actuación y funcionamiento del Consejo Municipal de Salud de Teresina-PI frente al COVID-19

## RESUMO

Objetivo: Analisar a atuação e o funcionamento do Conselho Municipal de Saúde de Teresina-PI frente à COVID-19. Métodos: Trata-se de um estudo descritivo e exploratório com abordagem qualitativa do tipo estudo de caso. As técnicas qualitativas empregadas neste artigo dizem respeito à pesquisa documental e à entrevista semiestruturada em profundidade, ambas as técnicas exploradas mediante análise de conteúdo. Ao todo, realizaram-se 13 entrevistas com conselheiros e ex-conselheiros. Para a pesquisa documental foram utilizados registros das gestões que compreendem os anos de 2014 a 2020, primeiro ano pandêmico. Os dados somente foram coletados após aprovação do projeto ao Comitê de Ética em Pesquisa da Universidade Federal do Piauí, sob N° de Parecer 4.380.288. Resultados: Embora com a pandemia da COVID-19 tenham surgido desafios específicos, verificou-se que o Conselho estudado se esforçou para cumprir seu papel. Conclusão: Mesmo sem a realização das sessões ordinárias e extraordinárias, pontos positivos merecem destaque. O Conselho buscou se articular para fiscalização dos serviços de saúde em meio à pandemia e coordenou parceria com o Conselho Estadual de Saúde do Piauí para ações conjuntas.

**DESCRIPTORIOS:** COVID-19; Conselhos de Saúde; Controle Social Formal; Política de Saúde.

## ABSTRACT

Objective: To analyze the performance and functioning of the Municipal Health Council of Teresina-PI in the face of COVID-19. Methods: This is a descriptive and exploratory study with a qualitative approach of the case study type. The qualitative techniques used in this article concern documentary research and in-depth semi-structured interviews, both techniques explored through content analysis. In all, 13 interviews were carried out with directors and former directors. For the documentary research, records of the administrations that comprise the years 2014 to 2020, the first pandemic year, were used. Data were only collected after the project was approved by the Research Ethics Committee of the Federal University of Piauí, under Opinion No. 4.380.288. Results: Although with the COVID-19 pandemic specific challenges have arisen, it was found that the Council studied struggled to fulfill its role. Conclusion: Even without the holding of ordinary and extraordinary sessions, positive points deserve to be highlighted. The Council sought to articulate itself to inspect health services in the midst of the pandemic and coordinated a partnership with the State Health Council of Piauí for joint actions.

**DESCRIPTORS:** COVID-19; Health Councils; Social Control, Formal; Health Policy.

## RESUMEN

Objetivo: Analizar el desempeño y funcionamiento del Consejo Municipal de Salud de Teresina-PI frente al COVID-19. Métodos: Es un estudio descriptivo y exploratorio con un enfoque cualitativo del tipo estudio de caso. Las técnicas cualitativas utilizadas en este artículo se refieren a la investigación documental y la entrevista en profundidad semiestructurada, ambas técnicas exploradas a través del análisis de contenido. En total, se realizaron 13 entrevistas a directores y ex directores. Para la investigación documental se utilizaron registros de las administraciones que comprenden los años 2014 a 2020, primer año de la pandemia. Los datos fueron recolectados solamente después de que el proyecto fuera aprobado por el Comité de Ética en Investigación de la Universidad Federal de Piauí, bajo el Dictamen n° 4.380.288. Resultados: Si bien con la pandemia de COVID-19 han surgido desafíos específicos, se encontró que el Consejo estudiado tuvo dificultades para cumplir con su función. Conclusión: Aún sin la celebración de sesiones ordinarias y extraordinarias, los puntos positivos merecen ser destacados. El Consejo buscó articularse para fiscalizar los servicios de salud en medio de la pandemia y coordinó una alianza con el Consejo Estatal de Salud de Piauí para acciones conjuntas.

**DESCRIPTORIOS:** COVID-19; Consejos de Salud; Control Social Formal; Política de Salud.

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**INTRODUCTIONS**

The Coronavirus Disease 2019 (COVID-19) attracted worldwide attention during 2020. In March of that year, the World Health Organization (WHO) declared the disease a pandemic. Faced with the pandemic scenario, decision-making dynamics were affected, even those in which social participation was established.<sup>1,2</sup> Several studies<sup>3-5</sup> highlighted the attention given to general aspects of democracy that were affected by the pandemic. However, it is relevant to investigate the repercussions that COVID-19 has produced on institutions of participation/representation.

In the last 35 years there has been a significant growth in the number of democratic institutions both in Brazil and in the world.<sup>6,7</sup> Gradually in Brazil, and especially after the Federal Constitution

of 1988, the various fields of action of the public sector began to institutionalize spaces that enable participation, representation and dialogue between the public sector and society in decision-making on public policies. These institutions of participation/representation can express different models, one of them being the Public Policy Councils, which are conceived by legislation and are present in most Brazilian municipalities.<sup>8-10</sup> In health policies, the trend of participation through the Health Councils was also perceptible.<sup>11</sup>

With the COVID-19 pandemic, the health area was one of the most affected, requiring adaptation of policies. Actions were needed to establish governance; coordination of the response to the health crisis experienced; control of the transmission of the coronavirus; programming for different phases of the pandemic; adequate funding for a responsive health

system; information management and risk communication; management of health professionals; supply and management of material resources; coordination of the health care network; and containment of economic, social and psychological consequences.<sup>12</sup>

In this way, the pandemic and its consequences demanded that health policies be re-discussed.<sup>13</sup> To this end, it is necessary to analyze the performance and functioning of institutions of participation/representation, given that it is in the democratic context that these bodies can help define aspects of policies, as well as evaluate and monitor them. The question is then: "What are the repercussions and teachings that the COVID-19 pandemic has brought to the Health Councils? Were these inactive during a period as important as the health crisis installed in 2020?"

Based on the above, this study aimed to

analyze the performance and functioning of the Municipal Health Council (CMS - Conselho Municipal de Saúde) of Teresina-PI in the face of COVID-19.

## METHODS

This is a descriptive and exploratory study with a qualitative approach of the case study type carried out at the CMS in Teresina, capital of Piauí. This research is part of the dissertation entitled "Control and Inspection of Services and Public Expenses by the Municipal Health Council of Teresina-PI: a case study", presented in November 2021 to the Graduate Program in Political Science at the Federal University of Piauí.

Studying Teresina-PI is an important case for the scientific academy because it is the capital of Brazil that proportionally invests the most in health. According to a survey by the Federal Council of Medicine in partnership with the Non-Governmental Organization Contas Abertas, the capital invested BRL 703.76 per capita in 2019, surpassing the city of São Paulo, which has the largest economy in the country, where per capita spending was R\$ 673.71 in the same period.

It should be noted that this good performance in health investments is not a one-off. In 2017, Teresina-PI was also the third capital in the country that invested the most in health per citizen. At that time, the capital of Piauí stood out for leading investments when only the Northeast region was analyzed.

It should be noted that, until 2020, the Municipality of Teresina-PI had been complying with what is recommended by Complementary Law No. 141, of 2012. Legally, municipalities and the Federal District must annually apply a minimum of 15% of tax revenue to public health actions and services. 14 In 2019, 35% of the budget of the capital of Piauí was spent on health, more than double the percentage required by legislation.

In addition to the points already listed, according to the Brazilian Institute of Geography and Statistics (IBGE) 15,

the city of Teresina-PI is the largest high-complexity health center in the country. The public and private health network in Teresina-PI serves patients from 300 municipalities in the North and Northeast regions, ahead of capitals such as Belo Horizonte and Salvador, which serve patients in 262 and 248 cities, respectively. Most of these patients are citizens residing in municipalities in the interior of Piauí, Maranhão and eastern Pará who seek high-complexity care in the capital of Piauí.

The qualitative techniques that were employed in this case study concern documental research and in-depth semi-structured interviews, both techniques explored through content analysis.

For the construction of the interviews, councilors were selected from all representative segments (users, health workers, providers of goods and services and people from the Public Power) of the management in progress and past administrations with greater participation in the activities of the Councils. The following criteria were adopted for the selection of interviewees: greater participation of the councilor in the activities of the Council (criterion analyzed from the documentary research carried out before the interviews), accessibility of the researcher to the population and availability and interest of the councilors in voluntarily participating in the research.

Due to the experience of a pandemic period, the collection of documentary data was prioritized until the health situation stabilized. After collecting all the documents, we proceeded to search for possible interviewees to participate in the study. Faced with the scenario of uncertainties regarding the pandemic and with the non-normalization of the health situation, it was decided to contact the councilors for interviews remotely, via videoconferencing applications such as Google Meet and Skype. However, after the perception of resistance from some councilors in granting interviews in this format for various reasons (insufficient time, lack of internet, lack of resources such as a notebook or smartphone), the planning was

readapted to carry out face-to-face interviews, respecting health protocols (mask use and social distancing).

The interviews took place between July and August 2021. In all, 13 interviews were carried out, totaling 531 minutes of dialogue, with an average of just over 40 minutes per interviewee. For its accomplishment, previous contact was made to the councilors and, those who agreed to participate, signed the Free and Informed Consent Term. All were informed that they could withdraw from the research at any time if they wished.

Participants received clarification on the objectives, the destination of the data and the contributions of the research results. And as a form of security for the interviewees, the ethics that govern the research on secrecy and anonymity, the pseudonym CON (of counselor) was used in capital letters, followed by the numbering which was determined from the order in which the interviews were carried out together with the segment that represents or represented (Ex: "CON 01 - SUS Users", "CON 02 - Health Workers", "CON 03 - Public Power"...), so that all research subjects made sure that their identities would remain anonymous. The interviews were ended after verification of consistency in the interviewees' statements, not contributing to new focuses and categories of analysis.

For the documentary research, records of the administrations covering the years 2014 to 2020 were used. The pandemic year of 2020, however, was analyzed separately, in order to avoid bias in the study. The sources for data collection included the CMS of Teresina-PI, the Official Gazette of the Municipality (DOM) and the Electronic Information System (SEI) of the City Hall. Among the records included, there were: Municipal Law No. 4,027, of 2010, which reorganizes the CMS; internal regulations, minutes of meetings, resolutions, reports, official letters, etc.

Bardin's content analysis 16 it is organized around three subsequent stages: pre-analysis; material exploration; and

treatment of the results obtained and interpretation. The description of the methodological procedures for content analysis is an important step to ensure the transparency and replicability of the findings. According to Bardin's content analysis formulation proposal, Table 1 shows the main analysis procedures of this study.

Data only began to be collected after the authorization of the research project by the Research Ethics Committee (CEP) of the Federal University of Piauí, under Certificate of Presentation of Ethical Appreciation (CAAE) No. 37116520.9.0000.5214 and Opinion No. 4,380,288.

## RESULTS AND DISCUSSION

The emergence of the COVID-19 pandemic and the economic, social and political repercussions of its confrontation produced discussions about public action and the controls that are necessary over it,

raising questions about the permanence, functioning and effectiveness of accountability mechanisms in times of public calamity. The instabilities caused by the pandemic highlight the need for governments and public management to act promptly, transparently and efficiently in protecting vulnerable groups, while they need to submit to democratic mechanisms of control.<sup>17</sup>

The circumstances of the first pandemic year were of mistrust, so that more and more transparency was required on the part of the Public Power and the basis of the representative model adopted by Brazil was questioned. The panorama of public management during and after the pandemic is and will be complex, given that this health crisis does not only generate impacts on the country's health system, but also brings with it economic, political, educational and social repercussions in dealing with it.<sup>18</sup>

Transparency and accountability in pandemic times are essential for society to be able to understand the security measures taken and the public health policies

Table 1. Content analysis design. Teresina, Piauí, Brazil.

<b>Documents</b>	Internal Regulations of the Teresina-PI CMS, Municipal Law No. 4,027/2010, minutes of meetings, resolutions, reports and official letters generated by the CMS
<b>Interviews</b>	Councilors and Former Councilors
<b>Technique</b>	Content analysis
<b>Procedure</b>	Choice of documents, material preparation, coding, treatment of results, corroboration or comparison with the literature
<b>Sources</b>	CMS of Teresina-PI, DOM and SEI of the City Hall

Source: elaboration of the authors (2022).

that have been implemented by managers in the fight against the disease. However, studying these topics is challenging, given that there is no way to know to what extent the information is reliable or declined to understand in a certain way.

The year 2020 was unusual for institutions of participation/representation that play a relevant role in the control and supervision of public policies. The pandemic may have brought with it the scenario that corroborates and expands the challenges in relation to democracy, municipalities and social participation through representation bodies.

For the health area, in particular, the ways in which the Health Councils behaved during the pandemic was quite dispersed, with some adopting the "virtual" scenario imposed by social distancing to develop their activities and others total inertia, with suspension of their plenary sessions, raising the idea that these instances were also "quarantined" at a time when they should be more active.

To analyze the actions of the Teresina-PI CMS during the 2020 pandemic year, documents generated by the institution in the SEI were considered, since the Council met only three times in that year, and these meetings took place before the WHO declared the new coronavirus pandemic on March 11th. Among the

documents analyzed were official letters, memoranda, opinions and reports.

The interviews carried out with the councilors proved to be quite useful for understanding the way in which the Teresina-PI CMS articulated itself to continue its operation, even in the face of not holding face-to-face or remote meetings. When asked about how the pandemic affected the activities of the Council and what had to be adapted to this new reality, the lines go in the same direction.

*"Last year the Council practically did not work internally, as well as the meetings. Our Council has a lot of users of the system, 50% of the councilors are users, it was a period when we also had to have an election for councilors, so the meetings were very harmed, even because they claimed that they did not have internet, the access of the segment of users to the internet is very bad. We were unable to do an online meeting. But we still inspect every demand that came to the Council, especially me, because as I was on the front line I said 'if I can get contaminated at work, I can get contaminated in visits', so we went to the demands." (CON 01 - Health Workers)*

*“We had, mainly, visits from hospitals, because previously we had free access inside the hospital and like most hospitals, the units... ended up restricting inspection a lot. And the entrance of the advisory users public, we also had to put our foot back, because some are already from a risk group, so we stayed a lot in the administrative part, we are now returning to the entrance even inside the hospital” (CON 05 - SUS users)*

*“[...] in this period of COVID there were practically no meetings, we were not having meetings. And then the attempt to be online started and then not even that anymore. I did not participate in any of these online” (CON 06 - SUS Users)*

*“Well, last year we were stopped for practically the whole year. First, because he won the mandate and it was right when the pandemic started, then there was the election and it was stopped for a period until we were nominated, given the inauguration. The inauguration was even virtual at the time, if I'm not mistaken it was between August and September, virtual, and then it was stopped for practically the whole year. And then this year, in January, we came back and started to resume face-to-face meetings, plenary meetings, visits. So we started visiting places that weren't COVID, in basic units that weren't COVID, in hospitals that weren't COVID. In hospitals, when there was inspection in COVID areas, we prioritized health counselors who had already been vaccinated first to make these visits. Not now, we are returning to our normal routine, we are all vaccinated, at least, with the first dose, but we are already carrying out regular inspections and visits” (CON 10 - SUS Users)*

*“Basically, what has changed is a decrease, at the height of the year, in the frequency of visits, due to the limitation of not crowding, but the presidency of the Council through an official letter... to the board, that were being answered during the period that happened. Now, as vaccination improved more, then they came back” (CON 11 - Public Power)*

As reported by the councilors, the Teresina-PI CMS suspended its activities in March 2020, a period in which activities in other sectors of society were suspended and the implementation of measures to combat COVID-19 began. The only three meetings that took place that year were between the months of January and February, in two extraordinary sessions (January and February) and one ordinary (January). In 2020, the Council basically only worked by provoking the Municipal Health Foundation (FMS) through official letters and memoranda, when it received complaints of irregularities in services from society.

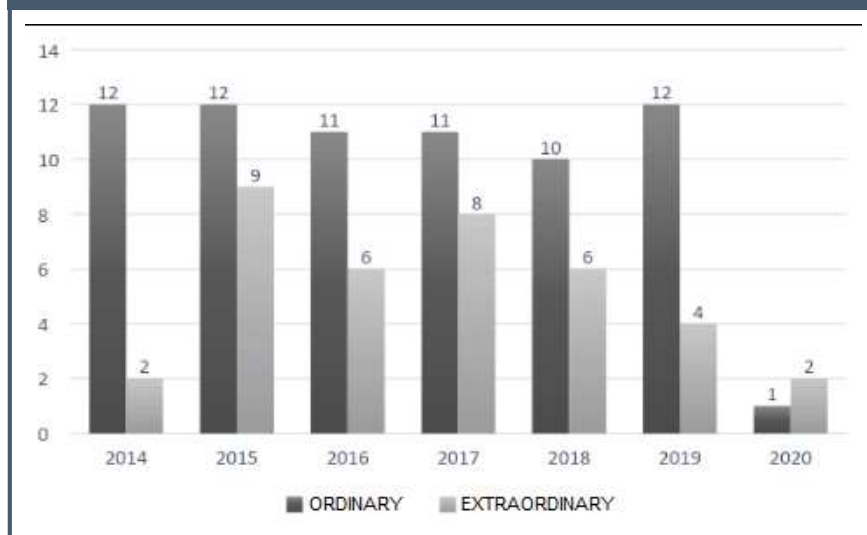
According to access to the minutes of

the meetings held by the Teresina CMS, in the period from 2014 to 2020, a total record of 106 minutes of meetings, between ordinary and extraordinary, was pointed out. Although Article 16 of the CMS internal regulations indicates that the ordinary sessions will be held monthly with the minimum presence of half plus one of its members. When analyzing the minutes per year, it was possible to observe the fulfillment of the twelve ordinary meetings in the years 2014, 2015 and 2019.

A highlight was the year 2015, which had a significant number of sessions, with twelve ordinary and nine extraordinary meetings. Agendas involving health planning instruments led to this significant number of extraordinary sessions in 2015. In that year, seven of the nine extraordinary meetings had these instruments as their agenda items. In 2018, ten of the twelve ordinary meetings established in the regiment took place. In 2020, a pandemic year, only one ordinary meeting was held. The balance of the ordinary and extraordinary meetings can be seen in Graph 1.

Since 2014, the Council has been stable in holding regular meetings. Maintaining the frequency of meetings should be

Graph 1. Arrangement of ordinary and extraordinary meetings held by the Teresina-PI CMS (2014-2020). Teresina, Piauí, Brazil.



Source: Authors' elaboration based on research data (2022).

maintained in situations of health crisis, such as the one experienced by the COVID-19 pandemic. In a scenario of uncertainties and the need for more energetic action on the part of the Teresina CMS, the instance should have met even more in 2020, even if remotely. The meetings only took place again in 2021, after the election of the members of the board of directors of the new management.

It was expected that the meetings would take place remotely in view of the new circumstances. This was visualized in the CMS of Curitiba<sup>19</sup> and Fortaleza<sup>20</sup>, for example. At first, the Councils of these capitals suspended their sessions in the months of April and May. However, these took place again in June 2020 through a video calling platform.

With the absence of ordinary and extraordinary meetings during 2020, the Teresina-PI CMS generated a total of 96 documents, among official letters, memoranda, opinions and reports regarding the provocations addressed to the FMS, as shown in Table 2.

Most of the documents generated were related to the maintenance of the Teresina-PI CMS, such as requests for a vehicle to FMS to carry out inspections in health units (a significant portion of the memoranda referred to this), requests for information on services, extension of mandates due to the pandemic and the electoral process.

The Management Committee of Measures to Confront the Pandemic of the Teresina-PI Prefecture was established on April 14, 2020, by Municipal Decree No. 19.645. Through it, the Committee could coordinate and adopt, with the knowledge of the head of the Municipal Executive, actions and measures, arising from the collection of scientific data in the fields of health, economics and social sciences, for the organization and effective functioning of human activities, social and economic in Teresina-PI. The Committee had coordination from government sectors, such as health, economy, finance, social assistance, infrastructure and works, social sciences, communication and legal matters.

Table 2. Documents generated by the Teresina-PI CMS during the year 2020. Teresina, Piauí, Brazil.

Types of documents	Generating unit	Quantity
Trades		58
Memos	Teresina-PI CMS	31
Opinions		06
Reports		01

Source: elaboration of the authors from the SEI of the Teresina-PI City Hall (2022).

However, the Teresina-PI CMS was not included in this Committee. Even with the non-inclusion of the collegiate in the Committee, the CMS sent a letter (Nº 608/2020) to the FMS presidency, on April 15, with the names of two counselors to represent it. In the interviews, when asked if the CMS had any contact with the Steering Committee for Measures to Confront the Pandemic, the statements were as follows.

*“There was no contact... Now (in the municipal administration that took office) they came after. We tried... Even if there wasn't a vacancy inside the Emergency Operations Center, we elected two counselors to talk to the coordinator of the Center so that they could pass it on to us so that we wouldn't be unaware of the demands. Then they recently apologized for not having this relationship and now every meeting starting in June they come to present the reports with accountability” (CON 01 - Health Workers)*

*“Yes, at the last meeting (July 2021) we had a presentation from the Emergency Operations Center, they made a kind of update for us, where the pandemic is, not only at the world level, but in Brazil, Piauí and, especially, Teresina. They updated us on numbers and measures that have yet to be implemented” (CON 02 - Public Power)*

*“Look, only recently was someone*

*actually invited from the Council to participate, but that she would be a person who could participate, but without the right to vote, without the power of authority. On behalf of the Council, I already thought this was a great advance and a respect in a way, because in 2020 we didn't even have that. I believe that this was achieved by the current President of FMS, because he is interested in working together with the Council. I think it is very valid because it enriches health when our manager has this interest” (CON 04 - Health Workers)*

*“No. From what I followed, they fought a lot, we weren't even participating in the Crisis Committee. The decree does not include directors. But so, I still facilitated here, with the presidency. In fact, there was a Committee, other than the Operations Center itself, the Committee was inter-institutional with the mayor. At the time of Firmino (former Mayor of Teresina) he was the one pulling. Here the representation was of the president of the Foundation who was there and the Council was not there, but they fought and I still had a meeting with the president here. The City Hall's suggestion was that we create a specific commission here for health and the Foundation, and place the councilors there, but this was not even viable from what I saw, not even with the Committee itself” (CON*

### 13 - Public Power)

The year 2020, in addition to the COVID-19 pandemic, was also marked by municipal elections. In Teresina-PI, the Brazilian Social Democracy Party (PSDB - Partido da Social Democracia Brasileira) tried to continue its almost 30-year hegemony. The party had not lost an election in the capital of Piauí since 1996, but ended up defeated by the Brazilian Democratic Movement (MDB - Movimento Democrático Brasileiro) in the second round of the 2020 elections.<sup>21</sup> In the speech of the interviewees, it is possible to perceive that the previous municipal management was not so open to dialogue with the Council regarding the fight against the pandemic and that the management sworn in in 2021 proved to be more accessible in this regard, so to speak.

A different scenario was seen in other capitals, such as Goiânia, which, through Municipal Decree No. 736, of March 13th, 2020, dedicated a seat to a representative of its CMS; and Belém, through Municipal Decree No. 96.138, of April 13th, 2020, also secured a seat for the CMS. In Cuiabá, civil society was, a priori, excluded in the initial formation of the Committee. Only three months after the Committee was established, organized civil society was introduced, through Municipal Decree No. 7.970, of June 25th, 2020, which established the inclusion of a representative of the municipal community movement.

Regarding the partnership between Councils, the Health Councils of the municipality of Teresina-PI and the state of Piauí acted together at a given time. The presidents of both institutions visited the Municipal Superintendence of Transport and Traffic and the Urban Development Superintendencies of the four areas of the capital, in order to learn about how the inspections of public transport and spaces such as public markets, churches, temples, prayer houses, Umbanda terreiros and spiritist centers. It was questioned how the Teresina-PI City Hall would monitor compliance with decrees to resume

activities and clean public markets. The concern of the representatives of the two Health Councils referred to the measures to make the economy more flexible and the opening of spaces that could cause agglomerations, considering the high rate of transmission of the coronavirus.

The attention brought to the context represented a relevant concern, because at the same time as opening spaces that brought together a large number of people, hospital beds destined for those affected by the contamination of the new coronavirus were closed. The responses obtained by the Councils to the visits were a cause for concern, as it was found that there were not enough inspecting agents, and the actions were also carried out in conjunction with the Health Surveillance. On the other hand, there was also an effort on the part of the Teresina-PI City Hall for spatial reorganization of the places.

In the face of the pandemic, there was no unified policy regarding the necessary measures to contain the spread of the new coronavirus. There was an important variation in the level of rigor and in the way in which the measures were adopted by states and municipalities. This fact was a consequence of the lack of a standardized policy coming from the Federal Executive, which made states and municipalities employ policies independently. The pandemic thus generated an important space for the role of governors and mayors. In this context, a large part chose to introduce relatively rigid rules as a means of containing the pandemic, a conduct that quickly spread among subnational entities in Brazil.<sup>22</sup>

In the case of Teresina-PI, at first, the Prefecture coordinated actions to face the pandemic together with the state government. The two managers even held joint lives on social networks in favor of social isolation.<sup>23</sup> This shows a partial alignment between the state and capital governments. In Teresina-PI there was a joint coordination at first and divergences related to the flexibility protocols. The then mayor of the capital chose to be more "conservative" during the subsequent rela-

xation of social restriction measures, compared to the state government.

Menezes and collaborators<sup>24</sup> analyzed the implementation of public policies to combat the spread of COVID-19 within Brazilian capitals. For the authors, the more transparent and accountable the manager is towards society, the greater will be the support and confidence of citizens in relation to the implementation of measures that are more painful for the population. Transparency and accountability are fundamental elements in the composition of the state capacity of governments, whether at the local or national level.

With the worsening of the COVID-19 pandemic and the rules of social isolation imposed, virtual media, such as social networks, ended up gaining greater engagement, especially due to the 2020 municipal elections, interfering in the political decisions and practices of Public Administration.<sup>25</sup> What was expected was that the Teresina-PI CMS would also adopt new technologies so that it would be able to monitor the changes in the management plan that were being required and the implementation and monitoring of public health policies in this pandemic period, something that has not been fully visualized.

Faced with the pandemic scenario, the directors of the CMS of Teresina-PI could have moved to carry out a moment of training and education, guided by the guidelines of permanent education, about digital platforms and the exercise of social control during the COVID-19 pandemic, with its full board members, alternates and executive secretaries, with the aim of continuing the ordinary monthly sessions, since adaptation to the conjuncture was required.

Rezende and Cordeiro<sup>26</sup> point out that continuing education is seen as one of the necessary procedures for strengthening the exercise of social control, in order to provide it with foundations and critical capacity for fluidity in debates and decision-making, with the search for training counselors in the disproportionate relationship with the Public Power.

In addition to the examples from Curitiba and Fortaleza, other good practices carried out by Councils across Brazil deserve to be highlighted. The CMS of Sobral, a medium-sized municipality in the state of Ceará, adopted an important strategy with regard to controlling expenses and monitoring the health situation.

With the help of its technical chambers, the Transparency Portal was permanently consulted, with the aim of analyzing emergency purchases and contracts made by the municipality to face the pandemic. These chambers met every two weeks, remotely, to evaluate the Transparency Portal and management reports, deliberating on agendas to be subsequently presented to the plenary sessions of the CMS of Sobral, with demand for the participation of management representatives, in order to clarify doubts arising from the evaluations carried out.<sup>25</sup>

As soon as a pandemic was declared by the WHO, the Belo Horizonte CMS met and prepared a report with 14 recommendations to the Municipal Health Department of the capital of Minas Gerais. Among the recommendations were: i) intensifying measures to restrict the circulation of the virus responsible for COVID-19 in Belo Horizonte and implementing a lockdown, as a necessary emergency sanitary measure, for at least 2 weeks; ii) democratize the Committee to Combat COVID-19, guaranteeing popular participation with representation from the CMS of Belo Horizonte; iii) ensure the provision of personal protective equipment to health professionals and review the technical notes on the subject, considering the recent scientific evidence on the use of such equipment in the face of new variants of the COVID-19 virus; iv) and guide doctors and health professionals to adopt the municipal clinical protocol for the treatment of COVID-19, considering the best available scientific evidence and contraindicating medicines without scientific recommendations.<sup>27</sup>

In June 2021, the Municipality of Teresina-PI and the CMS defined the priority groups that would be vaccinated in

the next batches of vaccines against COVID-19 that arrived in the capital. The Teresina-PI CMS was given autonomy to define the priority groups that would receive 20% of the doses of each new batch that arrived in the capital of Piauí.<sup>28</sup>

## CONCLUSION

Although specific challenges have arisen with the COVID-19 pandemic, it appears that the Council studied made an effort to fulfill its role. Before the pandemic period, the regularity of meetings is perceived, essential for the discussion of health policies and social control. Even so, it was expected that the Teresina-PI CMS would adapt to the scenario imposed by the global health crisis, as done by Councils in other capitals.

Even without the holding of ordinary and extraordinary sessions, positive points deserve to be highlighted. The Council sought to articulate itself to inspect health services in the midst of the pandemic; provoked the Municipal Executive to render accounts several times; coordinated a partnership with the State Health Council of Piauí for joint actions; and sought to insert counselors in the Management Committee of Measures to Combat the Pandemic of the Teresina-PI City Hall, in order to ensure transparency of the actions carried out by the Local Executive to the democratic mechanisms of control.

From a time perspective, the first year of the pandemic brought challenges and limitations to participation/representation instances, with a probable expansion of difficulties already faced before the health crisis. By benefiting from empirical research, this study brought relevant findings obtained through qualitative techniques of in-depth interviews and documental research on how the Health Council of a capital city in the Brazilian Northeast behaved. The results evidenced in the present study may point to new considerations about these institutions of participation/representation after the pandemic period.

**From a time perspective, the first year of the pandemic brought challenges and limitations to participation/representation instances, with a probable expansion of difficulties already faced before the health crisis.**



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