Co-management in the context of Brazil's National Humanization Policy: an integrative review

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Abstract *Co-management is one of the guiding principles of Brazil's National Humanization Policy (NHP), which has been studied since its creation in 2003. This article presents an integrative review of literature on co-management in the context of the NHP. We performed searches of the VHL, CAPES, Scopus and ProQuest databases for articles on co-management published after the creation of the NHP. We conducted a detailed analysis of 36 articles, organizing the results into two predefined categories: theoretical bases and reports on co-management in practice. The articles drew on the following theoretical bases: the circle method/institutional support, ergology, Hermeneutics, schizoanalysis, Habermas' theory of communicative action and Paulo Freire's pedagogy for liberation. Few studies provided original theoretical contributions. Regarding practice, the authors mentioned the implementation of co-management devices and the creation of different collective spaces, which were presented as a being participatory in themselves. The articles offered little reflection on the process of developing a culture of participation. We conclude by pointing to the need for studies that explore the relational construction of co-management in the everyday practice of health care teams.*

Key words *Health management, Humanization of care, Co-management*

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Introduction

The management approach suggested by Brazil's National Humanization Policy (NHP) – co-management or participatory management – is largely based on the work of Campos[1], the most cited author in the NHP reference guide *Participatory management and co-management* published by the Ministry of Health[2].

According to Pereira et al.[3], in 2003, the year when the NHP was created, Campos took up the post of executive secretary of the Executive Secretariat of the Ministry of Health, when a series of his concepts were incorporated into the ministry's policies. For this reason, and due to the findings of this review, we believe it is important to outline some of the basic guiding principles of his work and method, which have been widely disseminated in relation to co-management.

However, it is important to highlight that participatory management is a broad term that has been discussed in Brazil since the time of the health reform movement[4], which emerged during the redemocratization process, and subsequent creation of spaces for public participation, such as community health councils[5,6]. This topic has also been studied since the creation of the Ministry of Health's Participatory Management Secretariat and formulation of the National Participatory Management Policy[4,7,8]. Not to mention research on co-management by other branches of knowledge within sociology[9] and the study of participatory management models in the fields of business administration and organizational psychology[10].

Participatory models gained momentum in the 1960s and 70s and can be divided into three categories: models in which participation is considered a right; models related to humanization in which participation leads to greater commitment and better work performance; and participation as a way of controlling operations, a coordination mechanism, as suggested by Mintzberg[10].

The description of the history of current management models and their incorporation within the field of health[11,12] is beyond the scope of this article, which seeks to analyze literature on co-management produced after its inclusion as one of the guiding principles of the NHP[2]. Below we therefore outline the core tenets of Campos' work[1].

Drawing on concepts of business administration and other areas of knowledge such as politics, psychology, philosophy and pedagogy, Campos[1] created the circle method (*método da roda*, meaning literally the wheel method) to analyze and co-manage groups. The method is shaped around four core elements: 1) anti-Taylorism; 2) strengthening subjects and institutional democracy; 3) conceptual reconstruction and work practice; 4) a dialectical worldview[1].

In the first element, Campos[1] situates his creation as a possible alternative to other management theories, in particular Taylor's classical management theory. In this regard, the author draws on an amalgamation of other theories to create a theoretical framework that underpins proposed practice. The method seeks to establish co-management systems in order to produce solidarity towards the public interest and "autonomous and protagonistic subjectivities". The second element encompasses two of the method's central aims: strengthening subjects and building institutional democracy, focusing on the creation of collective spaces. In the third element, drawing on the works of Marx, Campos[1] reconstructs the concept of "labor", which is considered an essential component of subjects, groups and society. Finally, the forth element alludes to the dialectical worldview underpinning the method.

According to Campos, the creation of collective spaces has three core functions: 1) a management and planning function; 2) political function, involving changing power relations and the construction of democracy; and 3) a pedagogical and therapeutic function, so-called insofar as it influences the production of subjectivities, a process that he calls the "paideia factor". Campos[1] concludes that the idea is to:

Decenter the focus of management, removing it from the management of things, or tasks and procedures and centering it on administering interpersonal relations and the outcomes of these relations. It is therefore necessary to rethink the functions of management and the tools employed until now to perform them (p. 168).

Although he recognizes the possibility of various types of collective spaces depending on the context, Campos[1] describes four main forms: co-management councils; collegial management bodies; devices; and dialogue and decision-making in the day-to-day functioning of an organization. The author also presents the possibility of applying the "institutional support method" (taking its theoretical base from the institutionalist movement), internally or with the support of an external agent. The external "supporter" helps the group analyze its work processes and relations and should therefore have an understand-

ing of group dynamics and the affects that circulate from transference and countertransference[1].

Thus, although Campos[1] does not put it this way and suggests institutional support as a practice, it is important to consider that to undertake this type of analysis the supporter should have a specific set of skills and knowledge about group dynamics and process theories and human relations. Furthermore, given that the role of the supporter is to identify group dynamics and the affects that circulate from transference and countertransference, this type of analysis also requires knowledge of the basic concepts of psychoanalysis and psychology. Thus, the supporter must be adequately qualified. Otherwise, there is a risk of leaving empty spaces in the analysis, as the simple opening of the circle is not enough to build change.

To make it more accessible, Campos's work[1] was described in a simplified manner in a NHP reference guide[2]. Produced by the Ministry of Health, the guide states that the management model adopted by the NHP is centered on team working: *Management is not a place, space or field of action exclusive to experts. Everyone does management*[2] (p. 23). The prefix "co" in "co-management" suggests two inclusions: 1) the participation of subjects in management processes; 2) the broadening of the functions of management. Rather than just keeping the organization running, management should aim to analyze the organization in order to problematize models of operating/acting and promote change, formulate projects, share decision-making, and foster pedagogical spaces for mutual teaching and learning[2]. Therefore, it is envisaged that participation should be incorporated into the everyday routine of services, not just into specific spaces such as community health councils and health councils.

Considering that the NHP is an open policy that seeks to foster the participation of subjects in actions tailored to specific contexts, without specific rules and regulations, professionals encounter a wide variety of experiences in everyday practice, many of which have not been published as empirical studies. However, many experiences have been posted on the *Rede HumanizaSUS*[13] (literally the "Humanize the SUS Network", where SUS is the acronym for *Sistema Único de Saúde*, Brazil's national health service), a social media network designed to encourage local services across the country to build their own individual ways of understanding and sharing management. In view of the above, the aim of this study was to undertake a review of literature on co-management, with the understanding that this analysis does not encompass all the experiences in this area in Brazil.

The general objective was to carry out a review of existing literature on co-management in Brazil published after the creation of the NHP in 2003. The specific objectives were: a) to identify the theoretical bases used to discuss the topic; and b) to identify reports on how co-management has been practiced.

According to Botelho, Cunha and Macedo[14], the literature review process is the first step in the knowledge construction process, as it creates openings for new research by identifying gaps in existing literature. In this regard, the current review offers researchers in this field a general overview of a significant body of literature, while at the same time encouraging the publication of experiences not encompassed by the articles analyzed.

Method

We used the integrative review method. This type of review aims to analyze the body of knowledge on the topic of concern, providing a synthesis of the data and indicating new directions for future research[14,15].

According to Mendes et al.[15], the integrative review process includes the completion and description of all stages. Although the literature on this type of review points to the need to synthesize and describe these stages, the subdivision of these stages varies from author to author.

The current review followed the stages defined by Mendes et al.[15]: formulation of the guiding question; definition of article selection and exclusion criteria; testing to define descriptors/keywords; choice of platforms and descriptors; abstract and title screening; preliminary selection; detailed reading and charting; selection refinement; and analysis, interpretation and presentation of results.

Guiding question

Considering that the NHP suggests that the implementation of guidelines should be tailored to the local context, we formulated the following question: How has management, or more specifically, the principle of co-management, been discussed and reported in practice since the creation of the policy in 2003? This question includes two categories for subsequent analysis: a) theoretical bases; and b) reports of co-management in practice.

Preliminary selection criteria

The selection criteria for title and abstract screening were articles whose central theme was co-management models in public health settings in Brazil or health management and work processes grounded in the NHP reference guide[2].

Exclusion criteria

After preliminary selection and detailed reading of the publications, articles where the theme was not the object of study or central to the discussion were excluded.

Testing, choice of platforms and preliminary selection

The tests and searches were performed in 2016. An initial search was conducted of the Virtual Health Library (VHL), which was chosen because it is the most widely used health database in Brazil. After performing a number of tests using different descriptors and/or keywords, the search that yielded most records was that using the keywords "Management AND Humanization", resulting in 429 texts. After applying a filter restricting the search to year of publication – between 2003 (the year when the NHP was created) and 2016 – 404 records remained, including articles, books and theses.

Forty-five of these records (11% of the total) met the preliminary selection criteria. Twenty-four duplicates of these 45 records were not counted. The other 335 records were categorized as follows: 49% addressed the policy but focused on other provisions/guiding principles; 4% were about professional training; 2% focused on psychology or odontology in a health context; 28% dealt with other issues related to humanization, such as organ donation, treatments, etc.

We performed a second search of the CAPES (Coordination of Improvement of Higher Education Personnel) Periodical Portal, which brings together multidisciplinary databases. After testing, we chose the keywords "health management AND humanization", resulting in 53 records, 15 of which met the preliminary selection criteria. Of these, six had already been found in the search of the VHL and seven were duplicates, resulting in only two additional articles. The other records were categorized as follows: 17% addressed humanization but had a different focus; 13% focused on other issues related to humanization; 4% were about biotechnology; and 38% dealt

with a range of different topics, such as ceramic coating of carbon composites for example.

We conducted a third search of the Scopus portal, which brings together multidisciplinary databases covering different areas. The keywords that yielded most results were "health management AND humanization", resulting in 155 records, 21 of which met the preliminary selection criteria. Of these, 16 had already been found in the search of the VHL and one in the CAPES portal, resulting in only four additional records. The other records were categorized as follows: 60% addressed humanization but had a different focus; 14% were discussions in the field of health related to humanization; 2% focused on management in other contexts; and 10% dealt with a range of different topics.

We conducted a fourth search of the ProQuest portal, which brings together databases covering different areas. The combination of keywords and descriptors that yielded most results was "Health Management AND Humanization of Work OR Humanization", resulting in 35 results, four of which met the preliminary selection criteria. Of these, one had already been found on the VHL, Scopus and CAPES portals and one in the VHL and Scopus portals, resulting in only two additional records. The other records were categorized as follows: 26% addressed humanization but had a different focus; 46% focused on work management outside the field of health; 3% were about humanization in other areas; and 14% dealt with general health issues.

The preliminary selection of the records found in the four searches resulted in a total of 53 records: 45 from the VHL, four from Scopus, two from ProQuest and two from the CAPES Periodical Portal.

After searching for the full-text versions of these publications and detailed reading and charting, 17 publications were excluded, resulting in a final sample of 36 articles. The excluded publications included articles whose full-text was not available, theses or dissertations referring to published articles, and articles in which the discussion was not centered on management in the context of the NHP. Chart 1 shows the articles by year of publication.

Analysis

In the reading and charting stage, we developed a charting table for each article in Microsoft Excel (containing title, authors, author's academic background, year of publication, journal, ab-

Chart 1. Analyzed articles

Year of publication	Reference
2006	52. Brasil (2006)
2008	45. Hennington (2008)
2009	17. Mori and Oliveira (2009)
	39. Mori, Silva and Beck (2009)
	37. Santos Filho and Figueiredo (2009)
	40. Trad and Espiridião (2009)
	30. Santos Filho et al. (2009)
	31. Guedes, Pitombo and Barros (2009)
	44. Heckert, Passos and Barros (2009)
	34. Pasche (2009)
	42. Ceccim and Merhy (2009)
2011	41. Pasche, Passos and Hennington (2011)
	51. Cardoso and Hennington (2011)
	32. Barros, Guedes and Roza (2011)
	47. Santos and Santo (2011)
2012	49. Araújo and Pontes (2012)
	29. Guedes, Roza and Barros (2012)
	36. Granja and Zoboli (2012)
	2. Brasil (2012)
	53. Brasil (2012)
2013	50. Becchi et al. (2013)
	35. Rios and Batistella (2013)
2014	19. Mori and Oliveira (2014)
	24. Calderon and Verdi (2014)
	22. Maerschner et al. (2014)
	23. Pinheiro and Jesus (2014)
	21. Martins and Luzio (2014)
	25. Santos Filho (2014)
	26. Pavan and Trajano (2014)
	20. Shimizu and Martins (2014)
	27. Roza et al. (2014)
	28. Andrade et al. (2014)
	48. Ferreira and Araújo (2014)
2015	38. Deus and Melo (2015)
	18. Pereira and Ferreira Neto (2015)
2016	33. Cardoso, Oliveira and Furlan (2016)

Source: Author's elaboration.

stract, method, conclusions) and analyzed the articles focusing on the two categories mentioned above (theoretical bases and reports on practice).

After charting, we read the articles and reduced the information into a single Excel worksheet containing the following information: 1) article title; 2) author's academic background; 3) year of publication; 4) journal; 5) theoretical bases; 6) reports on practice; and 7) database. Based on this information, we conducted an analysis of the articles using the Excel filter function, which counts items of information in the worksheet.

The discussion of this analysis, especially with regard to theoretical bases and reports on practice, draws on Campos[1] and the NHP reference guide mentioned above[2].

To perform the analysis of the categories, it was necessary to extract elements from the articles (often highlighting secondary aspects of the text), meaning that the review presented here is a construction of meaning[16] with the specific aim of exploring the field. This construction therefore brings to light aspects that were not necessarily intentionally revealed by the authors.

Results

With regard to year of publication, 5.5% of the articles were published between 2006 and 2008, 25% in 2009, 11% in 2011, 14% in 2012, 6% in 2013, 30% in 2014, and 8.3% between 2015 and 2016. The findings show that there were spikes in the number of articles published in 2009 and 2014. This may be explained by the fact that these years were the fifth and 10th anniversaries of the NHP, respectively, since journals tend to publish special thematic issues on commemorative dates.

This hypothesis is supported by an analysis of the journals in which the articles were published, with the journal Interface accounting for the majority of publications (18 articles), followed by the Journal of Science and Public Health (4 articles). In 2014, Interface published a special issue entitled "Institutional Support for the Humanization Policy". Of the 18 articles published by this journal, 10 were from the special issue. The remaining publications consisted of two articles each in the journals Health and Society and Work, Education and Health, one in other journals (Reports in Public Health, The World of Health, Physis: Journal of Public Health, Pan-Amazonian Journal of Health, Public Health Journal, Health in Debate, Texts and Contexts) and two Ministry of Health guides.

With regard to academic background, most of the authors (38%) had a degree in psychology, followed by nursing (23%), medicine (17%), dentistry and social work (each with 4.7%), social sciences (1.57%), physical education (3%), occupational therapy (3%), and information not available (3.10%). These findings may be explained by the fact that, as the reference guide states, NHP intersects with psychology, converg-

ing towards subjective issues such as interpersonal relations and, in the case of management, organizational, educational and institutional psychology.

Theoretical bases

The analysis of the theoretical bases used in the articles proved to be a complex task. Some articles adopt a specific epistemological frame of reference, engaging with authors who share the same perspective or with other authors who use different frames of reference, always highlighting the central epistemological differences. However, others draw on different epistemological perspectives and a range of authors, in some cases making it difficult to identify a specific theoretical base or determine whether various authors are cited by choice or due to lack of knowledge about the field.

In general, the discussions in the introductions and/or analyses were built on the following theoretical bases: theoretical frameworks developed around other classical theories that gave rise to the circle/institutional support methods[1]; schizoanalysis (Deleuze and Guattari); ergology (Schwartz); Hermeneutics (authors such as Gadamer and Heidegger); notions from the field of sociology (Habermas) and pedagogy (Paulo Freire). All of these perspectives, except ergology, were used by Campos[1] to develop the circle method.

One of the central findings of this review is therefore the evident dissemination of Campos' work as a reference for co-management in the NHP, possibly due to the publication of the reference guide. This does not necessarily mean that Campos's work is the origin of participatory management models, as suggested in the introduction. However, the author's influence on the studies could lead one to believe that this body of knowledge was produced solely by Campos. This aspect is therefore an important gap to be addressed by future studies aimed at revisiting the origins of participatory management and the emergence of co-management within the field of health.

Some of the articles specifically address the institutional support method proposed by Campos[17-33]. Santos Filho[25] analyzes institutional support drawing on notions of ergology proposed by Schwartz and Zarifian, which include pertinent

discussions about the importance of addressing relations and communication for promoting change.

Other articles use the guiding principles of the NHP and/or the discussion presented in Campos' book[1] as their theoretical basis, with some focusing specifically on management and others examining other aspects of policy[34-40]. From a theoretical point of view, these articles do not seem to add new ideas to the theories and concepts put forward by Campos[1]. However, the conceptual relations may be considered innovative depending on the perspective of the analysis. Generally speaking, articles describe experiences or field studies using a traditional frame of reference[35-38,40], with only one presenting methodological innovations[39].

Other theoretical bases identified in the articles include schizoanalysis, first expounded by Deleuze and Guattari[41,42]. Some articles did not explicitly mention schizoanalysis, but used terms and notions that are specific to the field and were therefore grouped in this category. Schizoanalysis is a line stemming from the institutionalist movement. It is grounded in psychoanalysis and, like other lines of thought stemming from the movement, it aims to promote the analysis of the day-to-day functioning of organizations. As Baremblitt[43] states, *The different schools of the institutionalist movement propose to foster, support and trigger processes of self-analysis and self-management in communities, collectives and groups of people* (p. 14).

Ergology also appears as an important frame of reference for discussing work processes and co-management[44,45,20]. Ergology, as defined by its founder Yves Schwartz, is the study of human activity and concrete everyday work. Its underlying notion is that work is always re-singularized or renormalized by the individual who performs it. There is no set standard; no matter how many rules are created, each worker has his/her own particular way of working[46].

Finally, albeit less common, some articles drew on the following theoretical bases: 1) Hermeneutics, mainly considering the focus on intersubjective relationships[47]; 2) Paulo Freire's pedagogy for liberation[48], which discusses the construction of protagonism from the revelation of the dominant classes; and 3) notions of democracy proposed by the sociologist Jürgen Habermas in his work The Theory of Communicative Action[49].

Reports on co-management in practice

With regard to practical co-management arrangements, most of the articles referred to a combination of actions. Although we recognize the importance of analyzing possible combinations of actions and their outcomes, for the purposes of this article we opted to explore separate practices.

The articles describe experiences of co-management involving the institutional support method. This methodology is described by Campos[1] and was adopted by Ministry of Health, which has been offering training courses for institutional supporters for some years.

The articles describe the implementation of institutional support through the following strategies: different types of meetings between professionals – case discussions, planning and evaluation, meetings with other services, conversation circles etc[19-23,26,22,33,38]; meetings including service users[31,26]; modification of health facility flow charts[24]; creation of working groups[24,26]; creation of steering committees, collegial management bodies and management contracts[17,18,20-22,26,29,33,38]; technical chambers and management collegiates[27]; humanization forums[29]; policy and program management support groups[33]; technical visits[18]; seminars, training courses and workshops[19,20,23,26,27,29].

Other articles not necessarily focusing on institutional support also described the composition of collective spaces for discussion, as recommended in the NHP guide, for example: humanization working groups and general meetings[35,50]; spaces for permanent health education and conversation circles[28,37,49]; team meetings[51]; the creation of collegial management bodies and management contracts; co-management workshops and seminars[35,37]; discussion seminars[44]; administrative reforms and the creation of permanent negotiating tables (to discuss labor issues)[37]; humanization technical units[35]; and promotion of staff participation in decision-making[48].

Another strategy mentioned as co-management in practice was the so-called expanded research community[32,39], which is a method used to analyze work processes. This strategy can be used to kickstart co-management (by promoting the analysis of work processes) or as a co-management practice itself.

The Ministry of Health guides identified by this review[2,52,53] discuss humanization in primary care settings, reinforcing patient participation[52] and presenting comprehensive technical guidelines for monitoring and evaluating proposals, seeking to promote humanization actions in a broad range of different contexts and dimensions (care and management) based on preset assessment parameters[53]. The guides also present specific guidance on co-management[2], listing the services where the organization of collective spaces should be put into practice.

Generally speaking, the creation of spaces to promote staff, management and, to a lesser extent, patient participation is common throughout the experiences. These spaces are described as opportunities for discussing, reflecting on and analyzing problems and needs in health facilities and identifying solutions.

Some of the articles highlight the need for greater adherence by managers to ensure the effective implementation of proposals[20,22,23,27,32,39]. They also present various challenges, including: high staff turnover rates[13,24], low level of participation in meetings[13,40]; political changes and lack of physical space[27]; lack of skills and experience in dealing with conflict[24]; lack of time available for meetings[19]; low levels of patient participation[22]; loss of job autonomy due to the need to discuss issues before making decisions[23].

In contrast, some of the articles highlight important changes in certain settings, including increased staff participation in decision-making and planning[22-24,28,29,50,32], the creation of networking groups, and shifts in care and management models, with workers taking ownership of management practices[23].

Discussion

The findings show that the devices described in the NHP reference guide[2] are reported as instruments to guide practice. Although the most commonly cited devices are management collegiates and management contracts, all the other devices recommended in the NHP are mentioned, albeit to a lesser extent. This may be considered a positive finding, since it suggests that that the policy is being "applied in practice". However, the simple "application" of the policy does not necessarily guarantee the success of a process like co-management, which was originally designed to take into account the subjective aspects of and communication between the participants in the process. Similarly, monitoring and evaluation strategies[53] fail to encompass these aspects, appearing to be rigid and based on inconsistent techniques.

Although some articles make the important point that co-management does not consist simply of bringing together people in collective spac-

es, but rather should address subjectivities, relations and even conflicts[12,20-22,24,26,47,49,51], in general, the findings show that co-management – created to transform subjectivities and work processes – ends up being redefined.

The findings show that, in practice, co-management seems to have been transformed into promoting meetings that institutionalize spaces for dialogue, as if creating these spaces is a positive outcome in itself, suggesting, without the need for evaluation, that the group process is participatory. The way these experiences are described suggests that the method has been taken up as a new technique that, rather than promoting reflection, results in mere reproduction. As Mori et al.[39] point out, *The devices are not ready-made 'things' that are implemented in particular services without analyzing the forms of organization that work processes have produced* (p.724).

In addition, many of the articles highlight that managers' support is fundamental. It is certainly important, but in a sense, the need for such support reveals a paradox or limitation of this method, since in practice, co-management, which ultimately aims to foster protagonism, autonomy and democratic relations, is seen to require, above all, the consent of those higher up the hierarchy. It is as if the model is only able to achieve a controlled transformation that maintains the logic it seeks to transform. Or is it the vicissitudes of practice in *everyday contradictions* that create these constraints?

Although most of the articles mention that there was positive change, such as increased participation, improvement in work processes etc, the studies appear to lack empirical evidence demonstrating that there was concrete change. One of the aims of this analysis was to propose reflections that invite scholars and professionals to think about other possibilities that go beyond those recommended in the reference guide. In this regard, we raise the following questions: Based on the history of participatory management models, what other methodologies could be effective? What can be done to develop participatory management considering that the simple creation of spaces does not ensure participation?

The articles analyzed by this review highlight a number of challenges to applying the devices recommended in the NHP reference guide, including staff resistance and lack of time, human and physical resources, and adequate training, etc. However, the findings show that little mention is made of what is lost or the limits in adopting the participatory model recommended in combination with co-management, or what are the limits imposed by the context and current capitalist culture.

With regard to the theoretical perspectives of co-management, our findings show that all of the frames of reference used by the studies, except ergology, appeared in Campos' work[1]. While on the one hand it is logical that that these studies should be framed within the theoretical bases that underpin the guide, on the other, this can be seen as a limitation, meaning that the proposal ends up being reified into a value, something that is good in itself, excluding other existing and previous models.

The findings therefore show that, in practical terms, the model has been adopted as yet another completion of steps and application of strategies and techniques to build collective spaces. Few studies have explored the relational processes in these spaces or limitations of these devices in practice. Further studies are therefore important to identify new proposals and practices that can complement co-management.

Final considerations

Our findings show that a large part of the articles intersect with the work of the author who created the circle method[1], which seeks to foster relational spaces for management. All the theoretical perspectives used by the studies, except ergology, are present in the work of Campos[1]. The practical experiences reported by the articles reveal that services are seeking to implement collective spaces. Most of the devices recommended by the NHP are mentioned in the articles, together with other collective spaces created with different names but the same function.

However, with regard to the relational method, which takes into account other aspects beyond administrative planning, the studies tend to focus on technical aspects, paying little attention to communication processes and the relational construction of these spaces. Although there is some discussion of these aspects, the articles fail to delve deeper into the theories or methodologies that underpin the relational practices for the construction of co-management.

It is worth highlighting that the sample of articles does not necessarily represent how co-management is being implemented across different contexts in Brazil. Furthermore, the analysis was based on the construction of meanings drawn from the readings performed by the authors of the current article, meaning that it involved the sig-

nification of the articles with a specific objective, not necessarily corresponding to the original intentions or ideas of the authors.

One of the limitations of the study is that we did not expand our search beyond the articles found on the databases. In this regard, the article references provide another source of publications on the topic of concern. However, these publications were not included because we conducted an integrative literature review. In addition, our analysis of the practical experiences was based on the reports of the practices and not the practices themselves, given that we were not present to analyze what took place in the settings reported by the studies.

Finally, throughout this article we have sought to propose reflections and raise questions that act as ideas or directions for future studies on this topic that could give rise to innovative analyses or management theories. We also hope that the reflections proposed by this study serve to draw attention to the need to explore and report other local experiences, thus facilitating access to developments in the *everyday practice* in local settings.

Collaborations

GC Doricci conducted the study, analyzed the data and wrote the article. C Guanaes-Lorenzi supervised all stages of the study and revised the article.

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