

The post-implementation scenario: investigating the sustainability of matrix support through professional practices

Ana Laura Salomé Lourencetti ¹; Carlos Alberto dos Santos Treichel ²; Maria Giovana Borges Saidel ¹; Rosana Teresa Onocko Campos ³.
¹School of Nursing, State University of Campinas, Campinas-SP, BR. ² Department of Maternal Child and Psychiatric Nursing, School of Nursing, University of São Paulo.³ Department of Collective Health, School of Medical Sciences, State University of Campinas, Campinas-SP, BR.

Introduction

In Brazil, matrix support is a collaborative care program that proposes the integration of mental health and primary care services. Similar to other public health policies, the sustainability of this program in these services depends on several factors, such as the behavioral change of health professionals in care practice.

Aim

Placed in a post-implementation scenario this study aims to investigate the perceptions of workers about the process of matrix support implementation in a medium-sized municipality seeking the barriers and facilitators regarding the sustainability of this program in the services routine.

Methods

The matrix support implementation process took place between 2019 and 2021 and, one year after its completion and removal of the research team, professionals from primary care and mental health services participated in in-depth interviews and observations guided by previous scripts based on the domains proposed by The Theoretical Domains Framework.

Results

Eleven professionals participated in the interviews, and approximately 50 professionals were observed during team and matrix support meetings. After a hybrid analysis of the contents collected, it was identified that the most significant facilitators related to domains of knowledge, skills, and beliefs about capabilities. The barriers were related with contexts and resources (material resources and organizational culture) and beliefs about consequences.

Conclusion

Domains of knowledge, skills, and beliefs about capabilities can be associated with the effectiveness of training and stakeholder education strategies used during the implementation process. However, the reported barriers stand out: the sustainability of matrix support was affected by the lack of beliefs about the effectiveness of the program in a context with a lack of resources and organizational barriers. This study also reinforces the use of TDF to identify barriers and facilitators that support the practice of health policies in routine services.

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