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## THE ROLE OF THE MULTIPROFESSIONAL TEAM IN THE MENTAL HEALTH OF USERS AND WORKERS IN PRIMARY CARE

Eronildo José dos Santos<sup>1</sup>, Simone Souza de Freitas<sup>2</sup>, ElloísaManuely dos Santos<sup>3</sup>, Cristiane Rodrigues da Silva Machado<sup>4</sup>, Ivânia Thaís Ferreira De Lima<sup>5</sup>, Talita de Andrade Silva<sup>6</sup>, Athos Phillip de Carvalho Chaves<sup>7</sup>, Alexandre Leonidas Pereira<sup>8</sup>, Rosileide Severina de Araújo<sup>9</sup>, Mirtes Carla Caetano de Freitas<sup>10</sup>, Jakeline Sabrina Alves de Moraes<sup>11</sup>, Maria de Fátima Silva Queiroz dos Santos<sup>12</sup>, Jussara Passos de Almeida<sup>13</sup>, Rebeca de Sousa Costa da Silva<sup>14</sup>, Julianna Maria Araújo da Silva<sup>15</sup>, Ligia Ferreira de Lima<sup>16</sup>, Robson Gomes dos Santos<sup>17</sup>, Sheyla Evoize Ferreira Fernandes<sup>18</sup>, João Lino de Oliveira Júnior<sup>19</sup>, Jaciara Fernanda Mendonça de Sales Braga<sup>20</sup>, Bárbara da Silva Rocha<sup>21</sup>, Ana Paula Mendes Batista da Silva<sup>22</sup>, Jackeline Alcoforado Vieira<sup>23</sup>, Illielda Arianny da Silva Nascimento<sup>24</sup> and Emmanuela Kethully Mota dos Santos<sup>25</sup>

<sup>1</sup>Specialist in Occupational Nursing from Faculdade Venda Nova do Imigrante, <sup>2</sup>Doctoral candidate in nursing at the Postgraduate Program in Nursing (PPGENFERMAGEM) of the Health Sciences Center of the Federal University of Pernambuco-UFPE,

<sup>3</sup>Psychology student at UNIVISA, <sup>4</sup>Nurse graduated from the Federal University of Pernambuco (UFPE), <sup>5</sup>Bachelor's degree in Nursing from UNIBRA and postgraduate degree in emergency and urgent care from the CEFAPP group, <sup>6</sup>Nursing from the Federal University of Pernambuco (UFPE), <sup>7</sup>Psychology degree from the Association of Education and Culture of Mato Grosso do Sul - Integrated Colleges - AEMS/MS, <sup>8</sup>Specialist in Emergency, Urgent Care and Intensive Care from Faculdade Prominas, <sup>9</sup>Bachelor's degree in Nursing from IBGM/UNIBRA College, <sup>10</sup>Nurse graduated from UNISAOMIGUEL College, <sup>11</sup>Nurse graduated from Salgado de Oliveira University (Universo), <sup>12</sup>Medicine from UNINASSAU, <sup>13</sup>Nursing at Centro Universitário Estácio do Recife, <sup>14</sup>Nurse graduated from the University Center - UNIFACISA, <sup>15</sup>Nurse with a postgraduate degree in Hospital Management and Health Services from the Metropolitan Faculty of Sciences and Technology, FAMEC, <sup>16</sup>Master's degree in Health Management and Economics (UFPE), <sup>17</sup>Doctoral candidate in nursing at the Postgraduate Program in Nursing (PPGENFERMAGEM) of the Health Sciences Center of the Federal University of Pernambuco-UFPE, <sup>18</sup>Nurse with a Postgraduate Degree in Emergency and Urgent Care, and a Postgraduate Degree in Cardiology and Hemodynamics from Faculdade Novo Horizonte, <sup>19</sup>Nurse graduated from the Higher Education Foundation of Olinda (FUNESO), <sup>20</sup>Nutritionist from the Maurício de Nassau University Center, <sup>21</sup>Nurse graduated from the Pernambuco Faculty of Health (FPS), <sup>22</sup>Nurse graduated from the Higher Education Foundation of Olinda (FUNESO), <sup>23</sup>Obstetric Nurse certified by the Higher Education Foundation of Olinda (FUNESO), <sup>24</sup>Physiotherapist from Centro Universitário Tabosa de Almeida - ASCES-UNITA, <sup>25</sup>Master's degree in Health Management and Economics (UFPE)

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#### \*Corresponding author:

Simone Souza de Freitas

### ABSTRACT

This study aims to analyze the role of the multiprofessional team in the mental health of users and workers in Primary Care, identifying strategies, challenges, potentialities, and practices that qualify comprehensive care within the scope of Primary Health Care. This is an integrative literature review. The construction of the review followed systematic steps: definition of the research question, search for studies in databases, categorization of selected materials, critical evaluation, interpretation of findings, and synthesis of the knowledge produced. The search for articles was conducted in two databases: the Virtual Health Library (VHL/MEDLINE) and PubMed – National Library of Medicine (NLM).

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## INTRODUCTION

Mental health currently constitutes one of the greatest challenges faced by public health systems worldwide (Silva, 2025). In the Brazilian context, marked by social inequalities, chronic vulnerabilities, and profound transformations in the world of work, psychological suffering has become increasingly evident among users and also among workers in Primary Care (Brito, 2025). For this reason, understanding and strengthening the role of the multidisciplinary team in the promotion, prevention, and care of mental health has become a structuring axis for the qualification of Primary Health Care (PHC), a fundamental pillar of the organization of the Unified Health System (SUS) (Barros, 2025). The consolidation of Primary Health Care (PHC) as the preferred entry point to the system represents an important milestone in recent decades, especially after the Psychiatric Reform and the creation of the Psychosocial Care Network (RAPS) (Moraes, 2025). This historical movement broadened the understanding of mental health care beyond the hospital-centric model, establishing the centrality of the community, social relations, and the comprehensiveness of care (Francelino, 2025). In this scenario, the multidisciplinary team assumes a strategic and irreplaceable role, as it integrates different areas of knowledge that, when articulated, enhance the capacity to identify risks, address demands, develop bonds, and produce unique interventions that recognize the complexity of human life (Belotti, 2025). The joint action of professionals such as nurses, doctors, psychologists, social workers, community health agents, occupational therapists, pharmacists, and other categories goes beyond the sum of individual skills and constitutes a collective practice that expands the effectiveness of primary health care (Barros, 2025). The multidisciplinary approach allows for the construction of more integrated therapeutic projects, considering biological, psychological, social, cultural, and work-related dimensions involved in mental suffering (Brito, 2025).

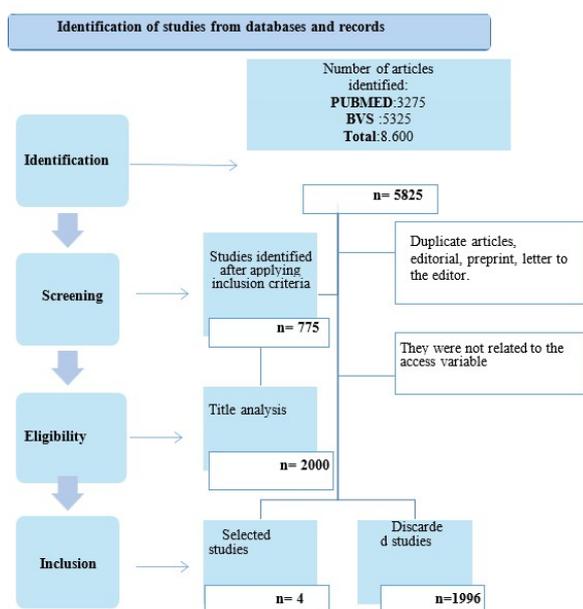
In the context of user care, this is expressed in actions ranging from qualified listening, welcoming, psychosocial risk classification, brief interventions, therapeutic groups, home visits, and coordination with services of the Psychosocial Care Network, to health promotion and community strengthening initiatives (Francelino, 2025). A central aspect of mental health in primary health care is the early identification of signs of psychological distress. Often, the gateway to these manifestations occurs in consultations for physical symptoms, such as chronic pain, nonspecific complaints, or stress-related illnesses (Silva, 2025). In this sense, the multidisciplinary team needs sensitivity and technical preparation to recognize that suffering can be expressed in different ways, not always directly verbalized (Castro, 2025). The presence of community health agents, for example, is fundamental to detect changes in behavior, isolation, family conflicts, or loss of autonomy, as they maintain daily contact with the territory and with the life stories of families (Santos, 2025). Another essential component refers to matrix support in mental health, an instrument that enables integration between RAPS devices (such as CAPS, NASF-AB, specialized outpatient clinics, and community services) and primary care teams (Brito, 2025). Matrix support strengthens co-responsibility, promotes case discussions, organizes flows, and improves interventions. National research demonstrates that the presence of matrix support contributes to expanding the capacity of teams to manage complex situations, reduces excessive medicalization, and promotes more humanized practices, based on the protagonism of users (Franzon, 2025). In this way, the multidisciplinary team ceases to act in a fragmented manner and becomes a collective that plans, implements, and evaluates strategies in an integrated way (Dos Santos, 2025). The mental health of Primary Care workers has also become a priority topic in contemporary discussions (Brito, 2025). The daily routine of these professionals involves intense pressures: high volumes of care, scarce resources, contact with situations of extreme poverty, violence, social vulnerabilities, prolonged suffering of service users, and continuous emotional demands (Silva, 2025).

This context, combined with the precarization of working conditions, team turnover, and feelings of powerlessness, generates physical and emotional strain that may progress to mental illness. Syndromes such as burnout, anxiety, depression, and occupational stress are already recognized as significant health issues in the daily routine of PHC (Castro, 2025). Thus, mental health care should encompass not only the population served but also the professionals who make up the network. The multidisciplinary team needs to develop internal strategies for self-care, mutual support, and institutional strengthening (Oliveira, 2025). The implementation of conversation circles, listening groups, social interaction spaces, and clinical-institutional supervision are practices recommended by various studies to reduce workers' illness and improve the organizational climate (Franzon, 2025). Moreover, management plays a fundamental role in promoting healthy work environments, establishing adequate workflows, supporting continuing education processes, and ensuring professional appreciation. A welcomed and strengthened team is better able to welcome and strengthen those who seek the service. Another relevant element is the importance of light technologies in mental health care (Santos, 2025). Unlike purely biomedical interventions, light technologies involve listening, dialogue, bonding, welcoming, accountability, and shared decision-making. They are essential tools in Primary Health Care and represent a powerful form of care that recognizes the uniqueness of each individual. Professionals who use these technologies expand their ability to understand suffering not only as a clinical diagnosis but as a human experience influenced by social relationships, working conditions, life trajectories, and cultural contexts (Oliveira, 2025).

The reframing of mental health care practices therefore requires the multidisciplinary team to adopt an ethical, clinical, and political stance. Ethical, because it involves respect for each person's dignity, autonomy, and uniqueness; clinical, because it demands technical knowledge, sensitivity, and analytical capacity; and political, because it is connected to broader processes of social transformation, rights advocacy, and strengthening of the Unified Health System (SUS) (Oliveira, 2025). The articulation among these three axes is essential for care to be comprehensive, humanized, and aligned with the principles of the Psychiatric Reform (Santos, 2025). Finally, it is emphasized that the work of the multidisciplinary team in the mental health of users and workers in Primary Care is not limited to a fixed set of tasks or protocols, but constitutes an ongoing process of collective construction, critical reflection, and shared learning. It requires openness to new practices, willingness for interdisciplinary work, and acknowledgment of the complexity of mental health (Castro, 2025). By strengthening these practices in the daily routine of PHC, it contributes to consolidating a care network capable of promoting well-being, preventing health issues, reducing inequalities, and offering more sensitive responses to the real needs of the population (Belotti, 2025). Thus, this study aims to analyze the performance of the multidisciplinary team in the mental health of users and workers in Primary Care, identifying strategies, challenges, potentialities, and practices that qualify comprehensive care within the scope of Primary Health Care.

## MATERIALS AND METHODS

This is an integrative literature review, whose purpose is to provide a broad understanding of a specific phenomenon by bringing together different perspectives through the combined analysis of evidence extracted from various primary studies. The development of the review followed systematic steps: defining the research question, gathering studies from the databases, categorizing the selected materials, conducting a critical evaluation, interpreting the findings, and, finally, synthesizing the knowledge produced. The guiding question was developed with the purpose of directing the search for relevant studies in scientific databases and was defined as follows: How do multidisciplinary teams in Primary Care act in the promotion, prevention, and mental health care of users and workers, and which strategies have proven effective in qualifying this care?



Source: Adapted from Silva *et al.* (2025).

**Figure 1. PRISMA flowchart for the selection of articles included in the integrative review**

The search for articles was conducted in two databases: the Virtual Health Library (BVS/MEDLINE) and PubMed – National Library of Medicine (NLM). The descriptors and keywords used were selected based on the standardized terminology of the Health Sciences Descriptors (DeCS). During the search process, the terms were combined using the Boolean operators “OR” and “AND,” applying the following combinations: Mental Health; Health Workers; multidisciplinary team; Patient. Next, specific filters were applied regarding language, publication period, study type, topic addressed, and availability of the full text. Only open-access articles published in English or Portuguese between 2023 and 2025 were included, provided they addressed as their central theme the mental health of SUS health professionals and users, the coping strategies used by these workers, and the impacts of these issues on the quality of care provided. After applying these criteria, the titles and abstracts of the identified articles were read to verify their alignment with the research objectives. Finally, a full reading of the articles was conducted to select the studies that answered the guiding question (Figure 1).

The studies that did not meet the previously established criteria were discarded, including those that did not answer the guiding research question or that were duplicates. Editorials, opinion articles, magazine columns, experience reports, and works without approval from a Research Ethics Committee were also excluded, according to guidelines for selecting productions with high scientific rigor. The selected articles were analyzed according to the following information: publication identification (authors, year, study type, objective, and main findings). Data collection was carried out in May 2025, and the analysis of the selected articles was performed independently by two reviewers. The extracted data were tabulated in a dedicated spreadsheet and analyzed independently by two researchers.

## RESULTS AND DISCUSSION

The systematic search in the databases initially allowed the identification of a broad set of publications related to mental health within Primary Care and the multiprofessional practices developed in this setting. After applying the inclusion and exclusion criteria — which considered the time frame, availability of the full text, alignment with the theme, and methodological relevance — 104 studies were selected to compose the final sample of this review. These works presented varied approaches, involving qualitative research, experience reports, document analyses, and quantitative studies that explored aspects of promotion, prevention, care, and the organization of mental health work in Primary Care. The analysis of the selected studies made it possible to identify thematic axes that reflect the performance of the multidisciplinary team in mental health care for both users and workers in Primary Care. In general, it was observed that multidisciplinary work is characterized by interdisciplinarity, the collective construction of therapeutic projects, and the recognition of the complexity involved in the psychosocial demands that reach the services. Many of the articles highlighted that Primary Care is often the first point of contact for people experiencing mental distress, which reinforces the need for teams prepared to welcome, listen to, and properly refer cases. The first thematic axis identified was welcoming and qualified listening, which emerged as a central practice for the early identification of signs of emotional distress. According to the study by Oliveira (2025), professionals such as nurses, psychologists, physicians, social workers, and community health agents play a decisive role in creating bonds and reducing barriers to accessing care. Sensitive listening was identified as a strategy capable of strengthening trust between users and services, as well as promoting the understanding of each individual's unique needs.

**Table 1. Summary of findings from the integrative review, 2025**

| Author(s)                           | Year | Type of Study                                | Objective   | Main Findings   |
|-------------------------------------|------|--|---|---|
| Silva Filho, J. B. <i>et al.</i>    | 2024 | Experience report                            | To describe the practical experience of a multidisciplinary team caring for individuals with mental disorders in Primary Health Care (PHC).                             | The team used mental health risk stratification; each professional (doctor, psychologist, social worker, dentist, nurse) had a distinct role: medication treatment, psychotherapy, social mediation, dental care, and biopsychosocial organization. This shows how integrated multidisciplinary work strengthens care within the community. |
| Costa, J. de F. <i>et al.</i>       | 2023 | Original qualitative study / policy analysis | To investigate the challenges of matrix support in primary care to promote comprehensive mental health care.  | They identify barriers to the effectiveness of matrix support, such as lack of structure, communication between teams, and limited resources, which impacts the integration of multidisciplinary practices and the continuity of care.  |
| Mendonça, J. M. T. de <i>et al.</i> | 2023 | Cross-sectional quantitative study           | To assess the knowledge of primary health care professionals about mental health using the mhGAP (Manual of Interventions for Mental Disorders in Primary Health Care). | The study shows that, among 354 participating professionals, there are gaps in knowledge, especially in communicating with emotional distress without a specific clinical diagnosis and in essential care practices, suggesting the need for continuous training to strengthen multidisciplinary practice.                                  |
| Schweickardt, J. C. <i>et al.</i>   | 2024 | Qualitative descriptive study                | To investigate the perceptions of primary care professionals regarding their responsibility in the comprehensive care of people with mental disorders.                  | Based on interviews with 7 professionals from a Family Health team, a movement of taking responsibility for mental health care became evident: bonding, listening, and referral are central; stigma and care flows influence the perception of this care; nurses were identified as key figures in coordinating this process.               |

Source: The authors. 2025.

In several studies, reception was described not only as an initial step but as a permanent stance of the team, directly influencing the quality of care provided. The second axis referred to the development of Singular Therapeutic Projects (STPs) and interdisciplinary interventions. According to the findings of Santos (2025), teamwork enables the integration of different types of knowledge and practices, expanding the ability to analyze situations and the effectiveness of proposed interventions. In the third axis, the studies indicated that the STP, when constructed collectively, fosters shared responsibility among professionals and strengthens person-centered and territory-based care. Furthermore, therapeutic workshops, joint home visits, discussion circles, educational activities, and operative groups were frequently mentioned strategies that successfully promoted mental health within the community. According to Belotti (2025), an important finding in his study refers to the coordination between Primary Care and the Psychosocial Care Network (RAPS). The studies showed that intersectoral collaboration and joint work with Psychosocial Care Centers (CAPS), specialized services, schools, social assistance, and other community resources enable more comprehensive responses to mental health demands. However, several authors highlighted persistent challenges, such as weak communication between services, difficulties in care regulation, and structural limitations that affect the flow of users across points of care. The fourth axis concerned the mental health care of Primary Care workers themselves. The literature revealed that emotional illness among health professionals is recurrent, driven by factors such as work overload, lack of resources, constant exposure to suffering, and weak institutional support. The studies showed that collective practices, listening spaces, support groups, and institutional supervision contributed to reducing occupational stress and strengthening the mental health of teams. Some analyzed experiences reported the importance of care circles, moments of critical reflection on daily work, and psychosocial interventions that promote well-being and the humanization of relationships. Finally, results emerged related to the challenges and limitations in consolidating multiprofessional mental health care within Primary Care. The main obstacles identified were the insufficient specific training of professionals, the still predominant biomedical culture, team turnover, the difficulty in implementing interdisciplinary practices, and the lack of institutional and matrix support. Despite these limitations, the selected studies pointed to significant advancements, highlighting that the presence of mental health matrix support, ongoing education, and the strengthening of collaborative work are central elements for improving care. Overall, the results show that multiprofessional action in the mental health of Primary Care users and workers is essential for promoting more comprehensive, humanized practices oriented toward the real needs of the territory. The literature reinforces that, when developed collaboratively, such actions increase the problem-solving capacity of teams, strengthen individuals' autonomy, and contribute to building services better prepared to deal with the complexity of psychological distress in the community context. These findings indicate the relevance of continuous team development and the expansion of policies that support mental health care in Primary Care.

## CONCLUSION

The literature review made it possible to understand that the work of the multiprofessional team in the mental health care of Primary Care users and workers constitutes a fundamental axis for strengthening care practices within the territory. The analyzed studies showed that collaborative work, supported by interdisciplinarity and shared responsibility, enhances the teams' ability to identify early signs of emotional distress, build meaningful bonds, and offer more comprehensive responses to the population's mental health needs. The review also showed that reception, qualified listening, the development of Singular Therapeutic Projects, and the implementation of collective actions are central strategies for promoting comprehensive, humanized, and context-based care for the psychosocial demands that emerge in everyday Primary Care. In addition, the coordination between Primary Care and the Psychosocial

Care Network proved to be essential for ensuring continuity of care, expanding access to specialized services, and strengthening intersectoral practices. At the same time, the results revealed challenges that still limit the consolidation of multiprofessional practices in mental health, such as insufficient specific training, the predominance of the biomedical model, weaknesses in institutional support, communication difficulties between services, and work overload that affects both the health of professionals and the quality of care provided. However, it was noted that initiatives such as matrix support, continuing education, listening spaces for workers, and collective care actions have the potential to transform practices and improve the response to psychological distress within the territory. Thus, the multiprofessional team plays an essential role in promoting mental health for both users and workers in Primary Care. An integrated approach—sensitive to the complexity of social determinants and committed to strengthening the care network—contributes to building more effective, welcoming, and humanized services. The need for continuous investment in training, institutional support, mental health policies, and collaborative strategies that sustain interdisciplinary practices and foster the consolidation of person-centered care within individuals' life contexts is reinforced.

## REFERÊNCIAS

- BARROS, Sarah Silva Costa et al. O papel da equipe multidisciplinar na promoção da saúde mental na Atenção Primária. *Journal of Medical and Biosciences Research*, [S. l.], v. 1, n. 1, p. 927–934, 2025. DOI: 10.70164/jmbr.v1i1.663. Disponível em: <https://journalmbr.com.br/index.php/jmbr/article/view/663>. Acesso em: 18 nov. 2025.
- BRITO, T. M., OLIVEIRA, A. B. DAS M., LIMA, A. A. DA S., BARBOSA, K. M. G., CRUZ, I. S. L. DA; SOUZA, J. N., ARAUJO, M. DE O., SOUZA, M. C. DE; MACIEL, R. R. B. T. Conhecimento e práticas inter e multiprofissionais: um olhar dos profissionais da atenção primária à saúde. *Revista Interdisciplinar de Saúde e Educação*, v. 6, n. 1, p. 44–61, 31 jul. 2025.
- BELOTTI, Meyrielle; IGLESIAS, Alexandra; FREITAS, Grace Kelly Filgueira; PASSOS, Bárbara Lima Gravino; PASSOS, Guilherme Augusto Loiola; ESPOSTI, Carolina Dutra Degli. Interprofissionalidade e Matriciamento na Atenção Básica: Percepções dos Profissionais. *Revista Psicologia e Saúde*, [S. l.], v. 17, p. e17251870, 2025. DOI: 10.20435/pssa.v1i1.1870. Disponível em: <https://pssaucdb.emnuvens.com.br/pssa/article/view/1870>. Acesso em: 18 nov. 2025.
- COSTA, Jackeline de Freitas; DA SILVA, Jonas Rayfe Vasconcelos; DE MEDEIROS, Bruno Gonçalves; DE AZEVEDO, Dulcian Medeiros; PINTO, Tiago Rocha. Apoio matricial na atenção básica: desafios para integralidade do cuidado em saúde mental: Apoio matricial na atenção básica. *Revista Brasileira em Promoção da Saúde*, [S. l.], v. 36, p. 1–10, 2023. DOI: 10.5020/18061230.2023.13156. Disponível em: <https://ojs.unifor.br/RBPS/article/view/13156>. Acesso em: 17 nov. 2025.
- CASTRO, Maria Carolyne da Silva; OLIVINDO, Dean Douglas Ferreira de. ASSISTÊNCIA DE ENFERMAGEM EM SAÚDE MENTAL NA ATENÇÃO BÁSICA. *Revista Ibero-Americana de Humanidades, Ciências e Educação*, [S. l.], v. 11, n. 5, p. 4779–4802, 2025. DOI: 10.51891/rease.v11i5.19375. Disponível em: <https://periodicorease.pro.br/rease/article/view/19375>. Acesso em: 18 nov. 2025.
- DOS SANTOS, Antonio Nacilio Sousa et al. POR UMA ATENÇÃO PRIMÁRIA TRANSFORMADORA: FORMAÇÃO E CAPACITAÇÃO PROFISSIONAL PARA FORTALECER O TRABALHO NO CUIDADO A SAÚDE DA FAMÍLIA. *ARACÊ*, [S. l.], v. 7, n. 3, p. 11001–11030, 2025. DOI: 10.56238/arev7n3-054. Disponível em: <https://periodicos.newsciencepubl.com/arace/article/view/3700>. Acesso em: 18 nov. 2025.
- FRANZON, Gabriel Alberto Golveia. O matriciamento em saúde mental na ótica de enfermeiros: uma revisão de escopo. Orientador: Guilherme Corrêa Barbosa. 2025. Trabalho de conclusão de residência (Residência em Saúde da Família) - Faculdade de

- Medicina, Universidade Estadual Paulista (UNESP), Botucatu 2025.
- FRANCELINO, A. O., RAMOS, B. G., MELO, C. M. I. de; SANTOS, C. R. dos; SILVA, H. N., MALHEIROS, S. B., HESPANHOL, V. de S., BRITO, V. V. C. A atuação da equipe multiprofissional na estratégia de saúde da família e o cuidado ao paciente com hipertensão e diabetes. *Brazilian Journal of Health Review*, [S. l.], v. 8, n. 2, p. e78606, 2025. DOI: 10.34119/bjhrv8n2-160. Disponível em: <https://ojs.brazilianjournals.com.br/ojs/index.php/BJHR/article/view/78606>. Acesso em: 18 nov. 2025.
- MENDONÇA, Joana Moscoso Teixeira de; ESHRIQUI, Ilana; ALMEIDA, Leticia Yamawaka de; GOMES FILHO, Valmir Vanderlei; SCHUNK, Livia; SOUSA, Ana Alice Freire de; SANTOS, Larissa Karollyne de Oliveira; FORTES, Sandra. Conhecimento de profissionais da atenção primária em saúde mental: diagnóstico pelo mhGAP. *Revista de Saúde Pública, São Paulo, Brasil*, v. 57, n. Supl.3, p. 1–13, 2023. DOI: 10.11606/s1518-8787.2023057005272. Disponível em: <https://revistas.usp.br/rsp/article/view/219411..> Acesso em: 17 nov. 2025.
- MORAES, A. F. de; SILVA, J. C. B. da. Produção de sentidos sobre saúde mental por usuários da Atenção Básica. *Revista Thema, Pelotas*, v. 24, n. 1, p. 28–49, 2025. DOI: 10.15536/thema.V24.2025.28-49.3553. Disponível em: <https://periodicos.ifsul.edu.br/index.php/thema/article/view/3553>. Acesso em: 18 nov. 2025.
- OLIVEIRA, Alex Jose Melo et al. FORTALECIMENTO DO ACOLHIMENTO HUMANIZADO NA ATENÇÃO PRIMÁRIA À SAÚDE. *ARACÊ*, [S. l.], v. 7, n. 8, p. e7129, 2025. DOI: 10.56238/arev7n8-034. Disponível em: <https://periodicos.newsciencepubl.com/arace/article/view/7129>. Acesso em: 18 nov. 2025.
- SILVA FILHO, J. B. et al. *Vivência prática da equipe multiprofissional no cuidado do paciente com transtorno mental na Atenção Primária à Saúde*. *Research, Society and Development*, v. 13, n. 3, e45453, 2024. Disponível em: <https://rsdjournal.org/rsd/article/view/45453>. Acesso em: 17 nov. 2025.
- SILVA, L. C. da; ALMEIDA, C. C. de A., ANDRADE, E. J., LIMA, F. de; NOGUEIRA, G. C., BOHÓRQUEZ, K. de F. F., MARTINS, S. R., PALMEIRA, S. P., MACHADO, S. R. E., NOBRE, S. Érika F. R. Linha de cuidado de saúde mental para profissionais de saúde: medidas de implementação para a segurança psicológica. *Cuadernos de Educación y Desarrollo*, [S. l.], v. 17, n. 4, p. e8003, 2025. DOI: 10.55905/ejhrv6n1-064. Disponível em: <https://ojs.cuadernoseducacion.com/ojs/index.php/ced/article/view/8003>. Acesso em: 11 maio. 2025.
- SCHWEICKARDTJC, CarvalhoMS, SiqueiraMS, PavaniFM. Percepções dos profissionais da atenção básica em saúde sobre a responsabilidade no cuidado integral às pessoas com transtornos mentais. *Rev.APS [Internet]*. 2024; 27(único): e272443961. DOI: <https://doi.org/10.34019/1809-8363.2024.v27.43961>
- SILVA, Livia Carneiro; SOUZA, Luciana Thais Rangel. SAÚDE MENTAL NA ATENÇÃO BÁSICA: UMA ABORDAGEM SOCIAL. *ARACÊ*, [S. l.], v. 7, n. 1, p. 3372–3393, 2025. DOI: 10.56238/arev7n1-202. Disponível em: <https://periodicos.newsciencepubl.com/arace/article/view/2975>. Acesso em: 18 nov. 2025.
- SANTOS, K. H. dos; ANDRADE, B. C. B., PACHECO, A. C. M., PEREIRA, M. M., RODRIGUES, C. S. S., MONTEIRO, E. C., OLIVEIRA, A. C. B. da S. de; MOREIRA, E. C. de M. O trabalho da equipe de saúde frente a saúde mental e psiquiatria. *OBSERVATÓRIO DE LA ECONOMÍA LATINOAMERICANA*, [S. l.], v. 23, n. 5, p. e9956, 2025. DOI: 10.55905/oelv23n5-096. Disponível em: <https://ojs.observatoriolatinoamericano.com/ojs/index.php/olel/article/view/9956>. Acesso em: 18 nov. 2025.

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