

## Collective resilience: A glance over the work on Primary Health Care

### *Resiliência coletiva: um olhar sobre o trabalho na Atenção Primária à Saúde*

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**ABSTRACT** Primary Health Care (PHC) was considered to be an important pillar to face the COVID-19 pandemic, which carried a series of stressful and traumatic factors that required adjustments to daily life. Being aware of the territory, of the access, of the bond linking the user to the team, of the assistance integrity, besides the follow-up of vulnerable families and cases became fundamental strategies. It was also required to stand up for problems resulting from the long-lasting social isolation and the precarious conditions of both social and economic lives, such as mental derangements, domestic violence, alcohol addiction and the sharpening or development of permanent conditions, with consequences that are hard to predict, and that require integral and longitudinal attention. The precarious social and economic conditions that affected part of the population, grounded on two social traumas – colonization and slavery –, which led to an extremely unequal development concerning income distribution and the fruition of social rights, became even sharper during the pandemic, widening challenges concerning the health care. The potentialities and fragilities of life experiences following the COVID-19 makes it urgent to deepen what is known about collective resilience. This theoretic study discusses bibliographic references and offers a critical analysis of the concept, stressing its importance nowadays, besides applying it to Brazilian PHC context.

**KEYWORDS** Collective resilience. Marks of resilience. Existential territories. Collective.

**RESUMO** A Atenção Primária à Saúde (APS) foi considerada importante pilar frente à pandemia da covid-19, que trouxe uma série de fatores estressantes e traumáticos, requerendo ajustes no cotidiano. O conhecimento do território, o acesso, o vínculo entre usuário e equipe, a integralidade da assistência, o monitoramento das famílias vulneráveis e o acompanhamento dos casos constituíram estratégias fundamentais. Coube também abordar problemas oriundos do isolamento social prolongado e da precarização da vida social e econômica, como transtornos mentais, violência doméstica, alcoolismo e agudização ou desenvolvimento de agravos crônicos, cujas consequências são de difícil previsão e exigem cuidados integrados longitudinais. A situação de precariedade social e econômica em que se encontra parte da população, fundada em dois traumas sociais – a colonização e a escravidão –, que produziram desenvolvimento marcado pela extrema desigualdade na distribuição de renda e no usufruto de direitos sociais, foram agudizadas na pandemia, ampliando os desafios no cuidado em saúde. Diante das potencialidades e fragilidades das vivências após a covid-19, faz-se necessário aprofundar os conhecimentos sobre resiliência coletiva. Este ensaio teórico discute referências bibliográficas e oferece análise crítica do conceito, destacando a importância deste na contemporaneidade, e aplicando-o ao contexto da APS do Brasil.

**PALAVRAS-CHAVE** Resiliência coletiva. Marcas de resiliência. Territórios existenciais. Coletivo.

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## Introduction

The COVID-19 pandemic carried a series of stressful and traumatic factors that required adjustments to daily life<sup>1-3</sup>. The Primary Health Care (PHC) stood out as a fundamental pillar to face this emergence: studies show that nearly 80% of the total were light cases, and great part of the moderate cases did look for assistance at the public health care<sup>4-7</sup>.

Being aware of the territory, of the access, of the bond linking the user to the team, of the assistance integrality, besides following-up vulnerable families and both suspicious and light cases were important strategies, not only to refrain the pandemic, but also to avoid the situation of people infected to get even worse<sup>7,8</sup>. The PHC was responsible as well for dealing with problems resulting from the long-lasting social isolation and from the precarious social and economic life conditions, such as mental disorders, domestic violence, alcoholism and the sharpening or development of chronic disorders that led to unpredictable consequences and required longitudinal integral assistance<sup>8</sup>.

The precarious social and economic situation that achieved part of the population at that moment, concerning ethnic, social and economic conditions, resulted from the country's history itself, grounded on two huge social traumas – colonization and slavery –, which led to a development marked by extreme inequality as to income distribution and the fruition of social rights<sup>9,10</sup>. Those conditions became even more critical during the pandemic, stressing challenges when dealing with health assistance to be provided to the population<sup>11-14</sup>.

Considering both the potencies and the fragilities of real life experiences in Brazil, particularly following the COVID-19 pandemic, one must go deeper into the knowledge involving the concept of resilience, so as to be prepared to face both adversities and daily traumas as those witnessed in the PHC context. Resilience stands as the

trans-subjective process to be organized as one possible answer to the trauma, yet bringing up the possibility to recover some kind of development and construction of existential territories<sup>9,15</sup>.

The present paper is a theoretical essay produced by PHC researchers and workers, women dedicated to reading theoretical papers and outcomes of other researchers published by other authors about the concept of resilience. Based on critical consideration, this paper discusses how the concept evolved to become collective resilience, with conceptions that intertwine with philosophers Jean Deleuze and Gilles Guattari. It is therefore proposed the debate to be intensified so as to re-think and to re-construct the way the concept of resilience is understood.

This essay is organized in five sections. The first one presents studies on resilience origin and definition, and proposes the concept's complexity to come into the debate; the three following sections discuss the concepts that did outline the way towards the comprehension of the collective resilience meaning. Last, it exposes considerations on how the resilience concept applies to the PHC.

## Over and above overcoming: resilience complexity

The etymology of the word 'resilience' comes from the Latin, specifically from the words *resilio*, *resilire*, *Resilio*. According to two Latin-Portuguese dictionaries, it apparently derives from *re* (a prefix that alludes to a going back) and *salio* (which means to leap over or jump), implying the idea of jumping backwards, that is, a going back by jumping. Considering the English language lexicon, the term accepts two interpretations: the first one is about an individual's aptitude to quickly return to a regular health or well-being condition following infirmities or adversities; the second

definition refers to the ability of a substance to restore its original shape when pressure is withdrawn: flexibility<sup>16</sup>.

The concept of resilience is rooted in the Physics, specifically referring to the ability of an object or material to get back to its original format after being submitted to an external force. As time passed on, this notion was adopted by other sciences as a metaphor. At first, Psychology<sup>17-19</sup> and Ecology<sup>20</sup> used it to describe recovery methods following traumas that affect both individuals and ecosystems. Later, the term found its place in the Social Sciences, particularly Human Geography and Economics, when analyzing communities' recovery and Economy sectors following environmental disasters, such as earth-shakes, water pollution and drought or flood periods. Those studies refined resilience concepts comprehension, stressing the importance of institutional contexts, of the reflexivity and of collective actions considering phenomena involving resilience<sup>21-23</sup>.

Unlike mathematic formulae, which define resilience in Physics, the definition in Psychology is not as clear and precise, due to the complexity and multiplicity of factors and variables involved in the analysis of human phenomena. When comparing the relationship between tension/pressure and non-permanent deformation, it would correspond to the situation of risk/stress/adverse experiences, as well as adaptation and adjustment<sup>16-24</sup>.

In the Social Sciences field, resilience concept is presented in different ways. It is remarkable the idea that resilience is the capability of emerging from adversities, adapting, recovering and reaching a meaningful and productive life. Another interpretation considers resilience as the capability to efficiently face life circumstances and events seriously stressful and cumulative<sup>25</sup>.

The resilience concept may be understood within an ecological perspective that withholds the individual, the family, the society and the community. Under this point of view, this concept involves a set of social and

intra-psyche processes that favor the development of a healthy life, despite adverse contexts<sup>27</sup>. This *constructo* is characterized as an interactive process between the person and the environment, which is established as the result of individual variations as responses to the risk<sup>26</sup>. The very same factors leading to stress may be experienced differently by different persons. Therefore, the concept of resilience may be adopted as the possibility to overcome, which does not mean elimination of the problem – it would rather be its re-signification<sup>27</sup>.

The introduction of a number of studies on resilience raises issues related to individual skills, illustrated by means of short stories about persons with similar trajectories, some of which, unlike others, manage to overcome moments of crisis. In this context, the individual perspective tries to understand resilience based on personal characteristics, such as sex, temperament and genetics, although in certain moments, some authors do stress the relevant aspect of interaction of constitutional and environmental bases of the resilience issue<sup>28</sup>.

Some authors suggest that studies on resilience may be categorized in three currents: the North-American or Anglo-Saxon, the European and the Latin-American<sup>29,30</sup>. The North-American current tends to be more pragmatic and individual-centered, evaluating resilience by means of data that may be observed and quantified. Therefore, resilience is seen as the result of the interaction of the individual with his/her environment. On the other hand, the European perspective adopts an ethical end relativistic approach, usually under the influence of psychoanalytic theories<sup>30</sup>. On the other hand, the Latin-American current makes a more communitarian approach, focusing on the social as a response to difficulties faced by the individual when dealing with adversities<sup>31</sup> – a perspective particularly relevant for the Brazilian context, marked by profound social and economic vulnerabilities.

Three approaches were identified concerning the resilience issue. The first model

is centered on the individual, based on scientific researches with quantitative structure. The second one is based on the analysis of processes and perceptions, using a qualitative approach that explores life experience from a systemic, ecological and developmental perspective. At last, the third model, named the critical speech, establishes a questioner movement aimed at re-thinking and reconstructing the comprehension of the concept of resilience<sup>16</sup>.

Therefore, a critical speech is required to go deeper with the comprehension and the use of the concept of resilience in complex and dynamic contexts, such as Brazilian context. The critical speech challenges us to go beyond traditional approaches which are often focused on the individual or on isolated processes, and invites to a more holistic and inclusive reflection on resilience.

This reflexive movement demands careful attention to both the history and the cultural context, to complex social and economic challenges, and to the inclusion of narratives that are left aside in conventional studies on resilience – which is particularly relevant in a so diverse ambience as Brazilian society, where different groups deal with the same challenges and develop different ways to build their resilience. Furthermore, strength is growing to re-think intervention policies and practices which are often based on individual-centered models. This approach allows for the creation of more integrated and efficient strategies, considering local realities and communitarian dynamics, thus showing how extremely important it is to deal with the complexity of modern adversities. The COVID-19 pandemic exposed and enlarged existing vulnerabilities, highlighting multifaceted issues. By challenging the foundations of the concept of resilience, the criticism adds to the development of responses that are more inclusive and adaptative to contemporary crises.

Besides, when the concept is applied in studies on poverty, resilience is considered a heroic act. This vision displaces the emphasis

from what is described by the notion of resilience. Rather than recovery following a shock, resilience turns to be applied to situations when individuals or groups manage to progress in adversity, or turn crises into opportunities – versions that place potential problems from the sociological point of view, as one will never realize if is talking about an attribute or the result of a practice<sup>32</sup>.

It is important to acknowledge that there always is some kind of adaptation to adversities – actually, no one is totally defeated by adversities. In a way, all human beings show resilience. Nevertheless, this perspective ignores the fundamental role of social institutions and structures in individual experiences. The heroic vision of resilience resonates strongly from an ideological point of view, in line with a neoliberal agenda that seeks individual empowerment to the detriment of the State support<sup>32</sup>.

Besides, there is the concept of resilience when attached to those conditions individuals or people face while resuming some development process, either following or during traumatic situations or experiences, or in traumatic ambiances, advancing towards the comprehension – based on an ecological conception – of psychological, sociological, politic and existential ingredients involved in this complex process<sup>33</sup>. Therefore, the mechanism of favoring a resilient attitude should be directed to the establishment of sheltering resources produced by the ambience – that is, negotiation with forces produced by adversity, such as rebellion, isolation, subservient resignation, shame, hate and fear – so as to overcome the immobility caused by pain and despair, thus returning to a condition of potency, vitality and activity<sup>15,33</sup>.

In short, studies on resilience are interested in histories of persons or communities that find a line of flight for the fatal fate of failure foreseen in a culture, a genetic code or a scientific truth. Rather than producing resilient individuals who carry the resilient identity, the idea is to find marks, traces, resilience sparks,

matrixes to produce the potency to act and, now and then, produce joy, active adaptation, match. From then on, one may visualize the resilience phenomena as a process (rather than an individual characteristic), and displace the notion of risk factors towards the notion of situation – therefore, changeable from person to person and in different moments of life. Thus, works will no longer have to do with success quantification concerning the construction of risk contexts, as well as with more active strategies and interventions or protection contexts<sup>33(59)</sup>.

Considering that stance, it is proposed to incorporate to the discussion the complexity aspect, proposing to look for comfort in the employability and to give up a conventional comprehension of destinies repair, reconstruction and reinvention possibilities<sup>33</sup>. Therefore, another definition for resilience is suggested – a trans-subjective process to be organized as one among the possible answers to trauma, yet with the peculiarity of bringing up the possibility of reconsidering some development kind and the reconstruction of existential territories where marks of resilience can be potentialized<sup>9,15</sup>.

Conceptual expansions come together to deal with resilience comprehensions, so as to include social, cultural and historical dimensions, thus creating a more robust and equitable basis to support individuals and communities in overcoming and developing journeys when facing adversities, particularly as parts of life processes.

## Marks of resilience and the journeys for subjective transformations

Some authors connect the resilience process to the acquisition of internal capabilities developed from early days in life – encounters, support opportunities and the re-signification of the traumatic experience. Besides, the

presence of a social support network, the search for a sense to life, the construction of both the self-respect and the sense of humor are also crucial elements in this process<sup>34</sup>.

Besides, there is the possibility to find ways to express the emotional intensity caused by traumatic experiences or adversities. It is critical to explore others ways to stand up to profound suffering, which can be learnt by means of experiences other people have lived, thus revealing capabilities still unknown. Each encounter – by means of art, cultures or just human interactions – might create potential spaces where new possibilities may arouse to share emotions, therefore healing traumatic marks<sup>35</sup>.

In this sense, the necessary mechanism to scape trauma lies on the possibility to leave marks – traumatic forces can only be antagonized by new marks that open space for vitality<sup>33</sup> – give preference to the concept of resilience marks, as they are shaped in circumstances produced by encounters with the potential do unchain periods that are sensible to reparation experiences, and to a strain that may challenge the insistent self-defense produced by the trauma. Thus, more than merely changing life conditions, or overcoming a specific situation, what takes place here is a change in subjectivity, a subjective transformation<sup>36</sup>.

Subjectivity works as a living lab, where new universes emerge as others break up. There are a number of subjectivation policies and means to relate with others in the world that involve different combinations and variations of two ways to understand the world as organic matter, as the designs of a certain shape or an energy field – which, by their turn, depend on the activation of different potencies of subjectivity<sup>37</sup>.

Concerning subjectivity, a crisis is established which stresses and produces discomfort. To respond to this pressure, life is mobilized in human beings as a resistance and creation potency – that is, the discomfort impels the creation of a new existential configuration – a



reconfiguration of itself, of the world and of the relations between them, yet forcing to fight for the incorporation of new contours, to fight to make it real<sup>37</sup>.

Rather than overcoming a specific situation, standing up to a traumatic social structure requires a collective organization for subjective transformation, a construction device of new positions before the world. It would rather be the concept of resilience marks, collectively produced, during encounters able to produce periods that are sensitive to subjective reconfiguration experiences, and to produce a tension that goes in opposite direction to the insistent defense led by the trauma. Rather than a change in life conditions, or yet overcoming a situation, it refers to a subjective transposition<sup>10</sup>.

The daily work each of us carries out involves the necessary sewing and basting to build a feeling of continuity to that processual living experience of subjectivity and of changes processes. Allied to the accelerated dynamic of 'dis-territorialization' and 're-territorialization', as well as of the time shortening to live affective rhythms, the rupture experience exposes individuals to daily micro-traumas, thus requiring new responses<sup>38</sup>.

## Existential territories and the multiple possibilities

On its own, the territory is not a fixed concept – it acquires significance according to both the use and the context it is idealized, always interacting with those who use it<sup>37</sup>. It is constituted based on its relations with people who use it, creating an inseparable link between both parts. Thus. It has a relation with the reality of the life in community, and is materialized by means of the many interactions that take place inside it, which may be social, of neighborhood, solidarity or power<sup>39</sup>.

The territory comprises the intersection of nature and society, and englobes dimensions such as economics, politics and culture.

It is manifested by means of ideas and material realities, identities and representations, and involves issues related to appropriation, domination and control. Besides, this concept reflects discontinuities, connections and networks, as well as power relations that might be of either domination or control. It includes as well aspects of environmental degradation and protection, earth, space formats and the complexity of the social interactions<sup>40</sup>.

The territory may refer either to a vivid space or to a system perceived inside which an one feels sheltered. In this sense, the territory is a synonym of appropriation, and carries a subjectivity turned in to itself. It is configured as a set of representations that, in a practical way, influences a diversity of behaviors and investments over time, in social, cultural esthetic and cognitive areas<sup>41</sup>.

The territory may de-territorialize itself, that is, it may engage in escape lines until leaving its course and destroying itself. Human species is plunged into a huge 'de-territorialization' movement, in the sense of 'original' territories being uninterruptedly disintegrated with the labor social division. Territorialization will consist of an attempt to recompose a territory engaged in a 'dis-territorializing' process<sup>41(323)</sup>.

In the current context of means of subjectivity production, creating existential territories with autonomy, even though temporary, may offer the necessary strength to resist the 'crystallization' of subjugation territories<sup>10,33</sup>, and allow for the construction of new meanings. They work as temporary refugees, providing the development of new subjectivities and exploring inedited ways of living and relating to each other<sup>42,43</sup>.

Such construction of existential territories may be observed in different practices and different contemporary movements. For instance, alternative communities, urban occupation movements and self-management initiatives represent attempts to create autonomy spaces, where people can exert greater control on their

lives and resist external pressures. Although many times temporary and fragile, such spaces are critical for the construction of more resilient and empowered subjectivities<sup>42</sup>.

## Collective dimension and the emergence of new knowledge and powers

Furthermore, the concept of collective must be understood, once one cannot deny the existence and the operation of a collective plan to co-engage beings. Such collective and relational plan is responsible for bringing up lifestyles, creations, subjectivities<sup>44</sup>.

This creative and unique encounter means the collective agency of enunciation, the producer and product of the human condition. Making agency is to take place at the intersection of two converging worlds. Dealing with someone – for instance, an animal, some thing, a machine – does not imply to replace, imitate or identify yourself with the other. It is about creating something that does not belong neither to yourself or to the other person. It is about creating something that does not belong to you or to him/her, but emerges between you both, in this common time-space, impersonal, and that can be shared, something that is revealed in all collective agency<sup>45</sup>.

This collective and relational plan configures as well as a space for producing subjectivities. Subjectivity is not limited here to the synonymous of individual, subject or person – it includes pre-individual subjects, such as the perceptive and sensible ones, and also extra-personal or social systems, such as the mechanical, technological, ecologic. Therefore, subjectivation processes are always collective, as long as they deal with heterogeneous strata of the being<sup>46</sup>.

Even the simplest technique arouses from a network that involves at least the human being and the matter. Under this perspective, the focus of the invention is displaced to the

creation process itself. The point turns to be the network itself, the relations that are established, and no longer one or more elements alone<sup>47</sup>.

Subjectivation processes have nothing to do with private life. On the contrary, they refer to how individuals or communities affirm themselves as subjects, aside from knowledges constituted and powers established, which open room to new knowledges and new powers<sup>48</sup>. The collective must be understood as a multiplicity that transcends the individual, connecting with the social, and that, at the same time, alludes to pre-verbal intensities, originating from a logic of affection rather than a logic of well circumscribed sets<sup>49</sup>.

Therefore, the construction of existential territories with autonomy assumes fundamental collective importance. It is not just about individual resistance spaces, it is about collective processes that allow for the emergency of new knowledges and powers. Such collective territories, based on the logic of affections and multiplicity, are critical in order to strengthen communities' capacity to become active subjects and to resist the forces of subjection. As the collective 're-territorialization' is stimulated, the creation of spaces is promoted, spaces where solidarity and social cohesion may bloom, so as to efficiently face daily adversities and micro-traumas<sup>42,43,50,51</sup>.

## Challenges and the strength of collective resilience in PHC

In Brazil, PHC faces many challenges, including social inequality, low resoluteness, insufficient health care coverage and the chronicle health subfinancing<sup>46,47</sup>. Besides stressing its importance for the Unified Health System (SUS), the pandemic raised an alert: in order to guarantee care universality and integrity<sup>47</sup>, the PHC must be strengthened and find means to overcome such challenges. In that purpose,

mainly after the COVID-19, a new concept must be adopted for the comprehension of the work process of Communitarian Health Agents (CHAs); for the collective resilience, as an attempt to collaborate to face adversities; and for daily traumas witnessed in the PHC context.

Collective resilience may be an efficient tool in order to face social inequality in Brazilian territory, as it emphasizes the importance of networks for community support and solidarity among community members<sup>43,51</sup>. In the health sector, more specifically in the Primary Health Care, as they work side by side with the communities, CHAs may identify specific vulnerabilities and contribute to mobilize local resources, aiming at equity promotion in the access to health<sup>52,53</sup>. From then on, the construction of support networks and the implementation of community strategies may help mitigate the effects of inequalities<sup>51,54</sup>, deepened in the context of the COVID-19 pandemic, and to promote health in a more equitable way<sup>52,54</sup>.

Because they are integrated to the communities, CHAs are deeply acquainted of local dynamics and the specific needs of the population. This proximity allows for the precise identification of existing vulnerabilities and potencialities<sup>52,53</sup>. The mobilization of local resources – that may include partnership with non-governmental organizations, community groups and even private sectors – allows for more agile and adaptative answers, more suitable to the population's health needs. Besides strengthening the community support network, this mobilization process empowers community members, so as to foster their feeling as controllers of their own health<sup>42,43,50,54</sup>.

By promoting support and solidarity networks, collective resilience makes it easier to implement strategies aimed at equality in health access<sup>43,51,54</sup>. These strategies may include awareness campaigns on human rights, health education programs, and creation of itinerant health services to assist areas with

difficult access. Equity in the access to health is essential to make sure all members of the community, regardless of socio-economic condition, have access to good quality health care: health promotion programs that include physical activities, healthy nourishing and sickness prevention may be more effective when supported by a solid community network that stimulates both the participation and the engagement of members of the community<sup>43,55</sup>.

Among the challenges faced by PHC, the most remarkable are under-resolubility<sup>56,57</sup>, and the potency of the collective resilience concept to stress the improvements perspective, as it stimulates collaboration and sharing of knowledges between health professionals and the community<sup>42</sup>. The integration of local awareness and practices may intensify the resolution of health problems, adapting interventions to specific needs of the community<sup>51,54</sup>. Furthermore, as relations between APS and community members become stronger, it is possible to develop more efficient and sustainable solutions for local health problems<sup>52</sup>. Initiatives such as the creation of psychologic support, the organization of campaigns for mass immunization, and the distribution of food and medicines may be more efficiently coordinated counting on the support of robust community networks<sup>58</sup>.

Another significant challenge for APS is the chronic underfinancing of public health in Brazil<sup>56,57</sup>. Collective resilience may offer innovative alternatives to overcome finance restrictions, such as the optimization of existing resources and the development partnerships with both local and international organizations<sup>59</sup>. The promotion of community initiatives on health, based on solidarity and mutual support, may add to the efforts by the health system, so as to reduce pressure on public resources and collaborate to the continuity of care<sup>42,43,50,60</sup>.

Collective resilience allows for the more efficient use of available resources, there included the intelligent redistribution of health supplies, the continuous qualification of PHC



professionals, and the maximum use of local infrastructure. Besides optimizing the use of resources, this integral approach also strengthens both the presence and the influence of health units within the community, encouraging partnerships, for instance<sup>42,43,60</sup>. It may also focus on the promotion of preventive practices that reduce the need of more expensive health interventions in the future<sup>60</sup>. Immunization programs, awareness campaigns on hygiene and nutrition, and regular physical activities may avoid diseases and chronic conditions from arising, thus reducing the burden on the health system<sup>61,62</sup>.

Furthermore, collective resilience appraises the active participation of the community in decisions making concerning health. Community forums, health councils and other participative governance alternatives may grant that community needs and priorities will be given attention and will be met. This engagement increases both the transparency and the accountability, yet generating innovation and implementation of more effective local solutions. When the community feels like a constituent part of the health system, health initiatives become more likely to be sustainable and adapted to local realities<sup>43,50</sup>.

Social and popular participation, as well as the social control, are fundamental elements of the SUS, as established in Law Nr. 8.142/90. Those principles are essential for both the democracy and the development of a more integer administration, in line with collective interests and, therefore, they must be constantly promoted. When collective resilience is strengthened, it stimulates participation instances to move on, operating as an efficient strategy of fight and resistance in face of the States omissions concerning the right to health<sup>63,64</sup>.

Therefore, collective resilience may be seen as a vital approach to face both financial and operational challenges of PHC in Brazil. As strategic partnerships evolve, as community initiatives in health are promoted, with focus on the prevention and the strengthening

of community participation, a more resilient and adaptable health system becomes possible<sup>42,43,50,51</sup>.

Men and women who work as community agents perform a crucial role in this process, acting as catalyzers of positive changes and defenders of the community health, thus contributing for the construction of a more potent PHC<sup>42,50,53</sup>. This potency becomes even more necessary in the contemporaneity, as the COVID-19 pandemic exposed and intensified the traumas and adversities faced by the communities<sup>42,50,51,59</sup>.

By means of the active participation of the community in the process of care, the development of a health system more responsible and adjusted to local needs is possible<sup>42,43</sup>. As social cohesion and community engagement are stimulated, the collective resilience may be the key for the construction of a more robust and more resilient health system, that contributes as well for the empowerment of the community, which is fundamental to grant sustainability to health initiatives, as it stimulates health actions, even when immediate crises are solved<sup>42,52</sup>.

## Final considerations

Following this understanding of collective resilience, which renounces to the conventional comprehension, a new concept arises to understand and collaborate with the work process at the PHC, as well as central element to nourish the social participation in the SUS. The definition of transobjective process, one that is organizes as one of the possible answers to the trauma, but with the peculiarity of bringing the possibility for resuming some kind of development and the construction of existential territories, where one can potentialize resilience marks, where collaboration contributes to verify daily policies that allow for building space for recovering investment in life, in a reaction supported by the reinvention of that very experience, which may count

on the plasticity of relation and attachment mechanisms.

The theoretical construction on this concept shall be applied to the participant research-action, inserted into the Collective Health field, specifically in the knowledge nucleus of the Social and Human Sciences, as they count on, as work attributes, the cultural competence, the community orientation and attachment construction, in daily relation with families of the territory on screen.

The present study delineates devices that are able to multiply the looks on health. With a collaborative and inclusive approach, the present research shall widen the theoretical comprehension of collective resilience, and contribute for the practice of collective health in an innovative and transformer way. Thus, there is optimism as to the fact that insights

produced may provide new perspectives and efficient strategies in order to stand up to PHC challenges, so as promote more equitable and sustainable health for the communities involved.

## Collaborators

Nepomuceno RCA (0000-0003-3121-8814)\* contributed for the conceptualization, outlining, data collection, analysis, interpretation and text redaction. Barreto ICHA (0000-0001-8447-3654)\*, Ribeiro KG (0000-0003-0870-1971)\* and Andrade LOM (0000-0002-3335-0619)\* contributed equally for analysis, interpretation and redaction of the version to be published. ■

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