

Original Article

Characterization of the insertion of occupational therapists in the Brazilian Unified Social Assistance System

Retrato da inserção de terapeutas ocupacionais no Sistema Único de Assistência Social

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Abstract

Introduction: Since 2005, Brazilian cities have been adapting to organize teams and services of the Unified Social Assistance System (SUAS), and since 2011, occupational therapy has been recognized as one of the professions that compose these teams and the management of SUAS. This study addresses how the category has been involved in this policy in the state of Rio de Janeiro. **Objective:** To map the occupational therapists working at SUAS in this state and outline the characteristics of this inclusion. **Methodology:** A descriptive, cross-sectional mapping study, using official data from the SUAS Census. Data were analyzed from a descriptive perspective, in dialogue with the National Social Assistance/Welfare Policy, the literature in the field of occupational therapy in social assistance, and under the framework of social occupational therapy. **Results:** In the State of Rio de Janeiro, 142 occupational therapists work at SUAS, which is equivalent to 8.9% of the professionals in this state. This workforce is composed of women (89.4%) aged 41-50 years (34.5%), hired by Civil Society Organizations (93%), under the Consolidation of Labor Laws (CLT) regime (50%), with a weekly workload of 11-20 hours (40.9%), mainly inserted in Day Centers (71%), working with people with disabilities and older people. **Conclusion:** The inclusion of occupational therapists in SUAS of Rio de Janeiro state occurs precariously, with low insertion in this state's devices. It highlights the need for representative entities of the class to act in this public policy as a promoter of expanding job opportunities/public contests/employment, as well as to invest in debates about team compositions and the recognition of different fields of knowledge.

Keywords: Occupational Therapy, Social Assistance, Social Work.

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Resumo

Introdução: Desde 2005, as cidades brasileiras estão se adequando para organizar equipes e serviços do Sistema Único de Assistência Social (SUAS) e, a partir de 2011, a terapia ocupacional passou a ser reconhecida como uma das profissões que compõem tais equipes e a gestão do SUAS. Este estudo aborda como a categoria tem participado dessa política no estado do Rio de Janeiro. **Objetivo:** Mapear as terapeutas ocupacionais que atuam no SUAS nesse estado e delinear as características dessa inserção. **Metodologia:** Estudo de mapeamento, descritivo e transversal, utilizando informações oficiais do Censo SUAS. Os dados foram analisados a partir de uma perspectiva descritiva, em diálogo com a Política Nacional de Assistência Social, a literatura do campo da terapia ocupacional na assistência social e sob o referencial da terapia ocupacional social. **Resultados:** No estado do Rio de Janeiro, 142 terapeutas ocupacionais atuam no SUAS, o equivalente a 8,9% das profissionais desse estado. Como retrato, obtivemos imagem formada por mulheres (89,4%) entre 41-50 anos de idade (34,5%), contratadas por Organizações da Sociedade Civil (93%), celetistas (50%), com carga horária semanal de 11-20 horas (40,9%), inseridas majoritariamente nos Centros-dia (71%), atuando com pessoas com deficiências e idosas. **Conclusão:** A inserção de terapeutas ocupacionais no SUAS fluminense acontece de forma precarizada, com baixa inserção nos equipamentos estatais. Sinaliza-se a necessidade de as entidades representativas da classe atuarem nessa política pública enquanto promotora de ampliação de vagas/concursos/emprego, bem como investirem em debates sobre as composições das equipes e o reconhecimento dos diferentes campos de saber.

Palavras-chave: Terapia Ocupacional, Assistência Social, Trabalho Social.

Introduction

Historically, the constitution of the Brazilian social assistance/welfare policy has exhibited traits of paternalism, charity, and assistentialism. Actions are often based on benevolence, stemming from philanthropy, and tend to be emergency-based, discontinuous, non-professional, and insufficient to effect changes in the deprivation conditions of the assisted population (Silveira, 2014). This social assistance/welfare policy only gained the status of a right within the Brazilian public policy framework after the 1988 Federal Constitution (Brasil, 2004).

In Brazil, social assistance was regulated and became a public social policy through a set of legal regulations resulting from the organization and mobilization of progressive sectors of society. This policy is State-responsible, universal, non-contributory, and decentralized (Silva, 2013).

Key historical and legal milestones include the Organic Law of Social Assistance (LOAS), the National Social Assistance/Welfare Policy (PNAS), and the Basic Operational Standard (NOB/SUAS) of 2005, updated in 2012. These regulations are responsible for the standardization and implementation of the Unified Social Assistance System (SUAS) (Brasil, 1993, 2004, 2005, 2012).

SUAS encompasses two levels of complexity: Basic Social Protection (PSB) and Special Social Protection (PSE). The PSB aims to prevent situations of social risk and

violation of rights, whereas the PSE, which is divided into medium and high complexity, seeks to assist families and individuals whose rights have been violated. The distinction between medium and high complexity lies in the existence or absence of family and/or community ties, which are broken in high-complexity situations (Brasil, 2004). The set of services that comprise both the PSB and the PSE is executed by technical teams, which can include various professional categories, including occupational therapists.

The insertion of occupational therapists in social assistance services marks the institutionalization of the profession, considering its historical involvement in non-profit organizations with traits of authoritarianism and assistentialism, working with people with disabilities, older people, children, and young people from poor families, among other large deprived populations (Bezerra & Basso, 2023).

Almeida et al. (2012) and Vianna (2013) detailed the political and formalization processes to include this category in the technical teams of social assistance services. They also highlighted the significant movement of occupational therapists mobilizing through the National Forum of SUAS Workers. This organization of occupational therapists was marked by the coordination of various actors, including the Brazilian Association of Occupational Therapists and the METUIA Network, which, in addition to political mobilization, produced material that encompasses possibilities for actions in conjunction with the typification of social assistance services (Chagas et al., 2015).

Therefore, despite this policy being historically developed by various professional categories, it was only from Resolution No. 17 of 2011 of the National Social Assistance Council (CNAS) (currently NOB-RH SUAS) that occupational therapy was recognized as one of the higher education professions to compose the technical teams and management of social assistance services in all spheres of protection of SUAS (Brasil, 2011a; Borba et al., 2017).

Thus, it is of great relevance to conduct research into the scenario of the insertion and professional practice of occupational therapists in social assistance services, which has been gaining substance in recent years, especially due to its formalization within the PNAS through the NOB-RH SUAS.

As an example of this, Oliveira (2020) identified and learned about the characteristics of professional practice in the context of social assistance/welfare policies, contextualizing the practice of this category within this policy. More recently, Pêgo et al. (2023) mapped the insertion of occupational therapists in the state of Minas Gerais, where they found that the category predominantly works in units that provide services to people with disabilities. Moreover, these authors reflected on the importance of Brazilian social occupational therapy to inform professional practice.

Other studies have focused on the reporting of professional practices and the development of strategies, resources, and social technologies for intervention in the various facilities of SUAS. These studies, mainly based on the theoretical-methodological framework of social occupational therapy, have highlighted the technical and political contributions that occupational therapists can offer to build user support processes (Araújo et al., 2011; Perez et al., 2014; Neves & Macedo, 2015; Morais & Malfitano, 2016; Borba et al., 2017; Silva et al., 2017, 2018; Pinho et al., 2019; Oliveira & Malfitano, 2021).

Additionally, Bezerra (2023) investigated the work of psychologists, social workers, and occupational therapists at SUAS and highlighted that the use of activities and the emphasis on the everyday lives of users have particularized the work of occupational therapists in this social policy, attributing specificity to their practices.

There is also a considerable deepening of themes that inform professional practices which, from a critical-reflective perspective, form a body of knowledge that can contribute to the debate about the construction of ethical-political projects that support professional action. These studies discuss the social question and its expressions and the role played by occupational therapists in social policy in their relationship with the State (Bezerra & Trindade, 2013; Vianna, 2013; Duarte, 2016).

The progress that the profession has made over these 12 years of integration into SUAS is evident. We summarize the following points: (1) based on the SUAS Census of 2017, Oliveira (2020) showed that 8.8% of occupational therapists in Brazil were inserted in social assistance facilities and that this number has been growing over time¹; (2) occupational therapists working in the social area have been focused on developing a coherent theoretical-methodological framework in line with the demands for professional practice at SUAS, as demonstrated in the literature; (3) occupational therapy courses focusing on social sub-areas at the undergraduate level have been increasingly included in more curricula, indicating a move towards strengthening education in a specific sub-area of the profession that requires its own set of knowledge and methods, as well as specific internship fields and instructors/preceptors who take on this task².

Oliveira (2020) also showed that the insertion of occupational therapists into SUAS occurs predominantly in the Southeast region of the country, especially in services like Day Centers, Community Centers, and Institutional Shelter/Reception Units. This study reflects on the low insertion of occupational therapists in CRAS, CREAS), and the Specialized Reference Centers for Homeless Population (POP Centers).

For this article, it is important to highlight the situation of the state of Rio de Janeiro in this professional integration scenario. Based on data from the SUAS Census of 2017, which referenced Oliveira's (2020) work, the Southeast region state with the highest number of occupational therapists at SUAS was São Paulo, with a total of 521 professionals, followed by Minas Gerais with 254, Rio de Janeiro with 67, and Espírito Santo with 30 occupational therapists in the social assistance network. However, an analysis of the information from the states of Rio de Janeiro and Espírito Santo reveals that the first has the lowest insertion of occupational therapists in services that exclusively execute the social assistance policy and direct administration operated by state governments (Brasil, 2017).

These data show that, while the state of Espírito Santo had 14 occupational therapists distributed at CREAS and Pop Centers, the state of Rio de Janeiro had only two professionals in the category, one at a Pop Center and one at CRAS (Brasil, 2017). Therefore, it is pertinent to understand, in a more qualified and detailed manner, how the insertion of occupational therapists at SUAS has occurred in the 92 municipalities of the state of Rio de Janeiro.

¹ It is verified throughout the editions of the SUAS Census that the group of workers that compose the social assistance network is predominantly female, as are occupational therapists working in this policy.

² Furthermore, in 2011, the Federal Council of Physical therapy and Occupational Therapy (COFFITO) published Resolution no. 406, which disciplines the professional specialty of occupational therapy in Social Contexts, establishing broad areas of competence for action in the social field. Although this document still needs improvement, it contributes to the process of formalizing the category in social assistance/welfare policy, demarcating it as one of the areas of professional activity of occupational therapists.

Thus, this study aims to map occupational therapists working at SUAS in the state of Rio de Janeiro, verifying the distribution of these professionals in the social assistance units in the 92 municipalities of this state; moreover, it aims to outline, based on information available in the SUAS Census of 2021, the characteristics of the category's integration into the social assistance network.

Notes on the historical constitution of social assistance in the state of Rio de Janeiro

The consolidation of social assistance as a right and under State responsibility marks an important milestone with the implementation of SUAS. This system began to operate nationally as a unique model for managing this policy. It is organized based on guidelines established by the PNAS: population participation through social control; primacy of State responsibility in conducting the policy, at each level of government; focus on the family for constructing actions; and political-administrative decentralization. In this last guideline, the construction of requirements and responsibilities for each policy instance is detailed, where the federal sphere is responsible for coordinating and establishing the general norms of the policy and the state and municipal spheres are responsible for the coordination and execution of the respective programs and projects (Brasil, 2004).

The discussion about decentralization in Brazil's public agenda is marked by the country's re-democratization process in the mid-1980s and the 1988 Federal Constitution, becoming a central point for implementing public policies. It is understood that political-administrative decentralization was a possibility to overcome the problems of the political system at that time, especially to confront the fragmentation and overlapping of public policies between the municipal, state, and federal spheres (Silva, 2008).

Regarding the social assistance/welfare policy, NOB/SUAS, published in 2005 and updated in 2012, is the document that currently establishes specific and common competencies and responsibilities for all entities: the Union, states, municipalities, and the Federal District. Among these responsibilities, the following common actions among the three entities are highlighted (Brasil, 2012):

Art. 12. Common responsibilities to the Union, states, Federal District, and municipalities include:

XVI - ensuring the integrity of social assistance protection to the population, **prioritizing the qualification of SUAS services**, exercising this responsibility in a shared way between the Union, states, Federal District, and municipalities;

XVII - **ensuring and organizing the provision of social assistance services according to the National Typification of Social Assistance Services**;

XXX - developing, **implementing, and executing the human resources policy according to NOB/RH – SUAS**. (Brasil, 2012, p. 20, our emphasis).

Thus, it is emphasized that among the range of responsibilities of the entities, ensuring the qualified provision of services according to the needs of the assigned territories and the monitored population includes executing a human resources policy that is in harmony with these needs.

Understanding political-administrative decentralization and the responsibility of each entity is relevant for this discussion because discussing social assistance in the state of Rio de Janeiro means not only focusing on the state but also on its 92 municipalities. Thus, given the impossibility of this detailed effort, for contextualization purposes, we will discuss social assistance in the state of Rio de Janeiro and its capital.

In this state, the management of social assistance is the responsibility of the current State Department for Social Development and Human Rights, which is divided into six sub-departments: women's policies; prevention of chemical dependency; governance, compliance, and management; political articulation; promotion, defense, and guarantee of human rights; and management of SUAS (Secretaria de Estado de Desenvolvimento Social e Direitos Humanos, 2023).

Historically, the entity responsible for implementing the social assistance/welfare policy in the state of Rio de Janeiro was the then State Department for Social Assistance, divided into other sub-departments. The Sub-Department for Social Assistance and Management Decentralization was in charge of formulating and executing the state's social assistance/welfare policy, with one of its duties being to co-finance and technically assist in structuring and implementing the Municipal Assistance Systems (Oliveira, 2015). Currently, the Sub-Department for Governance, Compliance, and Management is responsible for the administrative and institutional procedures aimed at executing social assistance/welfare policies, including the management of human resources, in the state (Secretaria de Estado de Desenvolvimento Social e Direitos Humanos, 2023).

Until the end of the 1990s, the history of social assistance in the state of Rio de Janeiro was not different from that in other states of Brazil, exhibiting classic characteristics of this field, such as institutional fragmentation; sporadic nature of actions, an emergency character, without professionalization, and based on improvisation and electoral interests; predominance of indirect actions through NGOs; marked by clientelism and "first lady's role" in almost all municipalities of the state (Lima, 2018).

However, at the end of the 1990s and the beginning of the 2000s, the state began to implement programs whose social work focused on "*the protective capacity of the State, contrary to neoliberal social policies, affirming the public and state responsibility for providing social protection*" (Lima, 2018, p. 139). The construction of a state policy for social assistance began aiming to implement LOAS through the following guidelines (Rio de Janeiro, 1999):

- Promote the political-administrative decentralization of social assistance actions and the strengthening of municipalities while preserving their autonomy;
- Establish the family as the primary focus of Social Assistance, changing the logic from individual-centered programs and projects;

- Integrate and coordinate in a network the local entities, both public and private, that provide services in the area of assistance;
- Propose the integration of local actions of the Social Assistance/Welfare Policy, avoiding the overlap of programs and the dispersion of resources, with a primary focus on the family;
- Foster effective coordination among various State and Municipal Departments, governmental and non-governmental organizations, enhancing resources and ensuring quality in the services provided;
- Encourage the participation of civil society representative organizations in formulating the policies and controlling the actions of social assistance through conferences, forums, and municipal and state assistance councils;
- Promote the training of institutional agents, both governmental and non-governmental, and social assistance counselors;
- Support, both technically and financially, the programs, projects, and actions integrated into the state's Social Assistance/Welfare Policy. (Rio de Janeiro, 1999, p. 1).

Thus, from Decree No. 25,919, dated 27 December 1999, it is observed that the state of Rio de Janeiro began constructing a social assistance/welfare policy that anticipated some elements that would constitute the PNAS in 2004 and SUAS in 2005: an expanded concept of family whose central focus is increased protective capacity; territorialization of actions; psychosocial family support outside of shelter/reception institutions, carried out by an interdisciplinary team; intersectoral coordination and the political-administrative decentralization of social assistance actions; and implementation of a management model based on diagnostics, planning, monitoring, assessment, information systems, political decision-making, and financial support (Lima, 2018).

In the municipal context, the state capital was one of the pioneer municipalities in implementing SUAS (Silva, 2013). In 2005, the Municipal Department of Social Assistance of Rio de Janeiro (SMAS), aiming to implement the PNAS, began a broad political-administrative reform to follow the policy's precepts, establishing its fundamental guidelines and the Department's competencies with the goal of full management of social assistance (Silva, 2016).

Following this restructuring, the SMAS was divided into three sub-departments, inspired by the PNAS even in their nomenclature: Basic Social Protection, Special Social Protection, and Management. Also included in this structure were the General Coordination of Management of the Municipal Social Assistance System and the General Coordination of Development, Monitoring, and Assessment (Silva, 2016).

Attention should be drawn to the creation, in 2001 (even before the regulation of the PNAS and the NOB/SUAS), of the Municipal Social Assistance System (SIMAS)³, established through Municipal Law no. 3.343/2001. This system also served as a strategy for professionalizing the policy, ensuring specialized technical staff, and operational investment (Silva, 2013). This is because, with SIMAS, social workers became the agents of the system, and other professional categories, both technical and higher level, were named support staff.

It is understood that the implementation of SIMAS was fundamentally important to develop the social assistance/welfare policy in the city of Rio de Janeiro, especially because it conditions its operation on the participation of professionals with specific technical education to compose the services. However, it is also understood that this structure leaves an indelible mark to this day, as it is a system that centralizes social policy in one professional category, which, when placed in a higher hierarchical position than others, creates a “market reserve” aspect, weakening and even hindering the entry of other professionals in this field. Consequently, it hampers the recognition of the need, on equal terms, of the multiple skills represented by the various professional categories of the current NOB/RH SUAS to compose the workforce in social assistance.

Therefore, the city of Rio de Janeiro and the other 91 municipalities of the state undergo a series of difficulties in operationalizing the CNAS Resolution no. 17/2011, resulting in the non-inclusion of many of the professional categories foreseen for social assistance work in the various facilities and services of SUAS.

Thus, it is relevant to understand the current scenario of the insertion of occupational therapists in SUAS in the state of Rio de Janeiro and to comprehend how this policy has been incorporating the category in the 92 municipalities of the state.

Methodological Approach

This article presents the results of a mapping, descriptive, cross-sectional study that used the official information from the SUAS Censuses from 2011 to 2021 as a source of secondary data. From these data, occupational therapists working in the SUAS in the state of Rio de Janeiro were mapped. The start of the time frame is justified by the formalization, in 2011, of the inclusion of this professional category in the composition of the technical teams and management of SUAS; the end of the time frame is based on the fact that, at the time of this research's data collection, the 2021 SUAS Census was the most recent edition fully published.

For this study, a historical series of the insertion of occupational therapists in the SUAS services of the 92 municipalities of the state of Rio de Janeiro was compiled from 2011 to 2021, as well as their inclusion in municipal and state management. This survey was conducted between November 2022 and March 2023. Subsequently, a specific analysis of the 2021 SUAS Census was performed, in which, in addition to the described survey, the following data on occupational therapists were verified: age group, gender, type of employment contract, unit, role, weekly workload, the

³ “SIMAS seeks to promote the combination of planning, coordination, supervision, guidance, execution, and social control of actions related to social assistance across the entire service network of the municipality's [Rio de Janeiro] basic policies” (Silva, 2013, p. 304).

population assisted at the unit where the professionals were working, and the type of unit (governmental or non-governmental). The purpose of this more specific analysis was to outline, based on the information available in the SUAS Censuses, how occupational therapists are integrated into SUAS in the state of Rio de Janeiro.

The information was collected from the SUAS Census spreadsheets and organized in a Microsoft Excel[®] spreadsheet. The analysis of the variables, conducted more descriptively, identified two underlying themes for discussion: (1) “Occupational therapists working at SUAS in the state of Rio de Janeiro”, followed by its sub-theme “Outline of the insertion of occupational therapists in social assistance devices in the state of Rio de Janeiro”; (2) “Relationship with the third sector and precariousness of work as syntheses of the insertion of occupational therapists into SUAS in the state of Rio de Janeiro”. Both the results and the discussion of the data were carried out descriptively and in dialogue with the PNAS, the literature produced in the field of occupational therapy in social assistance, and under the light of the Brazilian social occupational therapy framework, which predominantly informs publications on professional practice in social assistance services.

Moreover, for the statistical analysis, contacts were made via e-mail with the Federal Council of Physical Therapy and Occupational Therapy (COFFITO) and the Regional Council of Physical Therapy and Occupational Therapy of the 2nd Region (COFFITO-2), responsible for the jurisdiction in the state of Rio de Janeiro, to access information on the number of occupational therapists. It is considered that it would be important for this information to be available to the population in general through the public portals of these local governments.

Some considerations regarding the SUAS Census

Before presenting and discussing the results, it is pertinent to make some considerations about the SUAS Census editions and the challenges in conducting research using it as a source and base of secondary data.

The SUAS Census is one of the main instruments of social assistance surveillance and has been used as a monitoring tool annually since 2007. It was regulated by Decree no. 7.334, dated 19 October 2010, and initially focused on data collection only for CRAS. As of 2009, the data collection was expanded to include CREAS, and it was then named the SUAS Census (Brasil, 2011b).

Starting in 2010, in addition to mapping CRAS and CREAS, the survey began on state and municipal management and the private network⁴, without yet producing data on its human resources. In 2011, the SUAS Census included the mapping of Pop Centers and workers in the private network. In 2012, data production about Institutional Shelter/Reception Units was added, and specific data collection from the private network was interrupted (Brasil, 2011b).

⁴ In the 2010 and 2011 SUAS Censuses, service providers are referred to as Private Networks. It is noted that the manuals in these editions indiscriminately use different terms to refer to Civil Society Organizations that provide social assistance services: private network, affiliated private network, service providing entities, social assistance entities, private social assistance entities, etc. Such documents use these terms to refer to non-state institutions that have an agreement with the social assistance/welfare policy to provide some typified service (Brasil, 2010, 2011c).

This configuration continued until 2014 when data collection on Community Centers was included. In 2015, data collection began for Day Centers. In 2017, the SUAS Census started to produce data on the Foster Family Program, and in 2018, the monitoring of municipal and state funds began.

Over the ten years of SUAS Census editions analyzed in this research, the transformations and improvements of this database are notable. Each year, there is an increasingly detailed collection and publication of information about the SUAS network facilities and the services they provide; especially, the workforce that composes the social assistance network – the focus of this study. However, it is pertinent to point out some weaknesses in how the data are organized and made available, aiming to highlight certain challenges and limitations encountered in this study.

The 2011 SUAS Census does not present a specific spreadsheet with information on the human resources composing the services but provides, in a single file, some data on the team compositions, which initially would be sufficient for this investigation. The information provided included CRAS, CREAS, Pop Centers, the Private Network, and municipal and state managements. It is worth noting that in all the manuals and questionnaires of this edition, there is a specification of the professional categories that make up the technical teams of all the services, including occupational therapy. However, in the compilation and publication of the data, the only spreadsheets informing the number of occupational therapists are those of the private network and municipal and state managements. Thus, it was not possible to locate, in 2011, the number of occupational therapists working at CRAS, CREAS, and Pop Center.

From the 2012 and 2013 editions onwards, there are specific spreadsheets with data on the human resources of the SUAS network, encompassing all professional categories. In these two Censuses, it was possible to find information about occupational therapists at CRAS, CREAS, Pop Centers, Institutional Shelter/Reception Units, and municipal and state managements.

The 2014 SUAS Census, in addition to the information provided in previous editions, includes data on Community Centers, which is an important distinction since these services have a considerable number of occupational therapists, enabling a more comprehensive analysis of how the professional category is integrating into SUAS. The 2015 edition innovates by bringing information about Day Centers, which are also services with a high insertion of occupational therapists, although this edition did not provide information about municipal and state managements. Thus, it is from the 2015 edition that it becomes possible to understand more accurately how occupational therapists compose the Brazilian social assistance network.

As of the 2017 edition, there is data production about the Foster Family Program, and in 2018, information about municipal and state funds is included. This SUAS Census model continued until the 2020 edition, which introduced information about Registration Centers – a configuration that remains until the last Census analyzed here.

A weakness that research using the SUAS Census faces concerns the instability in the data publication. It is noted that the portal of social assistance surveillance, which provides information from all editions of the Census, frequently changes the content of the links. Thus, depending on when researchers access the portal, they may obtain different information or even no longer have access to the same, as sometimes the folders are removed from the portal. To solve this problem and enable the production of data for this research,

it was necessary, in addition to contacting other researchers who also work with the SUAS Census, to request information via the Fala.BR platform through the information access law, or to make direct phone contact with the social assistance surveillance sector of the Ministry of Social Development and Fight Against Hunger. With this, it is indicated that the data presented here refers to a “snapshot” of the moment of their collection, and may have undergone changes due to the instability of the information.

Results and Discussion

Occupational therapists working at SUAS in the state of Rio de Janeiro

The 2021 SUAS Census, made available by the then Ministry of Citizenship in mid-2022, provides information about the following devices: CRAS, CREAS, Pop Center, Institutional Shelter/Reception Unit, Community Center, Day Center, State Management, Municipal Management, Foster Family, Municipal Fund, State Fund, and Registration Center.

The managements, both municipal and state, refer to the human resources framework responsible for composing the management of the social assistance/welfare policy at the state and municipal levels. Social assistance funds are instruments for the budgetary and financial management of all entities that compose the policy, in which revenues should be allocated and expenditures related to the set of actions, services, programs, projects, and social assistance benefits are executed (Brasil, 2012). Thus, the teams of the social assistance funds refer to the group of people designated to work directly with activities related to the Municipal and State Funds, and these workers may or may not be exclusive to this function. The information related to the Registration Centers concerns the locations with the main and exclusive purpose of carrying out the inclusion or updating of the Single Registry and related procedures, excluding CRAS, CREAS, and Pop, since these entities already perform this action.

Figure 1 presents the historical series over the 10 years analyzed, and Table 1 details the distribution of occupational therapists in social assistance services in the 92 municipalities of the state of Rio de Janeiro.

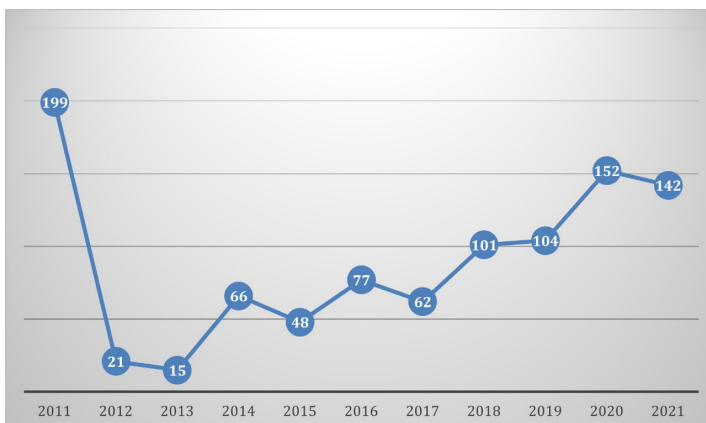


Figure 1. Historical series of the insertion of occupational therapists in the 92 municipalities of the state of Rio de Janeiro (Census SUAS 2011-2021). Source: Prepared by the authors.

Table 1. Historical series with distribution, by unit of insertion, of occupational therapists in the 92 municipalities of the state of Rio de Janeiro (Census SUAS 2011-2021).

Service/Year	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
CRAS		5	6	3	1	1	1	5	4	5	3
CREAS		0	0	0	1	0	0	1	0		1
Pop Center		1	0	1	1	1	1	1	2	2	1
Institutional Shelter/Reception Unit		5	2	5	9	9	10	15	9	12	17
Community Center				35	2	6	3	10	9	21	19
Day Center					34	31	47	69	80	112	101
Foster Family							0	0	0	0	0
State Management	0	0	0	0		0	0	0	0	0	0
Municipal Management	15	10	7	22		29	0	0	0	0	0
Municipal Fund								0	0	0	0
State Fund								0	0	0	0
Registration Center										0	0
Private Network	184										
Total	199	21	15	66	48	77	62	101	104	152	142
Total number of professionals in the state of Rio de Janeiro	926	937	958	1,004	1,073	1,123	1,182	1,239	1,298	1,342	1,416
Percentage at SUAS	21.5%	2.2%	1.5%	6.6%	4.5%	6.9%	5.2%	8.1%	8%	11.3%	10%

Source: Prepared by the authors.

There was a significant difference in the number of occupational therapists between 2011 and 2012. This discrepancy highlights that, throughout the historical series, the number of therapists in the network had never been as high as in 2011. It is important to note that in that year, the SUAS Census included an investigation into the Private Network. This network encompassed all civil society organizations that provided some form of social assistance service and were registered with CMAS. Consequently, these data represent the occupational therapists who were employed across various service-providing entities. These entities, through agreements, carried out work within the framework of the PSB and the PSE. Specifically, in 2011, this accounted for 21.5% of the occupational therapists in the state of Rio de Janeiro working within the SUAS network.

In 2012, data on the Private Network ceased to be produced, and the production of information about Institutional Shelter/Reception Units began. However, investigations into entities that provided other services, such as the Service for Coexistence and Strengthening of Ties (SCFV) and the Special Social Protection Service for People with Disabilities, Older People, and their Families (SPSEPDIF), were not included, which explains the numerical difference found in the historical series. Therefore, it can be said that the data on the number of occupational therapists at SUAS from 2012 onwards do not necessarily correspond with reality, since the facilities that most traditionally hire occupational therapists were not included in the investigations (Oliveira, 2020).

Figure 1 shows a significant increase in the number of professionals in 2014, the year in which data production on Community Centers was incorporated. Another noteworthy piece of information is the insertion of occupational therapists in the management of the social assistance/welfare policy at the level of the single command of the municipalities. Taking 2016 as an example, which had a larger number of occupational therapists involved in policy management, it was found that 10 occupational therapists worked in the municipality of Duque de Caxias, five in Maricá, three in Itaguaí, two in Mangaratiba, and one in each of the following municipalities: Aperibe, Cachoeira de Macacu, Iguaba Grande, Japeri, Magé, Resende, Rio de Janeiro, São Gonçalo, and Volta Redonda.

However, it is noticeable that this number drops to zero from 2017 onwards – the year new municipal managements began. It can be inferred that this abrupt change is due to changes in municipal governments, as positions in municipal and state managements tend to be commissioned roles.

Figure 1 shows that, as of 2017, there is an increase in the insertion of occupational therapists in the social assistance network, which continues until 2020, with a downward trend in the following year. It can be speculated that the COVID-19 pandemic may have caused this decrease – which would require further investigation.

Attention should also be drawn to the absence of occupational therapists in Municipal and State Funds. It is worth pointing out that national data show that the involvement of this category in the management of public funds is still limited. Since this information began to be collected in 2018, it is evident from the SUAS Census editions that there is no inclusion of occupational therapists in any state of the Federation. In municipal funds, there were eight occupational therapists in 2018, nine in 2019, six in 2020, and nine in 2021, with the majority concentrated in municipalities of the state of São Paulo⁵.

Finally, it is emphasized that, despite the fluctuation in the historical series, it can be asserted that the insertion of occupational therapists in SUAS in the municipalities of the state of Rio de Janeiro has been growing.

According to Oliveira (2020), 8.8% of occupational therapists in Brazil worked at the SUAS network in 2017. It is noted that in that year, in the state of Rio de Janeiro, 5.2% of occupational therapists with active registration at COFFITO-2 worked in social assistance devices, placing the state well below the national average. The results of this research show that, in the most recent national scenario, 9.6% of occupational therapists in Brazil work in social assistance services⁶, while 10% of therapists in the state of Rio de Janeiro make up the SUAS network, placing the state slightly above the national average. Nonetheless, it is important to delve more deeply into how this inclusion occurs, which will be done next by analyzing the distribution of occupational therapists at SUAS in the state of Rio de Janeiro in 2021.

Outline of the insertion of occupational therapists in social assistance devices in the state of Rio de Janeiro

One of the goals of this study was to outline, based on information available from the 2021 SUAS Census, the characteristics of the insertion of occupational therapists into the social assistance network in the state of Rio de Janeiro. It was found that 10% of the state's occupational therapists work in social assistance. However, it should be considered that although this number represents progress, there is a need to understand more comprehensively how this professional category participates in this social policy. This is because, paradoxically, Rio de Janeiro is the Southeast Region state that hires the fewest occupational therapists for its direct administration social assistance network and under its full responsibility. Figure 2 shows the distribution of occupational therapists by service in 2021.

⁵ Data on Municipal Funds in the SUAS Census editions of the aforementioned years can be accessed (Brasil, 2023).

⁶ Through e-mail contact with COFFITO, it was possible to access the information that there were 18,800 occupational therapists with active registration with the regional professional councils in Brazil in 2021.

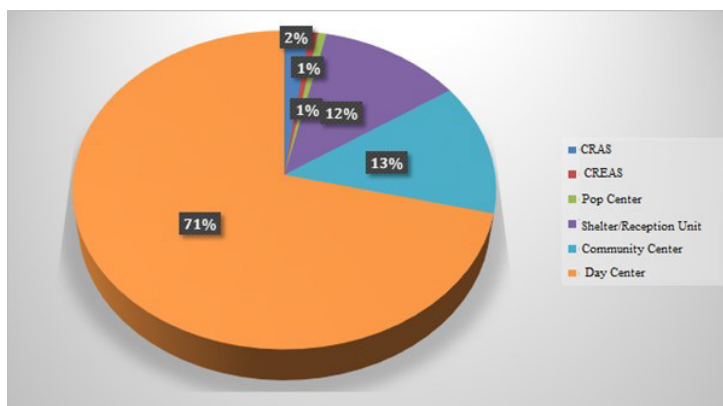


Figure 2. Distribution and percentage of occupational therapists per social assistance service in the 92 municipalities of the state of Rio de Janeiro (Censo SUAS 2021). Source: Prepared by the authors.

Figure 2 shows that of the 142 occupational therapists working at SUAS in the state of Rio de Janeiro, 2% are involved in CRAS, 1% in CREAS and Pop Centers, 12% in Institutional Shelter/Reception Units, 13% in Community Centers, and 71% in Day Centers. It should be noted that CRAS, CREAS, and Pop Centers are units of direct administration, meaning they are directly linked to public, municipal, or state management. Institutional Shelter/Reception Units, Community Centers, and Day Centers are mostly units of indirect administration, meaning they are civil society organizations that execute social assistance services through agreements with CMAS.

The number of occupational therapists in Community Centers, and especially in Day Centers, is noteworthy. Community Centers are units that execute the SCFV for socially vulnerable people and families. The SCFV is a service within the scope of the PSB that aims to ensure the types of security of shelter/reception, family, community, and social coexistence, and the development of autonomy. Meanwhile, Day Centers are units that execute the SPSEPDIF, whose objective is to support people with disabilities and older people with some degree of dependency aggravated by the violation of rights. The SPSEPDIF is a device within the scope of the PSE (Brasil, 2009).

Thus, the findings of this study echo those of Oliveira's (2020) doctoral thesis: occupational therapists predominantly work in mixed services, that is, they operate not only in social assistance/welfare policy but also usually have agreements with the health and/or education sectors.

Therefore, the state of Rio de Janeiro does not deviate from the national reality, presenting a greater insertion of occupational therapists in service-providing entities, affiliated with CMAS, that support people with disabilities and/or older people, represented by Community Centers and Day Centers. At the same time, there is a low insertion of the category in services that exclusively execute direct administration social assistance/welfare policy, such as CRAS, CREAS, and Pop Centers.

In addition to the distribution of occupational therapists in services, it is relevant to verify the type of employment relationship and the role they play, as these data invite debate about the precariousness of the work of occupational therapists at SUAS in the state of Rio de Janeiro. Table 2 presents the employment relationship types of occupational therapists hired to work at SUAS:

Table 2. Types of employment of occupational therapists hired to work at SUAS in the state of Rio de Janeiro (Censo SUAS 2021).

SERVICE	TYPE OF EMPLOYMENT									Total
	Commissioned	Temporary	Private CLT Regime	Public CLT Regime	Statutory	Voluntary	Service provider entity	Non-permanent	Outsourced	
CRAS	1	1	-	1	-	-	-	-	-	3
CREAS	1	-	-	-	-	-	-	-	-	1
Pop Center	-	-	-	-	1	-	-	-	-	1
Shelter/Reception Unit	2	-	6	1	1	3	1	1	2	17
Community Center	-	1	7	1	-	4	-	3	3	19
Day Center	-	2	58	4	24	1	-	3	9	101
TOTAL	4	4	71	7	26	8	1	7	14	142

Source: Prepared by the authors.

The SUAS Census manual defines, for the purpose of filling out the questionnaire, that the Commissioned type of employment is one of free appointment and dismissal; the Temporary one is that in which the public servant is hired temporarily to meet a temporary need of exceptional public interest; the Private CLT Regime refers to workers associated with a company/cooperative or any other service provider entity; the Public CLT Regime includes workers who, through public contest, provide services in a personal and non-occasional manner under the CLT regime; the Statutory type refers to workers occupying public positions provided by public contest; those linked as Voluntary are people who perform activities in the unit but do not have any employment bond or receive payment for the service provided; finally, Service Provider Entity refers to workers associated with companies/cooperatives or any other service provider entity (Brasil, 2021).

Table 2 shows that 50% of the occupational therapists working at SUAS are hired via CLT regimes by civil society organizations that provide social assistance services through agreements and that only 23.2% are public servants providing service through direct administration. It is noted that, in the state of Rio de Janeiro, the insertion of occupational therapists into SUAS occurs mainly in non-governmental organizations and to a lesser extent in public direct administration devices. In addition, the functions performed by occupational therapists were verified and the following information was obtained, as described in Table 3.

Table 3. Functions performed by occupational therapists working at the SUAS network services in the state of Rio de Janeiro (Censo SUAS 2021).

SERVICE	FUNCTION					Total
	Higher education technician	Coordinator	Social educator	Caregiver	Other	
CRAS	-	-	1	-	2	3
CREAS	1	-	-	-	-	1
Pop Center	1	-	-	-	-	1
Shelter/Reception Unit	10	1	-	2	4	17
Community Center	14	-	4	-	1	19
Day Center	94	5	-	-	2	101
TOTAL	120	6	5	2	9	142

Source: Prepared by the authors.

Table 3 shows that three occupational therapists were working at CRAS in the state of Rio de Janeiro: two in the municipality of Paracambi and one in the municipality of Mangaratiba. Some data that stand out: the education level referred to for these three professionals was incomplete Elementary School for one and complete High School for two, and the function performed by these workers was that of Social Educator for one and “Other” for two. Thus, it can be inferred that, despite having three occupational therapists working at CRAS in two municipalities of the state, they did not act as Higher Education Technicians composing the team for the execution of work in PSB, and it is possible, from now on, to state that no occupational therapists were composing technical teams at CRAS in any municipality of the state of Rio de Janeiro.

Regarding CREAS, an occupational therapist was working in the municipality of Itatiaia, performing the function of a Higher Education Technician. At Pop Center, there was an occupational therapist inserted in service in the municipality of Resende.

It is noticeable that a larger number of occupational therapists compose teams at Shelter/Reception Units. In 2021, 17 occupational therapists were working in these units, one of whom in the municipality of Rio de Janeiro was coordinated by an occupational therapist. However, it was also noted that two individuals were functioning as caregivers and four individuals in a role designated as “Other”. This latter classification applies in the SUAS Census when none of the available options fit the specific function of that professional in the unit. It is worth noting that the options to indicate are: coordinator, higher education technician, caregiver, caregiver assistant, social educator, administrative support, intern, cook, driver, and general services (Brasil, 2021). Thus, of the 17 occupational therapists working in Institutional Shelter/Reception Units, only 11 were inserted in these services practicing their profession.

Of these 11 occupational therapists, four worked in services in the municipality of Rio de Janeiro, two in the municipality of Niterói, and one in the municipality of Itaguaí. The others operated in state-managed Shelter/Reception Units. Regarding the population assisted by these professionals, six were inserted in units for older people, three for adults with disabilities, one for children and adolescents, and one for children and adolescents with disabilities. Thus, it is evident that the work of occupational therapists in Institutional Shelter/reception Units primarily occurs alongside older people or those with disabilities – a population more traditionally assisted by the category in the field of health, especially in physical rehabilitation.

Nineteen occupational therapists were working at Community Centers. Fourteen of them acted as Higher Education Technicians in the teams of 13 non-governmental units that executed the SCFV. Ten of these institutions were located in the municipality of Rio de Janeiro, one in Três Rios, one in São José de Ubá, and one in Belford Roxo. It was noted that most of the population assisted were children and adolescents; on the other hand, people aged ≥ 60 years were the least contemplated population for SCFV follow-ups.

Regarding Day Centers, the large number of occupational therapists in the composition of the technical teams is striking. This social assistance service had the largest number of professionals in the SUAS network in the state of Rio de Janeiro. In 2021, the state had 39 units executing the SPSEPDIF and included a total of 101 occupational therapists. Of these 39 units, 31 were non-governmental organizations,

eight also had agreements with the Municipal Health Council, and five with the city's education policy, also implementing policies from these sectors. Most of these services were in the municipality of Rio de Janeiro, with 26 Day Centers, Niterói was in second place, with five units, and the municipalities of Armação de Búzios, Bom Jesus de Itabapoana, Cambuci, Campos dos Goytacazes, Casimiro de Abreu, Nova Friburgo, Resende, and São João de Meriti had one unit each.

It is important to observe that out of these 39 Day Centers, two provided two different services from the social assistance/welfare policy: SCFV and SPSEPDIF, offering social assistance follow-ups both in PSB and PSE, covering a more diverse population with different needs and profiles. Another significant point for discussion is that of the 13 Community Centers and the 39 Day Centers that have occupational therapists on their staff, eight also provided services from the education and/or health policies.

A difference was also noted in the age composition of the occupational therapists working at SUAS in the state of Rio de Janeiro. While in Brazil the majority of occupational therapists are aged 30 to 40 years (43%), in the state of Rio de Janeiro, these professionals are aged between 41 and 50 years (34.5%).

Thus, the workforce of occupational therapists at SUAS in the state of Rio de Janeiro comprises 142 professionals, but only 126 of them in the practice of their profession since, despite having education in occupational therapy, 16 workers performed the functions of Caregiver, Social Educator, or "Other". Therefore, 8.9% of occupational therapists in the state of Rio de Janeiro practice the profession at SUAS. This insertion of the category in the social assistance/welfare policy is distributed in 14 (15.2%) municipalities of the state (Itatiaia, Resende, Rio de Janeiro, Niterói, Itaguaí, Três Rios, São José de Ubá, Belford Roxo, Armação de Búzios, Bom Jesus de Itabapoana, Cambuci, Campos dos Goytacazes, Casimiro de Abreu, Nova Friburgo, and São João de Meriti), with the capital city having the largest number of occupational therapists working in the social assistance field.

It can be surmised that these data related to the fact that two of the three active undergraduate occupational therapy courses in the state, namely, those of the Federal Institute of Education, Science, and Technology of Rio de Janeiro and the Federal University of Rio de Janeiro, are located in the capital, educating students for this sector. The third course recently started its activities in the municipality of Niterói, which belongs to the metropolitan region of Rio de Janeiro; however, this course has not yet graduated any class.

These occupational therapists primarily work in civil society organizations, providing services through agreements with CMAS, that assist people with disabilities and/or older people, and a large part of them provide services for other social policy sectors.

Relationship with the third sector and precariousness of work as syntheses of the insertion of occupational therapists into SUAS in the state of Rio de Janeiro

The central objective of social policies is to intervene in the expressions of the social question that produce inequalities in the life of the working class. These interventions function as a strategy of the bourgeois state to distribute and enable, to some extent, public goods and services that mitigate the exploitation and pauperism experienced by this class (Bezerra & Basso, 2023).

Thus, as Lopes (2016, p. 35) states, “despite not fatally harming the exploitative mechanisms of the regime”, since social policies do not operate on the mechanisms that produce the inequalities experienced by the working class in a capitalist society, they are configured as tools that can produce better living conditions for this class.

The work of occupational therapists occurs predominantly in the operationalization and dynamization of social policies, with social assistance being one of them. Therefore, the technical action of the category does not occur dissociated from ethical and political dimensions, since professional work takes place in a social context full of contradictions. This work is traversed by conditions that interfere with professional practice, such as the configurations of social policies at a given historical moment; the political context that determines social legislation, which in turn can expand or restrict rights; the configurations of power relations in workplaces; and, emphasizing for this discussion, the working conditions and employment bonds that determine the professional context (Bezerra et al., 2022).

Currently, the society project in Brazil is predominantly neoliberal, which in turn imprints a State character that reorients social policies towards focused, segmented, and privatized actions that, as discussed by Bezerra & Tavares (2009, p. 26), transfer to the market the sale of services to consumers “as a new form of surplus value appropriation” or pass on to the third sector the function of providing social services.

The third sector is comprised of private organizations, from organized civil society, non-profit, self-governed, and with an emphasis on voluntary participation. These institutions are more traditionally known as non-governmental organizations (NGOs), but other nomenclatures refer to other statutory organizations, which also compose the third sector, such as Social Organizations (OSs), and Civil Society Organizations of Public Interest (OSCIPs), among others. In social assistance, these organizations are commonly referred to as service-providing entities. The designation “third sector” is used to differentiate it from the first sector: the State, and the second: the private sector (Borba & Lopes, 2016; Bezerra & Tavares, 2009).

We start by problematizing that the tradition of Brazilian social assistance is marked by the State’s disengagement from conducting social policies, through the request for the action of third-sector entities and placing the responsibility of addressing the expressions of the social question on civil society. As Bezerra & Tavares (2009) state:

This constitutes a new modality of addressing the aftermath of the social question, relying on values of local solidarity, self-help, and mutual aid, representing a true setback in the face of the historical achievements of the working class. (Bezerra & Tavares, 2009, p. 27).

According to Borba & Lopes (2016), this is a historical trait of occupational therapy’s participation in social assistance/welfare policy: the insertion of the category into the teams of affiliated institutions for the execution of social assistance work. This study demonstrated how this still demarcates the insertion of the profession in the said policy in the state of Rio de Janeiro.

Of the 126 occupational therapists working in the social assistance network, 118 work in third sector services, representing 93% of the therapists practicing the profession at SUAS in the state of Rio de Janeiro. These data give rise to reflection on the trait of precariousness of work experienced by these professionals, since these institutions depend on external resources (either from State funds or civil society donations) to execute their work, experiencing great vulnerability before the Executive's discriminatory power in the granting of funds through agreements (Bezerra & Tavares, 2009). Moreover, these organizations tend to hire professionals with low weekly hours and low salaries, in addition to precarious employment bonds through service provision contracts. As a result, occupational therapists need to seek other workspaces, often in technical action fields different from social assistance, which places them in significant technical challenges for professional practice.

Another finding of this research that highlights the precariousness of the work of occupational therapists at SUAS in the state of Rio de Janeiro is the performance of other functions that are not part of the technical teams and/or management of services. We found that 16 (11.2%) occupational therapists working in the SUAS network hold positions of medium or fundamental level, demonstrating difficulty in professional mobility and opportunities for the practice of the profession. We reflect on a characteristic inherent to the city of Rio de Janeiro, which, with the legal establishment of a professional category as an operator of the system, through the law of SIMAS, ends up designing an encirclement of social work for the operationalization of the PNAS.

Final Remarks

Over the 12 years since the regulation of the insertion of occupational therapists into SUAS, it is possible to observe an increase in the inclusion of the category within the national social assistance network, but with significant differences between regions and states of the country, which, to some extent, also follow the unequal distribution of occupational therapy courses, still very concentrated in the Southeast Region, and more recently in the Northeast Region (Pan, 2014).

In the Southeast Region, Rio de Janeiro is the state with the lowest insertion of the profession in social assistance devices under its direct administration and full responsibility; furthermore, the analysis of this insertion found that 8.9% of the occupational therapists in the state worked at SUAS in 2021.

This workforce is composed of women (89.4%), aged 41-50 years (34.5%), hired by the third sector (93%), under the Consolidation of Labor Laws (CLT) regime (50%), with a weekly workload of 11-20 hours (40.9%), performing the function of Higher Education Technicians (84.5%), mainly inserted in Day Centers (71%), working with people with disabilities and older people.

The results of this survey signal the importance of expanding dialogues and publications about the work of occupational therapists with people with disabilities and older people in social assistance, in alignment, both theoretically and methodologically, with the work required by this policy.

This study also highlighted the challenges of producing discussion based on the SUAS Census. The way the database has been improving over the years is noteworthy; however, there are difficulties in accessing information, instability in how it is made available to the general public, and weaknesses in its completion by the devices. An example is the inconsistency in filling in information about occupational therapists working at CRAS in the state of Rio de Janeiro. As previously mentioned, occupational therapists were indicated with elementary and high school education, which suggests that the person responsible for filling it out made some mistake or raises questions about how the work of occupational therapists is perceived by those who fill out the SUAS Census questionnaire. There are also confused or imprecise definitions regarding the types of employment and functions performed by workers, which can produce biased data and hinder more qualified analyses of Brazilian social assistance.

The syntheses produced here about the trait of the precariousness of the work of occupational therapists, which marks the insertion of the category in SUAS, as well as the low insertion of the profession in the state's facilities, point to the need for class representation entities to produce more debates on the theme of occupational therapy in social assistance, in addition to the imperative of actively participating in this policy as a producer of the labor market for these professionals.

Furthermore, it is necessary to invest in discussion around team compositions and the demand for interdisciplinary work, the recognition of different fields of knowledge, aligning with the NOB/RH SUAS. This mapping suggests that the primacy of social workers still prevails in the state of Rio de Janeiro, but further research is required to compose and qualify this statement.

Moreover, the debate brought forth in this article provokes reflection on the precariousness of social assistance in the state, incites other professional categories to analyze how they are inserted in SUAS, and mobilizes criticism about the state's non-responsibility for the operationalization of social assistance services. Thus, we hope that the data produced and presented here provoke other debates around the Brazilian social assistance/welfare policy.

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Authors' contributions

Ana Carolina de Souza Basso: production, analysis, and discussion of data and writing of the manuscript; Janette dos Santos Homem: data production; Patrícia Leme de Oliveira Borba: study guidance and discussion, writing, and proofreading of the manuscript. All authors approved the final version of the text.

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