Research Article RJPP 2017 1:14



Research Journal of Pharmacology and Pharmacy (ISSN:2572-8377)



HEALTH EDUCATION IN THE PAULO FREIRE'S CONSTRUCTS: PET-HEATH EXPERIENCE

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ABSTRACT

To describe the health education actions based on dialogue and *Correspondence to Author: questioning constructs to prevent dengue.

Experience report from the perspective of PET- Health precep- UFPE. E-mail: polianalucio2014@ torship conducted in the municipality of Garanhuns -PE. We cong gmail.com clude that PET -Health has contributed to the training of future professionals, enabling the inclusion of health policy, from the How to cite this article: perspective of education, community, promoting and guaranteeing the right to information in order to link health actions in basic BUARQUE, B.S et al.,.HEALTH education environments.

Keywords: health education; Primary Health Care; Education, Nursing.

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LÚCIO, F.P.S., SILVA, A.L.M. and EDUCATION IN THE PAULO FREIRE'S CONSTRUCTS: PET-HEATH EXPERIENCE. Research Journal of Pharmacology and Pharmacy, 2017, 1:14

eSciencePublisher a

eSciPub LLC, Houston, TX USA. Website: http://escipub.com/

INTRODUCTION

The National Program for reorientation of Vocational Training in Health (Pro- Health) was established by the Ministries of Health and Education in order to integrate teach-service and refocus the professional qualification, in order to ensure a comprehensive approach to the health-disease process with emphasis on primary care¹. In this sense, was launched the Education Program for Working for Health (PET-Health) through Interministerial Ordinance in 2008, which includes mentoring activities, tutoring and student monitoring, stimulates professional to entry into the teaching profession, qualifying him in to service, which results in a improved customer service and consistent approach to community health service^{2, 3}. The current healthcare system in the country, although its principles are based on comprehensive and multidisciplinary care, it can be seen only as a grouping of diverse knowledge, which may be a reflection of the fragmented disciplinary training of professionals that make the system. Thus, the National Curricular Guidelines (DCN) of health courses seek to strengthen interdisciplinarity in services according to the needs of SUS3.

From this perspective, it is intended with the Education Program for Working for Health (PEThealth) not only enrich the education of health professionals, but also the consolidation of guidelines for the professional practice in SUS, answering the needs of the services and the community⁴. As a fundamental principle, the Labor Education Program for Health (PET- Health) involves teaching activities, research and extension, minimizing the gap between theory built during the academic background and professional practice exercised in critical and reflective way and encouraging the training of workers

already in the health service⁵.

Historically, the health professionals act as mentors in the teaching processes inside the workplace1. Among the activities developed in the mentorship, there is the health education that allows the articulation and appreciation of the experiences of the participating group to the knowledge building process⁶.

The concept of health education is associated with the definition of health promotion, as an integral practice that requires the active participation of the individual in health care through holistic reading, promoting the autonomy of the individual to care for health. The completeness of the health education interventions aimed at correcting the tendency of authoritarian and fragmented approach of health professionals to the community^{7, 8}.

Freire (2002) says that education is communication and dialogue, carrying out the problem- way, with a view to the construction of knowledge9. The non- dialogical and vertical form, in which transfers knowledge of imposing and authoritative manner, usually applied by professionals has been replaced by Freirian model, because it isn't achieving the objectives proposed by public policies. Therefore, the integration of Paulo Freire constructs with health actions have greater reach in the community to encourage citizens in the quest for autonomy, self-care, wellness and health^{6, 8}.

Within the primary care scene, some diseases stand out in the Brazilian epidemiological profile, such as dengue, a viral disease transmitted by the Aedes, regarded as a public health problem through the records of epidemics unpredictable and difficult to control¹⁰.

In the first half of 2015, there were 1,319,957 probable cases of dengue in the country by the Epidemiological Bulletin². The country offers favorable climatic conditions for the development of the vector, as well as the lack of basic sanitation structure in the associated population to prevention and supervision guidelines insufficient by the government are the main causes of this high number of cases.

The prevention of dengue is mainly to eliminate the mosquito outbreaks are places where water might accumulate, such as tires, flowerpots and empty bottles. Therefore necessary to have innovative strategies to combat mosquito proliferation are planned and that they contemplate and involve the whole community, which reinforces its character of collective interest.

In this way, the incorporation of Freire thoughts in the institutions of the ESF with the Education Program for Working for Health (PET- Health) emerges as a proposed improvement to the contents of dengue cases as well as infestation in the community, to decline and hence achieve better resolution and impact on quality of life of people assisted.

This study sought to demonstrate through the experience report, from the perspective of mentoring, health education actions in the ESF - Heliopolis I with elementary school children I and II based on dialogue and questioning constructs to prevent dengue. It is believed that such reporting can contribute to the understanding and dynamism of the work process in the different interlocutors in this process.

METHOD

This survey is an account of descriptive experience. The activities developed sought to estab-

lish a working favoring the empowerment of the individual and from the construction of this process, they have the autonomy in the practice of effective and appropriate actions to their reality in the fight against dengue.

The actions were coordinated by the preceptress nurse and the veterinarian's instructions tutor, with the participation of 03 students (02 fellows and 01 volunteer) of the course of Veterinary Medicine. Academic activities were carried out through active methodology of teaching and learning , including the draft synthesis qualified search , new synthesis and evaluation.

The scenario in which were developed this process was a school in the municipal system of the city of Garanhuns, located in the Agreste region of Pernambuco. The school offers education to students of Elementary School I and II, in day-time, aged 06-16 years. It is understood that the school plays a key role in the formation of citizens capable of enhancing the health and participate in decisions concerning the well-being individually and collectively. Participated in this action elementary school students II, aged 11 and 16, who attend the said Municipal School.

In this context, the chosen active methodology was the play activity, by providing awareness by teaching practice and raise awareness of health issues¹¹. The playful activity is a mediator of the teaching-learning process, it ranks as method which includes the criteria for an apprentice-ship¹². The games are an entertainment tool, reasoning, fun and social integration, making it possible, through them, to recreate a reality, shape it and, in a sense, experience it¹³.

There was scheduled three meetings, each lasting an average of one hour and thirty minutes.

At the first meeting, it was made of a conversation circle in which it identified the students' prior knowledge about the prevention and fight against dengue measures, as well as its variant forms of involvement. Then was presented a playful exposure through an illustrative lecture on aspects related to dengue entitled "GETTING TO KNOW THE DENGUE" with the use of images and animations creatively containing information on the causative agent, lifecycle, transmission, symptoms and prevention.

The second meeting was executed the "BATTLE AGAINST DENGUE", a set of questions and answers, composed of thirty-six questions. At runtime the class was divided into four teams, represented by colors (blue, green, red and yellow). Three teams were formed by six participants and only one with five. The questions were selected according to the choice of a horizontal letter (A, B, C, D, E and F) and a number upright (1, 2, 3, 4, 5 and 6). When teams choose the correct answers to the question, filled up a gap with their respective team color on the score board, and when it roamed the response the picture was filled with black color. In the last meeting of this process a workshop recycling at the school was developed using materials selected by the students themselves.

RESULTS AND DISCUSSION

During the reception of students on the first encounter, the health professionals could put into practice the freire's dialogical method, listening to the subject and understanding their language skills and thoughts. Freire describes in his theory of dialogue constructs and questioning as a form of educational interventions. The first refers to the communications between the subjects of dialogic and participatory manner. In the dialogue, the teacher 's role is to transform knowl-

edge, enabling awareness of the subject¹⁴.

It is important to say that it could understood the cultural, social reality and students policy for a more targeted action, engaging them and encouraging their participation in the educational process.

The educative activity actions aimed at promoting and preventive health care in Brazil are marked by the traditional banking or teaching, which is characterized by authoritarianism and no appreciation of popular knowledge of individuals⁸. In this sense, it sought in the first meeting, collectively build knowledge about the disease and see which emerging situations to be worked.

The incorporation of students' knowledge and integration between two professional categories rescues the dialogic question not only in the sense of joint construction of knowledge, but starts a merger movement of interdisciplinary concepts and information sharing. In all sciences, several aspects related to the search for a more extensive knowledge, not fragmented, hold up the challenge of dialogue and interaction between disciplines, in addition to multidisciplinary efforts that generate only juxtaposed knowledge around the same problem¹⁵.

The implementation of group research is understood as a most appropriate methodology for qualitative cooperation between experts. This practice is carried out by professional experts or researchers or academics graduation teams, mediated by language, by dialogue and by methods available to all¹¹.

At the second moment during the execution of the game of questions and answers, health professionals could assess whether the students had understood the information on the causative agent, lifecycle, transmission, symptoms and prevention. To develop teamwork was possible to identify the effect of dialog and questioning about knowledge, both among professionals and students and among students themselves, as the question set was answered.

From the questioning, you can discuss issues or situations that require intervention. Thus, it stimulates the autonomy of the subject, as this may search for solutions according to the context itself¹⁴. In this sense, students were able to understand their multiplier role of knowledge in the community, raising the notion of citizenship and social identity.

So, when working in this perspective, a common playing field is created that enables the articulation of actions arising from professional nucleus and interaction of the actors towards a communicative practice. Thus, the project is providing numerous levels of interaction between tutors, mentors, academics and users, and performed tasks allow the generation of multidisciplinary projects⁴.

FINAL CONSIDERATIONS

It is concluded that PET-Health has contributed to the training of future professionals as it allows students to enter and activeness in the FHS, creating links, the development of different skills and knowledge of health planning in line with problem-solving methodologies of education. Breaks with the traditional model of education and health, is gearing up for a learn to make critical and reflective of reality, with a view to realization of SUS through the health promotion.

Among the participants of the activity, we can be said that there was intense interaction, to exchange information and affections, which suggests that activities of this nature are possibilities to advance in the construction of new models of teaching and care.

This experience as well as providing the expansion of targeted knowledge to health surveillance by means of the theory/practice enabled the qualification of professionals involved in the program as well as encouraging the students' work in prevention and control of dengue, fostered, especially the exercise of the multidisciplinary and interdisciplinary work in healthcare, enabling students, tutors and tutors interconnect knowledge, subjects and practices in the sphere of health surveillance.

So, besides contributing to the training of students from the PET- Health, the experience also provided the inclusion of health policy, from the perspective of education, community, promoting and guaranteeing the right to information in order to link health actions in basic education environments.

REFERENCES

- Brasil. Portaria Interministerial Nº 1.802, de 26 de agosto de 2008. Institui o Programa de Educação pelo Trabalho para a Saúde - PET -Saúde. Acesso: http://bvsms.saude.gov.br/bvs/ saudelegis/gm/2008/pri1802_26_08_2008.html
- Brasil. Ministério da Saúde. Boletim Epidemiológi co Secretaria de Vigilância em Saúde. Brasília, v. 46, N. 22, 2015. Acesso: http://portalsaude. saude.gov.br/images/pdf/2015/agosto/07/2015-028---Dengue-SE-28.pdf
- Assega ML et al. A interdisciplinaridade vivenciada no PET-Saúde. Revista Ciência & Saúde. 2010 jan/ jun; 3(1):29-33.
- Abrahão AL et al. Pesquisa como Dispositivo para o Exercício no PET-Saúde UFF/FMS Niterói. Revista Brasileira de Educação Médica. 2011; 35(3):435-440.
- 5. Morais FRR et al. A importância do PET-Saúde

para a formação acadêmica do enfermeiro. Trab. Educ. Saúde. 2012; 10(3):541-551.

- Campos CNA et al. Reinventando práticas de enfermagem na educação em saúde: Teatro com idosos. Escola Anna Nery (impr.). 2012; 16(3):588-596.
- Machado MFAS et al. Integralidade, formação de saúde, educação em saúde e as propostas do SUS - uma revisão conceitual. Ciência & Saúde Coletiva. 2007; 2(2):335-342.
- Fernandes MCP, Backes VMS. Educação em saúde: perspectivas de uma equipe da Estratégia Saúde da Família sob a óptica de Paulo Freire. Revista Brasileira de Enfermagem. 2010; 63(4):567-73.
- Freire P. Pedagogia da autonomia: Saberes necessários à prática educativa. 25ª edição. São Paulo: Paz e Terra. 2002.
- 10. Brito AL. Perfil epidemiológico da dengue no Brasil, nos anos 2009 a 2013. Trabalho de conclusão de curso, apresentado no formato de artigo científico ao Centro Universitário de Brasília (UniCeub) para conclusão do curso de Bacharelado em Biomedicina. Brasília, 2015.
- Goldschmidt AI, Machado DM, Machado DTM. Mosquito da dengue invade as escolas para ensinar através da brincadeira. [Internet]. SIEdu ca. 2008; 13 [Acesso 25 Mar 2014]. Disponível em: http://www.sieduca.com.br/2008/index2411. html?principal=lista_trabalhos&eixo=1&m odalidade=1
- Coscrato G, Pina CJ, Mello DF. Utilização de atividades lúdicas na educação em saúde: uma revisão integrada da literatura. Act paul Enferm. Interface (São paulo). 2010; 23(2):257-263. [Aces so 25 Mar 2014]. Disponível em: http://www. scielo.br/scielo.php?pid=S0103-21002010000 200017&script=sci_arttext
- Silvia TD, Cardoso FS, Rodrigues CR, Liberto MI, Currié M, Vonnier MA, et al. Jogos virtuais no ensino: usando a dengue como modelo. RBECT. Interface (Ponta Grossa). 2008; 1(2); 58-71. [Acesso 25 Mar 2014]. Disponível em: file:///C:/ Users/cliente/Downloads/232-860-2-PB%20(2). pdf
- Linhares FMP et al. Construtos teóricos de Paulo Freire norteando as estratégias de promoção à amamentação. Rev. Bras. Saúde Matern. Infant, Recife, v. 14, n. 4, p. 433-439, out./dez., 2014
- 15. Santos DS, Almeida LMWS, Reis RK. Programa de Educação pelo Trabalho para a Saúde:

experiência de transformação do ensino e prática de enfermagem. Rev Esc de Enferm USP. 2013; 47(6):1431-6.

