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PERCEPÇÃO DE ACADÊMICOS DE ENFERMAGEM SOBRE A EXPERIÊNCIA DAS PRÁTICAS DE EDUCAÇÃO EM SAÚDE

PERCEPTION OF NURSING STUDENTS ABOUT THE EXPERIENCE OF HEALTH EDUCATION PRACTICES

PERCEPCIÓN DE LOS ESTUDIANTES DE ENFERMERÍA ACERCA DE LA EXPERIENCIA DE LAS PRÁCTICAS DE EDUCACIÓN EN SALUD

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RESUMO

Objetivo: Compreender o significado da experiência das práticas de educação em saúde na perspectiva do estudante de graduação em enfermagem. Método: Trata-se de um estudo descritivo, exploratório, com abordagem qualitativa, realizado em setembro de 2014. Foram utilizadas entrevistas semiestruturadas com 19 estudantes de enfermagem de instituições de ensino superior de Minas Gerais, cujos depoimentos foram gravados e transcritos na íntegra. A análise das informações ocorreu por meio de análise de conteúdo. A amostra foi definida por saturação de depoimentos. Resultados: Após a leitura e a análise dos depoimentos, foram identificadas as seguintes categorias: "Transmissão de conhecimento e mudança na realidade dos indivíduos"; "Atendendo às necessidades da população por meio do processo de enfermagem"; "Satisfação na experiência prática de educação em saúde: exercendo o conhecimento adquirido"; "Desmotivação dos alunos advinda do desinteresse da população: uma questão de valorização profissional". Conclusão: O estudante de enfermagem entende a educação em saúde como um processo de aprendizado vivenciado na sua formação acadêmica, que posteriormente poderá ser repassado por meio da sua prática no exercício profissional. Há uma necessidade de mudanças metodológicas, capazes de formar profissionais com capacidade crítica e, consequentemente, esses irão incentivar usuários a desenvolver os próprios cuidados em saúde.

Descritores: Enfermagem; Estudantes de enfermagem; Educação em saúde

ABSTRACT

Objective: to understand the meaning of the experience of health education practices from the nursing undergraduate student perspective. **Method:** this is an exploratory-descriptive study of qualitative approach. The data collection was carried out in September of 2014 and semi-structured interviews have been used with 19 nursing students from higher education institutions in Minas Gerais, whose statements were recorded and transcribed in full. The processing of the data occurred through Content Analysis. The sample was defined by saturation. **Results:** after reading and analyzing the statements, the following categories were identified: "Transmission of knowledge and change in the reality of individuals"; "Meeting the needs of the population through the nursing process"; "Satisfaction in the practical experience of health education: exercising the acquired knowledge"; and "Students' demotivation due to the lack of interest of the population: a matter of professional appreciation". **Conclusion:** the nursing student understands health education as a learning process experienced in their education that can later be passed on through their practice in professional practice. There is a need for methodological changes capable of training professionals with critical capacity and, hence, these will encourage users to develop their own healthcare.

Descriptors: Nursing; Nursing students; Health education

RESUMEN

Objetivo: comprender el significado de la experiencia de las prácticas de educación en salud, en la perspectiva del estudiante de graduación en enfermería. **Método:** se trata de un estudio descriptivo, exploratorio, con abordaje cualitativo, realizado en septiembre de 2014. Se utilizaron entrevistas semiestructuradas con 19 estudiantes de enfermería, provenientes de instituciones de enseñanza superior de Minas Gerais, cuyos testimonios se grabaron y transcribieron por completo. Se realizó el análisis de las informaciones por medio del análisis de contenido. Se definió la muestra por saturación de testimonios. **Resultados:** después de la lectura y del análisis de los testimonios, se identificaron las siguientes categorías: "Transmisión de conocimiento y cambio en la realidad de los individuos"; "Atendiendo las necesidades de la población por medio del proceso de enfermería"; "Satisfacción en la experiencia práctica de educación en salud: ejerciendo el conocimiento adquirido"; y "Desmotivación de los estudiantes advenido del desinterés de la población: una cuestión de valoración profesional". **Conclusión:** el estudiante de enfermería entiende la educación en salud como un proceso de aprendizaje vivido durante su formación académica, que, posteriormente, podrá repasar a través de su práctica en ejercicio profesional. Hay una necesidad de cambios metodológicos, capaces de formar profesionales con capacidad crítica y, consecuentemente, estos incentivarán a usuarios para que desarrollen sus propios cuidados en la salud.

Descriptores: Enfermería; Estudiantes de enfermería; Educación en salud

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INTRODUCTION

Health education is a way to promote the wellbeing of the population, through services provided for the control and prevention of diseases. For efficacy of care, the nurse must be inserted in the way of teaching and must promote better conditions for self-care to the human being, in a clear way so that the patient is able to understand their commitment to the health system, becoming an agent of their own care. During the undergraduate process, the professor should encourage the academic on the importance of building knowledge aimed at the conversation, listening and interpretation at the moment of the query, generating reliability, credibility and hope regarding the problems to be faced by the client⁽¹⁾.

Currently, it is possible to perceive the predominance of a disease-centralized model of care, which is focused on the hospital as a form of care. There is a need for models that are aimed at health education, so changes in the professional training can help in a new way of promoting health and the prevention of diseases⁽²⁾. New trends and pedagogical innovations linked to scientific and technological development have contributed to the processes of scientific production in the Nursing education sector, which reflects advances and changes in the curricular development of undergraduate and postgraduate professional training courses⁽³⁾.

The commitment of universities to society is to contribute to the formation of active and critical citizens of their own reality, forming qualified workers to raise the level of the society and to participate in solving social problems⁽⁴⁾. The acceptance of health education in the nursing professional's field of action will depend on the culture and on the way that the population understands what a healthy life is, because depending on the cultural milieu, there may be little acceptance. The search for dialogue and listening to the other in order to know their experiences make them know the conception of the world and the social role of education⁽¹⁾.

The Nursing Graduate Curriculum Guidelines (NGCG) point out to aspects that professionals should be able to continuously learn both in their training and in their practice by adopting the knowledge required for the exercise of the following skills and competences:

healthcare, decision-making, communication, leadership, management, and continuing education and management⁽⁵⁾.

Changes in the health education process lead to significant transformations both in the formation and in the day-to-day life of the individual. Through technology, we look for a new scenario for nursing professionals, involving intelligence and practices oriented to the world of information technology, in order to increase knowledge and service in a more resolute way, being fundamental to organize and ensure the care provided⁽²⁾. It is relevant to know the limitations and challenges in the Nursing Education knowledge scenario, making it possible to structure policies and practices that are capable of rebuilding and consolidating the nursing training processes, favoring the strengthening of the profession⁽³⁾.

There is a perception regarding pedagogical schools in the teaching method, targeting technical forms of learning and identifying few Health Education practices in the training process. It is observed the need for an integral and adequate training to the instrumental method that is the home visit, since it allows the nursing student to provide information and care to the patient and the family so that the patient can become independent, looking for a better quality of life⁽⁶⁾.

Thus, this study aimed at understanding the meaning of the experience of health education practices from the perspective of undergraduate students in nursing.

METHODS

This is an exploratory-descriptive study with a qualitative approach. In the qualitative research, the universe of meanings is organized without the worry regarding the quantity, but understanding the human phenomena, valuing the interpretation of the experienced actions of all the similar ones⁽⁷⁾.

The sample of this study was defined by saturation of the information in which it comprised 19 students from the 5th, 6th and 8th period of the Nursing undergraduate course at Faculdades Unidas do Norte de Minas FUNORTE) and Faculdade de Saúde Ibituruna (FASI), located in the city of Montes Claros/MG, which had already had the experience with the practices of

Health Education during the Clinical Teaching. The number of participants respected the saturation of information found in the interviews. The following inclusion criteria were adopted for the participation in the research: being a Nursing academic from FUNORTE and FASI; and to have participated in the practices of Health Education.

During the data collection, the students were individually approached in a room reserved for the research in which all the objectives of the same were explained to the participants, and the participants signed a Free and Informed Consent Term (FICT) to participate in the study. In order to preserve the participants' identity, a letter of the Latin alphabet followed by a number (A1-A19) was used, obeying the ethical principle of their anonymity so that the result did not identify the volunteers. The following guiding questions were used: What does the experience of health education in the academic period mean to you? How do you feel when conducting health education practices?

A semi-structured interview was used as a data collection instrument and a tape recorder to capture participants' testimonies. The data collection was carried out in September of 2014. The speeches were recorded and transcribed in full for further analysis and discussion. The data processing was performed using Content Analysis⁽⁸⁾, a method that is based on a set of communication analysis techniques with systematic procedures for the description of message content.

The interviews were categorized to analyze the results, based on the structure that is used in the thematic analysis of the material, being organized and structured following the phases: pre-analysis, material exploration and treatment of results⁽⁷⁾. The abstracted categories for the study were: "Transmission of knowledge and change in the reality of individuals"; "Meeting the needs of the population through the nursing process"; "Satisfaction in the practical experience of health education: exercising the acquired knowledge"; "Demotivation of the students due to the lack of interest of the population: a matter of professional appreciation".

The ethical precepts established by the Resolution No. 466/2012 of the National Health Council (NHC), which regulates research involving human beings, were respected. The research project was appraised and approved by the Research Ethics Committee of Faculdades Unidas

do Norte de Minas (CEP FUNORTE), under the substantiated Opinion of No. 790.886/2014.

RESULTS E DISCUSSION

Transmission of knowledge and change in the reality of individuals

It was observed in the speeches of the students a speech that demonstrates the traditional vision of what is education in health. They showed a more limited perception of the term in view of the transmission of knowledge. "The way the scholar has to pass what he has learned." (A6) "It is a very good strategy because we are going to bring experience and knowledge." (A14) "A way to improve care, improve the quality of care provided to the population". (A18)

Nursing education requires the knowledge of more active and participative learning methodologies since the nurse deals directly with the educational process in health. In this way, a limited vision about health education based on a traditional process of learning presents difficulties for an emancipatory practice⁽⁹⁾.

It is important the insertion of the nursing student in the actual practices from the initial periods of the undergraduate course, allowing care in the health service, thus generating a greater approximation of teaching, allowing the experience in the resolution of future problems. Educating implies having creativity, freedom and dialogue in a way that enables the client to better understand the applied practices, achieving benefits for recovery and maintenance of their health^(1,10).

The lack of interest of the tutors with the methodology and lack of didactic and pedagogical resources was one of the problems faced by the students. The goal of health education is to provide the opportunity for the user to have freedom of expression and reflection on their actions, encouraging changes in their lifestyle. It is a continuous process, not only to pass information to the target public, but to raise awareness about health problems, is to dialogue, to encourage the individual to answer their questions, to follow the transformation process, adapting their conditions according to their own reality⁽¹¹⁾.

Health education is a way of promoting the wellbeing of the population, through the services provided for the control and prevention of diseases. It is a method used for disease prevention, cost reduction and minor sequelae of

individuals. Health professionals have a duty to inform the population about healthy habits in order to provide better quality of life (QoL). Therefore, the effectiveness of these actions is considered to be flawed, since the nurse is a coauthor of these activities⁽¹²⁻¹³⁾.

For the A1 student, health education is seen more comprehensively and also as something that should change the reality of individuals, thus, the nursing student recognizes that the change in practice is fundamental, and, in this sense, health education should favor a behavior change.

Another factor was the change in the reality of individuals, promoting self-care and improvements in the QoL of the population, making preventions before the problem happens. "In a way that changes the reality of those people in practice". (A1) "Offering a better quality of life for him, right?". (A10) "To be able to help people, right? Enhancing knowledge as a professional". (A13)

The Unified Health System (SUS) is responsible for major changes in health practices and changes in the training of professionals. The nurse has new responsibilities and competences within this system in which nurses play an important role in the implementation of health policies⁽¹⁴⁾.

Meeting the needs of the population through the nursing process

The perception of the nursing student evident through the statements becomes demonstrating their needs to serve the population so that they can be aware of their reality and, thus, reach their target audience to pass on the knowledge acquired. It is perceived that the student sees health education as a strategy of action and intervention that is transforming of the lives of people, especially for those who are more ignorant and through these interventions need a greater methodological preparation during graduation. "Knowing these needs you grow professionally." (A2) "We have direct contact with the target audience knowing their needs". (A3) "To see the reality of my population". (A14)

It is important to insert the student from the beginning of the course in the real practices, enabling care in the health service, thus generating a closer approximation of teaching, allowing experience in solving future problems. The process of Permanent Education in Health showed advances in more traditional practices of formation of groups with a focus on informing the population by evidencing the need for pedagogical knowledge as well as group knowledge, being possible to build learning related to working with groups, approach that goes beyond the educational dimension. In this process, it is important to analyze the relationships and work through the institutions, the technical and social division of labor and the school/university institution so that it can produce important changes in the practices⁽¹²⁾.

The SUS is a health system that implies great challenges of directing nursing teaching and its practices. In order to prepare professionals, it is necessary to sensitize them to the problems of the population by integrating the promotion, protection, recovery and rehabilitation of health based on comprehensive care, that is, to act on their diverse needs⁽¹⁵⁾. In order to recognize the fragility of the process of social construction of health, it is necessary to have a continuous debate between the interior of SUS, Brazilian civil society, and universities, so that nursing can become a process of transformation in the context of health and social transformation⁽⁶⁾.

For academic A8, this transformational education is acquired every time during health education practices, but this proposal brings a deeper learning throughout the course, resulting in professional confidence and valuing the relationship with the population. "It is an extra learning that we earn every period". (A8)

The professional graduation in nursing should not be focused only on the disease, but on continuing education in order to prevent these. It is observed an involvement in day-to-day activities, leaving health education aside, so professionals become outdated and uncommitted with the continuity of education, since to follow up on this process, it is necessary for the professional to make updates to educate, and greater pedagogical improvement is also required⁽⁴⁾.

It is important to emphasize the need to invest in the training of critical professionals, who are capable of reflecting on the social, political and cultural reality and, therefore, being able to account for the needs of the nursing training process⁽¹⁶⁾. In order to find out if an activity is in accordance with a proposal of transformative education, the procedures adopted for Health Education developed in the health services, school, and community, should be analyzed in

order to participate in the solutions of health problems, as well as see our role in their solution $^{(4)}$.

Satisfaction in the practical experience of health education: exercising the acquired knowledge

Nursing courses guide students or professionals to acquire knowledge and develop activities such as prevention, promotion and protection, and rehabilitation of health in all the environments, but when it comes to education, to prevent before the problem happens, it is important to know how to act and communicate in an accessible way to the general public.

This category shows how the student feels when performing health education during their undergraduate process with pleasure. The experience of being directly on the field makes them feel satisfied with the possibility of experiencing the practices of Health Education contributing to their growth. "In a pleasant way, it is to be able to experience in a practical way". (A1) "I feel fulfilled regarding the experience that I had". (A8)

Nurses have important responsibilities and competences within SUS, where the nursing professional is one of the great foundations for the implementation of Health Policies, requiring a quality training, that is in line with the Curricular Guidelines and the Public Policies of Healthcare ⁽⁶⁾.

It is possible to perceive the vision that the student has in putting knowledge into practice, as there are a series of difficulties faced during the course, such as the limitation of the resources offered by the universities, the devaluation on the subject, the lack of interest of the population, and the lack of motivation of the tutors. The practice is observed as an obligation of the academic only for their future formation⁽¹⁷⁾. Students are challenged in their first contact with health education, since the educational practices are difficult tasks and require more thorough preparation of health knowledge, and the construction is given through each period until their formation. "I feel challenged to put into practice what I have learned." (A2)

The reality in the educational practice demonstrates a challenge for the nurses' performance, but that little by little is being built despite the difficulties and challenges amidst the contradictions between a traditional and a new one. It is imperative that professionals are able to

change this reality by crossing barriers from their actions⁽¹⁸⁾.

Demotivation of the students due to the lack of interest of the population: a matter of professional appreciation

It has been observed the frustration that the academics have regarding the education in health, when they perceive the disinterest of the population to the proposed themes. "Demotivated because I do not feel interest". (A3) "The feeling is of frustration, I believe that in the act of making education we feel frustrated". (A18)

It is relevant to reflect, analyze the problems, difficulties and challenges encountered and go beyond, overcome the barriers that impede education in relation to the population (18)

It was noticeable the professional appreciation, the feeling of realizing the importance of the profession, and how pleasant it is to put its activities into practice. The student feels important in caring for the community and answering questions. "I feel important". (A4) "I feel very pleased to be doing good to the community.". (A4) "It is the moment when I feel like a nurse.". (A6) "I feel good because I know it is something that will benefit both me and the people who will listen to it". (A11)

It is perceived that the experience acquired was satisfactory for most of the interviewees, since they understand that health education has a transforming role in the community, and having this discipline included in the methodology helps them to be better prepared for the work market. They report the pleasure in putting into practice all the theory acquired in the classroom. Others see this experience as a personal challenge in overcoming the difficulties of passing on knowledge, given the lack of motivation of the population, due to the repetition of the themes already seen with other scholars in previous periods.

It is important that the future professional knows that health education comes to unite the previous knowledge of the population and scientists, valuing the way of thinking of each human being, always worrying about the updating of professionals and the movements, in which the process of continuing education can qualify them according to the real needs of each population, group or individual⁽²⁾.

FINAL CONSIDERATIONS

It was evident in this study the importance and value of knowledge so that the student can transmit security to the population and encourage changes in the health-disease process.

In the academy, students are instructed to acquire knowledge and develop activities such as prevention, promotion, protection and rehabilitation of health in all environments in a technical way, encouraging not only the treatment, but also educating the population in the prevention of injuries, and teaching educational activities, which is not a practical form in teaching.

In this perspective, there is a need for methodological changes capable of training professionals with critical capacity and, consequently, these professionals will encourage users to develop their own healthcare.

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