

Reflecting the praxis focused on the integral approach of the health-disease process in the nursing training

Refletindo a práxis voltada à abordagem integral do processo saúde-doença na formação do enfermeiro

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ABSTRACT

Objective: To understand the scope of the problematization as a training strategy for the integral approach of the health-disease process in the care provided by graduates of a Nursing Course. **Methodology:** Qualitative case study, involving teachers, professionals and nursing managers of a Nursing Course. To collect the information, focal group and individual interviews were used, totaling 16 participants. The data were analyzed following the recommended thematic analysis of content. **Results:** The results attest that the problematization is considered a favorable strategy to the formation of creative professionals in the services, promoting a broader view of health, although the services present a reductionist vision of health, a challenge that is posed to professionals to change this reality. Teachers are also recognized as subjects of the teaching-learning process. **Final Considerations:** The problematization, as pedagogical strategy during the formation, promotes the extended view of the professionals, considering the health-disease process, favoring the reorientation of the health care model.

Descriptors: Nursing; Education, Higher; Professional Practice; Health Services; Health.

RESUMO

Objetivo: Compreender o alcance da problematização como estratégia de formação para a abordagem integral do processo saúde-doença no cuidado prestado por egressos de um Curso de Enfermagem. **Metodologia:** Estudo de caso qualitativo, envolvendo professores, profissionais e gestores enfermeiros de um Curso de Enfermagem. Para coleta das informações, utilizou-se grupo focal e entrevistas individuais, totalizando 16 participantes. Os dados foram analisados seguindo o preconizado pela análise temática de conteúdo. **Resultados:** Os resultados atestam que a problematização é considerada estratégia favorável à formação de profissionais criativos nos serviços, promovendo o olhar ampliado em saúde, apesar de os serviços apresentarem uma visão reducionista da saúde, desafio que se coloca aos profissionais para modificarem essa realidade. Os docentes também são reconhecidos como sujeitos do processo ensino-aprendizagem. **Considerações Finais:** A problematização, como estratégia pedagógica durante a formação, promove o olhar ampliado dos profissionais, considerando o processo saúde-doença, favorecendo a reorientação do modelo assistencial em saúde.

Descritores: Enfermagem; Educação Superior; Prática Profissional; Serviços de Saúde; Saúde.

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INTRODUCTION

In 2005, the Ministry of Health and the Ministry of Education created the National Program on Reorientation of Professional Training in Health (*Pro-Health*), based on the complexity of the health-disease process, which requires training that ensures the diversification of practice scenarios and pedagogical strategies to problematize, instrumentalizing students, health professionals and teachers to the protagonism in the teaching-learning process⁽¹⁾.

The problematization operates as an instigator of change and reorientation in the training of health professionals, with significant reflexes in professional practice. It allows criticality, is based on creativity and stimulates men's reflection and action on reality^(2,3). It is also a strategy that enables greater student involvement and motivation. When confronted with a problem, he examines, reflects, while establishing relationships with his own experiences, reframing his discoveries. From this motivation, the student seeks new information and produces knowledge, aiming at finding and/or formulating answers that may solve the identified impasses, which promotes his/her own development⁽⁴⁾. For Freire, "the action of problematizing emphasizes the praxis, in which the subject searches for solutions to the reality in which he lives, and makes him capable of transforming it by his own action, at the same time as he transforms himself"⁽⁴⁾.

In this sense, the Nursing Course — object of this study — obtained its proposal approved in the first Call for Proposals of *Pro-Health*, launched in 2005⁽⁵⁾, which underpinned the reformulation of the curriculum of its Pedagogical Project, based on the axes proposed by *Pro-Health*. The new Nursing Course curricular organization sought to group areas of general and specific knowledge by thematic affinities, forming nuclei of knowledge that would approach the health-disease process in the different life cycles, contributing to the formation occur in an integrated manner. The organization of the nuclei in the Pedagogical Project of the Course (PPC) followed a growing logic of complexity, developing theoretical contents and theoretical-practical activities in close articulation with health services and practice scenarios, since the first semesters.

This PPC was in force and guided the training of Nurses, who entered the Course during the years 2007 to 2017. Considering the amount of resources mobilized, subjects and institutions involved, (from management instances such as State and Municipal Health Secretariat, Municipal Health Council) in the implementation of the proposals of *Pro-Health*, as well as the significant financial investment for the reorientation of professional training, it becomes relevant the analysis of the impacts of the Program in the daily work of services. It is assumed that training, oriented in this direction and, therefore, to the transformation of conceptions and practices of health professionals, is a fundamental basis for the consolidation of SUS.

Before starting the research, seeking to identify the production of knowledge on the subject, an integrative literature review was carried out based on the research question: What topics are addressed in studies on the relationship between Nursing education and professional practice? The search for studies was carried out in the databases of the Virtual Health Library (VHL) and in the CAPES Periodicals Portal, through the descriptors: "health care"; "nursing"; "higher education"; "health service"; "higher education"; "human resources" and "graduates". It was identified that training in Nursing stimulates the creation of innovative pedagogical methods, in which teachers are apprentices and subjects in the teaching-learning process. Moreover, training plays a decisive role in the practice of professionals, being able to consolidate the reproduction of the biomedical model in health or its transcendence to a model based on integrality. The literature review points out that the pedagogical problematizing practices aim at inserting the student in the community, enabling the knowledge of the context, however, they do not portray his/her influence in the professional practice⁽⁶⁾.

In order to understand how the problematization in training influences the practice of nurses to achieve the model based on completeness, this article sought to answer the following problem: In what way the problematization in nursing training contributes to the integral approach of the health-disease process in the care provided by egress? As objective, it proposes to understand the reach of the problematization as a formation strategy for the integral approach of the process health-disease in the care provided by graduates of a Nursing Course.

METHODOLOGY

Study with qualitative approach, which used as method the case study, proposed by Yin⁽⁷⁾. This method "investigates contemporary phenomena within their real-life context"⁽⁷⁾. The case study is an empirical investigation, which seeks to understand a given phenomenon through the actors who experience it or have experienced it in their specific moment, while this phenomenon unfolds – in this case, the process of reorientation of training based on *Pro-Health*.

The choice of participants was made intentionally, being included in the study: seven nurses from the first class contemplated with (*Pro-Health*), who graduated in the first semester of 2011 in the Nursing Course of that University; seven teachers from the Nursing Course, who follow theoretical-practical activities in the work spaces of the graduate nurses; two managers linked to health institutions, with which the graduate nurses involved in the study maintained a work bond. In total, 16 participants were involved.

Data collection took place in the second half of 2015 and the first half of 2016, using reading documents to understand and describe the case, such as the PPC, project approved in the Pro-Health Notice and annual reports, sent to the Ministry of Health, in addition to focus group and semi-structured interview. Two focus groups were held, the first with nurses and graduates and the second with teachers, using a script with structured questions to promote the debate: How do nurses, graduates, articulate biological and social aspects of the health-disease process? How did the integration of the disciplines, during graduation, make possible a professional practice that facilitates the interdisciplinary work? What are the influences of the teaching in the graduation, based on the problematization, professional practice of the egress nurses? Individual interviews were conducted with management professionals, based on a semi-structured interview script, with questions that addressed the topics mentioned above.

It should be noted that interviews were conducted with managers because only two people participated in the study in this condition, and to compose a focus group are required, between six and 12 subjects. Also, it was considered that putting them together with the other participants of the research, during the focus groups, could inhibit the nurses and teachers. In this sense, the focal group should be homogeneously constituted, favoring the interaction among participants so that the interlocution among them occurs directly⁽⁸⁾.

The information registration was carried out by recording the focus groups and interviews, with the authorization of the participants. The recorded speeches were later transcribed, and the resulting text sent by e-mail and validated by those involved, with no changes suggested by the participants.

The analysis of the information followed the operative proposal of thematic content analysis mentioned by Minayo⁽⁹⁾. From the data analysis, two thematic categories emerged, described below. As a guarantee of ethical principles in research involving human beings, guidelines and norms of Resolution 466/12 of the NHC (National Health Council) were respected. The research project was submitted to the evaluation of the Research Ethics Committee of Unochapecó (REC), being approved by the opinion no. 1.266.472/2015.

RESULTS

Introducing the Case

In 2001, the National Curricular Guidelines for Undergraduate Nursing Education (DCN/ENF) were established, becoming to regulate and guide the organization, development and evaluation of the PPC of Undergraduate

Nursing courses throughout the country. In 2005, the Nursing Course under study was contemplated with approval of its Project in the scope of Pro-Health. This intensified the review of the PPC (started in 2002, based on the DCN, and concluded in 2006), based on the three axes of Pro-Health: theoretical guidance; practice scenarios and pedagogical guidance. As of 2009, the Course also participated in other editions of the Education through Work for Health Program (*PET-Health*), launched in specific edicts by the Ministry of Health, focusing on priority areas of SUS⁽¹⁰⁾.

Thus, the PPC, aligned with the axes proposed by Pro-Health, contemplated in its axis of theoretical guidance, activities integrated to training, such as: studies of the concepts of health and environment applied to different realities and territories of Basic Care (BC); application of nursing theories in care practice in health services; and, instruments and tools for management and management in health services.

In the practice scenarios axis, the approach of the students with the different practice scenarios, from the beginning and throughout the training process, was guaranteed with visits and theoretical-practical activities, using the strategy of integrating projects. It also guaranteed the development of the Supervised Curricular Internship in diversified scenarios, prioritizing BC.

In the pedagogical orientation axis, (*Pro-Health*) proposed the resizing of the teaching-learning process, through problematization. Thus, the PPC established strategies for the subjects participating in the formative process to experience teaching based on problematization, in diverse environments. Students were also encouraged to participate and carry out research, experiencing the investigative dimension of Nursing from the observation of real problems in health services and seeking solutions.

The Problematization in Training: building the nurses' praxis

The participants highlighted the Strategic Situational Planning (SSP) activity, which occurs in the last year of the Course, as a problematizing methodology.

PES is every problematizing methodology! So, they must identify the problems, the critical knots in the unit, and they must try to solve! [...]. (Professor Iris).

[...] Everything I had [...] in the classroom, [...] [was] focused on the issue of identifying community problems. (Graduate nurse Margarida).

In addition, experiential activities foreseen in the operationalization of the PPC, such as visits to diverse practice scenarios during graduation, are cited as problematizing.

When we go to the Children's Hospital in Florianópolis¹, [...] they (the students) problematize! [...] And these differences (of reality) can make them run away from the protocols [...] and think different things! (Professor Papoula).

The problematization is pointed out as a facilitator of the theoretical-practical association.

The problematization [...] influences [...] for them to be creative, to have autonomy, to seek solutions [...] to listen [...] to solve [...] They (students) become active in the learning process! [...] A subject with more initiative! [...] That nurse with attitude [...] who is not passive! [...] He becomes more questioning [...], more critical [...]! (Professor Iris).

[...] We could see everything as a whole! (at graduation) [...] everything was interconnected, [...] by [...] care; then you can associate, [...] that the individual [...] is not fragmented [...]. (Graduate nurse Tulipa).

Despite this, some teachers recognized that they did not use problematizing methodologies in training:

I honestly [...] don't feel like using [...] a problematizing theory in teaching! [...]. (Professor Violeta).

The nurses' praxis focused on the integral approach of the health-disease process

Graduate Nurses are cited as welcoming in the services.

The active methodology and the problematization have the requirement that you listen and welcome people [...] – our graduates listen and welcome people – [and, they seek ...] together with that individual, find an alternative, to solve that situation! [...]. (Professor Papoula).

They highlighted in their statements how they have articulated biological and social aspects for an integral approach to the health-disease process in the development of their practices:

[...] I must be accessing these biological, social determinants always in order to understand those illnesses in health. [...] We have done this articulation all the time, [...] to visualize [...] how much these biological, social aspects [...] influence in this health-disease process. (Graduate Nurse Antúrio).

¹During the 7th phase of the Nursing undergraduate course, the students make a technical visit to Children's Hospital Joana de Gusmão and other establishments in Florianópolis, the state capital, to learn about the services provided and the different routines of reference institutions that make up the health care network in Santa Catarina.

Some nurses and graduates have held management positions in the health care network, acting according to the experiences obtained during the training.

[...] Some of these graduates are at the management level of the primary health care network and [...] several graduates today work with indigenous health, [...] because we have in the formation process the discussion about these differences! [...] And in basic attention [...], graduates from these groups have been important in this work. [...] students who have been more involved with Pro-Health, with research and with PET- [Health] [...] they have another look! They capture these differences and they can do it! [...]. (Professor Papoula).

In this direction, the nurses demonstrate the basis for articulating biological and social aspects for an integral approach to the health-disease process.

[...] They have [...] a good basis to make this link! [...] We are at the moment of implementing the Nursing Process [in the service], using the Taxonomy of NANDA [North American Nursing Diagnosis Association], which includes [...] physiological, [...] psychological, [...] social, [...] and they [nurses] are managing to do this process! [...] they have this commitment of being [searching, researching] [...]. (Manager Acácia).

Participants cite specific initiatives promoted by the Course during the training, such as participation in Pro-Health and PET-Health or visits to diverse practice scenarios.

[...] The egress that participated in the PET [Health] [...] it makes this link, the biological, the social, the political! [...] I think it even has a more social focus! [...]. (Professor Iris).

It can be observed that the movements of professional reorientation are still punctual.

In the sector I am in now, [...] my routine there is room organization, materials, and employee management! [...] I see that the issues of each sector within the hospital are very distinct! (Nurse Margarida).

For the teachers, the services direct the way of thinking and acting of the professionals. [...] the service gives a lot of direction [...] It's very difficult for him [nurse] to realize this continuity [after training]. [...] I think the service interferes! (Professor Papoula).

However, the changes in practice required for this articulation are procedural.

The hospital also has a compact shape of things. [...] It's hard for them to get here and visualize! [...] [But] it has everything for them to evolve! [...] I think we'll be better off in a few years! (Manager Acácia).

DISCUSSION

From the DCN, the courses' PPPs started to be built, considering the local health needs, which signaled an advance in Nursing training and brought the training closer to the population's real problems⁽¹¹⁾. In this direction, the participants of the present study signal initiatives of innovation and creativity in professional practice, relating them to the use of problematization as a pedagogical strategy in training during graduation. The insertion of the problematization in the curricula promotes critical-reflexive thinking, as students unveil reality from their interested and responsible insertion⁽³⁾. This favors the formulation of creative responses to daily challenges, based on dialogue, by re-signifying relationships between academia, health services and population⁽¹²⁾. Through problematization, they lead the search for knowledge and problem solving, exercising freedom, autonomy and co-responsibility in their choices and decision making⁽⁴⁾, which brings the egress closer to the professional profile established by DCN.

It is important to understand that DCN guides the training in Nursing, based on the curriculum by skills. The focus on meaningful, student-centered learning leads the teacher to assume the role of facilitator of the teaching-learning process⁽¹¹⁾. The testimonies reveal that teachers use problematizing methodologies in training, although they do not evidence the support of this use in a problematizing theory. It is important to emphasize that teaching is not something static and immutable, it possesses incompleteness that is part of the teaching being under construction, permeated by different aspects related to the life experiences and trajectories of the teaching subjects⁽²⁾. In the health field, this topic has been assuming growing importance, since professionals are usually trained, but not teachers of these nuclei of knowledge. This fact also reveals that many teachers identify themselves more as professionals of their initial education than as teachers⁽¹³⁾. This has been pointed out in different studies, revealing the importance of pedagogical formation of health professionals⁽¹⁴⁻¹⁷⁾.

The teacher's statement that exposes the non-use of a theory as a basis for his pedagogical practices reflects a potency of maturation as a subject that, if on the one hand it is perceived as a builder and promoter of methodologies based on the problematization, on the other hand it assumes its fragilities when exposing difficulties in its realization in the teaching-learning process.

The subjects believe that the experiential activities during graduation, strengthened by the adhesion of the Course to *Pro-Health* and the orientation of the DCN, favor in the professionals the inquiring and critical behavior, allowing differentiated looks in front of a certain element and its context, which characterizes the significant learning. The subject of knowledge, which problematizes, not only changes itself, but modifies reality, as a subject who seeks, inquires and transforms. The problematization must reach the concrete reality of individuals, making them aware and motivating them to act in favor of their transformation⁽¹⁸⁾.

The training has provided opportunities for graduates to have a broader look at the concept of health and to develop scientifically grounded and coherent actions together with the services. Nurses are in permanent evolution regarding practical learning. Therefore, the experiences experienced strengthen initiatives for changes in practices, with greater appreciation of student participation. They favor changes in the care model, recognizing that health and disease are not opposite situations and that education, as a process, in formal and informal spaces, becomes a premise for health production⁽¹⁸⁾. The experience provided by training on commitment to human beings, in the context of teaching-service integration, grants autonomy to students and transforms them into active subjects of the care process, and the problematization is an important strategy of teaching-learning for integrality⁽¹⁹⁾.

Actions based on problematizing education⁽²⁰⁾ also require permanent effort and the subjects are critically perceiving how they appear in the world. This movement allows us to reflect on the influence of environmental conditions on education, and on the importance of considering changes in the work process, as well as the accelerated pace of knowledge evolution, by seeking a balance between technical excellence and social relevance. That is why professional training must prioritize significant learning methodologies, which enable students to play a leading role, in view of what is prescribed in the DCN. It is important to emphasize that learning "how to do" occurs through several active teaching-learning strategies, in addition to the experiences in practice scenarios⁽¹⁹⁾.

Considering the recent movement in Brazil, about the good nursing practices, it is necessary that these are coherent with values, ethical precepts and theoretical foundations of health promotion and take into account the understanding of the environment, the beliefs and, above all, the scientific evidence for which the objective of this practice is oriented⁽²¹⁾. In this direction, research, as part of the formation process, is fundamental to generate knowledge and skills in the subjects that will act in a qualified and integrated health system. It is important to understand that, many times, health services

attribute to the academy the responsibility for research and investigation, but it is in the daily context of health institutions that phenomena that feed knowledge production occur⁽²²⁾.

Even with all the advances, in professional training in nursing, provided by DCN, there is still a tendency to maintain traditional models of teaching or add active methodologies, creating a hybrid model, without the necessary epistemological deepening⁽¹¹⁾. This is affirmed by the participants who mention that although the training reorientation movements have national scope, their impacts are still revealed, punctual in the health services practices. In many situations, the workplace imposes restrictions to the actions proposed by the reorientation of the assistance model. However, these changes begin, timidly, to cause effects in the Nursing care practice, in multiple health care scenarios⁽²³⁾. This confirms that meeting the current demands of society requires nursing actions based on alternative and differentiated practices of the traditional teaching model⁽²⁴⁾.

The traditional view of health as absence of disease, crystallized in services and present in the perception of a large part of the population, tries to be overcome by theories produced in academia. However, this is not simple to translate as health services practices, making its application in the socio-political-cultural environment even more difficult⁽²⁰⁾. In this perspective, the challenge to the graduates is that of permanent education, *i.e.*, when entering the practice scenarios, the nurses need to make movements apprehended at graduation, which can and should be disseminated in the professional practice, having as consequence, consistent changes in the daily routine of their practice. In addition, the DCN also serves as a guideline for the principles of training nurses, guiding schools in organizing their curricula⁽¹⁹⁾, making their commitment to professional training for SUS essential.

CONCLUSION

The problematization, as a pedagogical strategy during the formation, promotes the creativity and the extended look of the professionals, considering the integral approach of the health-disease process, favoring the reorientation of the health assistance model.

The insertion of problematizing education in the curricula is important for the formation of subjects who perceive themselves in a constant learning process, having the awareness of their own unfinished business and of the world as a problematized and possible reality of transformation, being in line with the DCN for the Undergraduate Nursing Courses in Brazil. There are visible movements of reorientation of nurses' practices in the integral approach of the health-disease process in their daily care and management, as the subjects recognize the

problematic reality as a whole and the related problems as complex, the result of multiple determinations.

One of the limitations of the study is the fact that the data were collected four years ago, which, however, does not minimize the results achieved, demonstrating that Pro-Health was a potentiator of movements to redirect training in health. Furthermore, in the context of the Brazilian Health Reform, Pro-Health represents a relevant inter-ministerial initiative aimed at consolidating the assistance model advocated by SUS, to which Nursing has brought fundamental contributions. In this direction, we recommend other studies in order to deepen the debate and reflection on the issues addressed.

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