Health-Promoting universities: Collaborative and supportive practices for collective purposes

Universidades promotoras da saúde: Práticas colaborativas e solidárias para fins coletivos

ABSTRACT

Objective: to analyze Health Promotion actions developed in Higher Education Institutions belonging to the Brazilian Network of Health Promoting Universities. Method: this is a qualitative, descriptive, and exploratory study developed through documentary analysis of health-promoting actions. health published on the websites of institutions belonging to the Brazilian Network of Health Promoting Universities. The inclusion criteria were programs and actions whose proposals are to inform, impact, modify, and establish reorientation measures in the way of life of the academic community and its surroundings. The data production period was from March 2020 to November 2021. Results: 56 documents were analyzed, including Health Promotion actions and programs, such as the inclusion of daily activities inside and outside the institution, in addition to the active participation of students in the territory they (co)live. Final considerations: This study demonstrated that higher education institutions play an important social role and guarantee a significant impact on the health behavior of their community, through integrated and multisectoral actions. Thus, the integration of Brazilian institutions into the Network of Health-Promoting Universities strengthens social commitment and contributes to the organization of a calendar for discussions of health-promoting policies, projects, and programs within the institutions.

Descriptors: Health Promotion; Health Services at the University; Universities; Intersectorality

RESUMO

Objetivo: analisar as ações de Promoção da Saúde desenvolvidas em Instituições de Ensino Superior pertencentes à Rede Brasileira de Universidades Promotoras da Saúde. Método: trata-se de um estudo do tipo qualitativo, descritivo e exploratório desenvolvido por meio da análise documental das ações promotoras da saúde divulgadas nos sites das instituições pertencentes à Rede Brasileira de Universidades Promotoras da Saúde. Os critérios de inclusão foram programas e ações cujas propostas são informar, impactar, modificar e estabelecer as medidas de reorientação no modo de vida da comunidade acadêmica e seu entorno. O período de produção dos dados foi de março de 2020 a novembro de 2021. Resultados: foram analisados 56 documentos, entre as ações e programas de Promoção da Saúde, como a inclusão de atividades cotidianas dentro e fora da instituição, além da participação ativa dos estudantes no território que (co)vivem. Considerações finais: este estudo demonstrou que as instituições de Ensino Superior desempenham um papel social importante e garantem o impacto significativo no comportamento em saúde da sua comunidade, por meio de ações integradas e multisectoriais. Assim, a integração das instituições brasileiras na Rede de Universidades Promotoras da Saúde fortalece o compromisso social e contribui com a organização de um calendário para as discussões de políticas, projetos e programas promotores de saúde dentro das instituições.

Descritores: Promoção da Saúde; Serviços de Saúde na Universidade; Universidades; Intersectorialidade

HOW TO CITE THIS ARTICLE:
Moraes JV, Kloh DK, Bueno BC, Roscoche KGC, Freire MHS, Boller S. Health-Promoting Universities: Collaborative and supportive practices for collective purposes. Rev. enferm. UFPE on line. 2024;18:e259067
DOI: https://doi.org/10.5205/1981-8963.2024.259067
INTRODUCTION

Health Promotion (HP) reveals a new approach to health, since it establishes a process that empowers the community to act to improve quality of life, thus establishing co-participation between the individual and the State. In this way, the way of thinking about health has undergone reflection and reformulation in its policies and practices.\textsuperscript{1,2}

The National Health Promotion Policy (NHPP), established in 2006 by Ministerial Order MS/GM No. 687 and revoked in 2017, represented a state commitment in Brazil. Its main objective was to expand and improve health promotion initiatives in health services and in the management of the Unified Health System (UHS), taking into account the Determinants and Conditioning Factors of Health in order to strategically reorganize this scenario. This policy was designed to foster intersectoral actions, promote collaboration between different sectors, and establish partnerships that would enable the implementation of health-promoting activities.\textsuperscript{3}

From the perspective of intersectorality and the promotion of environments conducive to health, the social responsibility of Higher Education Institutions (HEIs) in relation to caring for the health of the academic community and its surroundings stands out. Favorable environments have a positive influence on the health and quality of life of those who attend, work and live in them. HEIs play a fundamental role in contributing to the construction, dissemination, and application of knowledge about HP, broadening the understanding of health processes.\textsuperscript{4}

In this context, the Health Promoting Universities (HPU) movement is committed to implementing collaborative and supportive policies, with the collective aim of preserving socio-biodiversity and promoting the active participation of individuals in managing their own health. In 2018, the officialization of the Brazilian Network of Health Promoting Universities (BRANETHPU) by the University of Brasilia (UNB) was a significant milestone, uniting 19 affiliated institutions committed to the well-being of the community. These institutions have solid projects that create welcoming environments for those who dedicate a crucial part of their lives to the dynamics proposed by the HPU network.\textsuperscript{5}

This study is based on the inclusion of "Health Promotion" in the National Agenda of Health Research Priorities (NAHRP)\textsuperscript{6}, specifically in axis 18, and seeks to examine whether the actions implemented are in line with the principles of HP. In addition, it aims to verify the receptiveness of health-promoting practices by the academic community and
to understand how healthy choices can contribute to supporting global health. An additional justification for this study is the perception that future professionals will play a relevant role in developing and defending future health policies, as well as in making decisions about them.7

From this perspective, the central question of this study is: How have the health promotion actions carried out at the HEIs affiliated to BRANETHPU impacted the health of the academic community?

OBJECTIVE

To analyze the Health Promotion actions developed in Higher Education Institutions belonging to the Brazilian Network of Health Promoting Universities.

METHOD

This is a qualitative, descriptive, and exploratory study, with a documentary analysis of the actions published on the websites of the HEIs belonging to BRANETHPU, in order to delimit the health-promoting actions developed at the HEIs.

Initially, an up-to-date list of the institutions affiliated to the network was obtained through electronic contact with the BRANETHPU coordinators. Information was then collected from the HEIs' websites between March 2020 and February 2021. The timeframe is justified by the biannual meetings of this Network, the last of which took place in 2020.

Next, a pre-analysis of the findings was carried out, using as criteria the inclusion of programs and actions with the proposals to inform, impact, modify, and establish reorientation measures in the way of life of the academic community and its surroundings. The exclusion criteria were informative actions on the SARS-CoV-2 virus and/or data on the COVID-19 pandemic.

The initial search resulted in the identification of 195 PS activities. Of these, 139 were excluded because they did not meet the inclusion criteria, totaling 56 documents that were submitted to the final analysis. With the help of Microsoft Excel® software version 2013, a spreadsheet was built for each program found, containing the name of the university, the name of the action and the year in which it was implemented, target audience, access link, etc.8
In the documentary analysis, the Thematic Content Analysis technique proposed by Bardin was used to decipher, in each action, the emerging nucleus that met the purpose of the research. This stage consisted of a process of coding, interpretation, and inference about the information contained in the programs, revealing their health-modifying and health-promoting content.\(^9\)

As the data was secondary in the public domain and available on the official websites of the universities belonging to BRANETHPU, it was not submitted to the Research Ethics Committee. The recommendations set out in Resolution 466/12 of the National Health Council (CNS) were used.

**RESULTS**

BRANETHPU is made up of 19 educational institutions, of which 13 (68.4%) are public, 11 (33.3%) federal, two (10.5%) state, and six (31.6%) private. These institutions have the HPU seal and therefore follow the accreditation criteria of the Pan American Health Organization (PAHO), with the details adapted by PAHO itself (Table 1).

**Table 1.** Accreditation criteria for HEIs. Curitiba (PR), Brazil, 2022.

<table>
<thead>
<tr>
<th>Planning Process</th>
<th>Activities Developed*</th>
<th>Program Participants**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document for the development of the HP initiative at the University.</td>
<td>Healthy eating (healthy snack bars, canteens, or cafeterias).</td>
<td>Academic managers and other representatives.</td>
</tr>
<tr>
<td>Working group to implement the initiative, involving different authors (school administration, teachers, parents, students and the community).</td>
<td>Physical Education (increasing the hours dedicated to physical activity, recreation and sports, improving physical spaces).</td>
<td>Teachers</td>
</tr>
<tr>
<td>Action plan of at least one year.</td>
<td>Inclusion of initiative in community action plan. (affectivity and sexuality, life skills education, interpersonal relationships).</td>
<td>Fathers, mothers and/or family members</td>
</tr>
</tbody>
</table>

Oral HP (installation of suitable spaces for brushing, educational activities).

Healthy school environment (improvement of physical spaces, environmental education, creation and conservation of green areas).

Source: Synthesis adapted from PAHO.

* The school must have at least one program in three of the following priority areas.

** The school must incorporate at least three participants from the representatives listed.

In the analysis of the documents, regarding the Planning Process axis, which mentions the commitment document for the development of actions in educational institutions, there is no explicit mention of this document, however, all the activities deal with planning, implementation, evaluation, and the adjustment and/or continuity of actions.

The Working Group for the implementation of the initiative and integration with other sectors involves the participation of university management, teachers, students, and the external community, and was mentioned by 15 (78.9%) of the HEIs. These emphasized that there was planning with the sectors (mainly health), and addressed the participation of representatives from academic management, teachers, students, and the external community. However, 16 (84.2%) of the HEIs did not clearly mention the inclusion of activities in the Community Action Plan, only their inclusion in daily activities inside and outside the institution, as well as the active participation of students in the territory they live in.

Under the criterion of Activities developed by the HEIs, the following types of HP programs and actions were identified: health education, event/congress, webinar, seminar, information notes, conversation circle/chat; extension and research projects; lectures/lives; campaigns; challenges; consultancy/training and psychological care.

All the HEIs analyzed have mental health programs. In three of them (15.8%), these programs have been in place for more than two years, while the others (84.2%) have actively promoted webinars, lectures, and/or conversation circles open to the academic community and the general public, with a view to discussing related topics.
They also mentioned activities aimed at understanding and tackling racial inequality in the university environment and proposed establishing protocols to minimize this disparity. One of the universities under study (5.3%) produced a document addressing the differences and inequalities faced by the black population in the country and on the HEI campus, presenting examples of students who had faced embarrassing situations due to their race and ethnicity.

With regard to healthy eating practices, six (31.6%) stood out, including initiatives in canteens, cafeterias, and even vegetable gardens, all associated with the promotion of regular physical exercise, such as sports and recreational activities. Actions were implemented to encourage both individual and collective physical activity, such as walking, volleyball, handball, and cycling.

Interestingly, one of the HEIs took part in a study focused on practicing physical exercise to help reverse conditions associated with people with Human Immunodeficiency Syndrome (AIDS).

Another HEI has established the Department of Health Promotion and Surveillance (DPVS), which is responsible for the "October and November Living Well" initiative, which aims to promote broader reflections on habits that can contribute to physical and mental health. It is important to mention that this department also coordinates the "Living Well Challenge" project, aimed at university employees, with a view to encouraging them to adopt healthier lifestyle habits on a daily basis.

In order to support remote working, as a result of COVID-19 control measures, six universities (31.6%) offered online consultancies for ergonomic adjustments in the work environment of employees, as well as guidance for administrative technicians and teachers on physical exercises adaptable to the home environment.

Two institutions (10.5%) relied on the collaboration of athletic associations, independent associations formed by students, to motivate students to exercise at home, with a view to their integration and well-being. One HEI established the "Health Promotion Division", promoting actions related to the health of federal civil servants. The division offers services such as psychosocial care, a vaccination surveillance program, preparation for retirement, health education activities, and online articles on quality of life. During the pandemic, they implemented the "Web Certificate" tool, allowing civil servants to attach medical certificates remotely, contributing to the control of SARS-CoV-2 infection.
A program called "Literary Chat", run by one of the HEIs, aims to strengthen the relationship between literature and health, encouraging well-being and self-care practices. Held virtually through an app, it allows instant interaction through voice and text messages. This form of communication is integrative and inclusive, as it does not require an internet connection to access the platform. After reading the proposed material, there is a moderated meeting to discuss and refine ideas.

At the same time, with regard to the third axis, concerning Participants in the Program, all BRANETHPU institutions stressed that there are active and passive participants in their programs and actions. They included students and teachers from all sectors; 15 universities (78.9%) also considered the participation of other employees (technicians, assistants, managers, among others) and the community in general (family members, friends, and their representatives).

In terms of equal access, most of the actions were carried out online, without mentioning how people without access to the necessary technology could take part in these activities. In addition, access to scientific and informational publications for people who are socioeconomically vulnerable and/or illiterate was not considered. One specific action (1.8%) used the podcasting tool within the university, stating that the recordings were made available to a regional radio station with wide coverage, with the aim of reaching the region's rural population. This strategy aimed to broaden the reach and promote greater inclusion in access to information.

DISCUSSION

The context in which the academic community is inserted defines their lifestyle has a direct impact on the university environment and significantly influences their health. In order to improve the discussion of the results, two axes of analysis were identified: 1. Health Promotion: collaborative and intersectoral practices at the university; and 2. Health promotion and policies to guarantee equitable access.

Health Promotion: collaborative and intersectoral practices at university

HEIs are communities formed by their workers and students and have the potential to promote health by fostering the creation of safe and sustainable environments, as well as empowering their members. Such empowerment allows individuals to exercise their individual and collective responsibility for their health by consciously adopting healthy lifestyle habits and participating in discussions that will have an impact on health policies.
Health-promoting activities at HEIs have aimed to promote quality of life and favorable health conditions for their internal communities, by reducing risk behaviors and creating health-friendly environments. The areas of action identified as most recurrent in HEIs are physical activity; prevention of Sexually Transmitted Infections (STIs); reproductive health; healthy lifestyles; waste management; smoking reduction; management of problematic use of psychoactive substances; promotion of well-being; self-awareness and mental health. It is worth noting that the activities are not only preventative and curative but also aimed at reorienting lifestyles.10

Some studies have indicated that the university environment has been associated with physical and mental illness among students, teachers, and other staff.11,3 However, initiatives such as the creation of a Health and Wellbeing Division or Department, mentioned in this study, reflect the administration's concern about the health conditions of the academic community, demonstrating its inclusion in the collegiate discussions.

In 2015, Portugal established the National School Health Program (NSHP) as a central guideline for national health policies and interdisciplinary integration12. However, after more than five years, interdisciplinary practices have largely been replaced by isolated actions without integration. This outcome corroborates studies that have confirmed that the high demand from students has led to illness and/or worsening of pre-established conditions, generating recurrent abstentions and even suspension from the course.4,13

Thus, integrating the areas of health and education, with the aim of designing activities that promote discussions, knowledge building, and the reformulation of comprehensive health policies at all levels of education, has the potential to bring about significant changes in the academic community. This approach, especially aimed at students, both inside and outside universities, can generate positive impacts and reorient practices and habits in their lives.4,13

In northeastern Brazil, a study showed that health professionals understand school health practices as epidemiological surveillance actions, often minimizing the description of students' health conditions.4 As a result, the concept of health, which goes beyond normative practices such as hygiene, nutrition, and exercise, is denaturalized and other ways of producing health are considered.14

With regard to collaborative or inclusive practices, the training of health professionals is the key to reformulating actions and strategies aimed at educational
It is important to understand the demands of all school levels, and for there to be coordination between universities and service networks, especially health services, in order to develop research, methods, and continuing education, as well as reformulate the way schools operate in order to value and integrate the community.

Programs that include the LGBTQIA+ group are also within the HPU, extension projects that develop regular events addressing mental health, STIs, and health consultations aimed at this public, among other topics aimed mainly at health students. Looking at the current health scenario, there is a gap in care for this specific public.

Another important factor for future health professionals is awareness and understanding of the historical context of this population, knowing and understanding LGBTQIA+ bodies in order to be able to provide comprehensive care and thus promote health. The use of industrial silicone, especially by transsexual women and transvestites, to modify their bodies, is a factor to be considered by the professional in the line of care because the administration of injectables in places where this product is present makes the action of the medication and/or immunogen unfeasible.

In a study focusing on teachers' HP activities, vocal disorders were the subject of discussion, demonstrating a lack of assistance for teachers. They perceived a lack of public policies since the laws and proposals established in Brazilian legislation only advocate the treatment of vocal disorders and ratify few preventive and promotional actions carried out in this field of health, through collaborative practices at the university.

Another aspect discussed in institutions is the abuse of the media by young adults, probably linked to the hedonistic circuit that is increasing in modern society, mainly due to the so-called social jet lag, i.e. an intentional delay in sleep. Stress is a naturally and/or biologically determined phenomenon, affected by psychosocial and environmental factors, which is often observed in students in the early stages of their undergraduate studies.

In Portuguese universities, the programs implemented focus on the needs of the academic community, especially the students who are the majority in this environment. These institutions have mentioned sleep assessment programs, carried out a survey of the quality, duration, regularity, and stage of sleep of university students, and have sought to intervene on an individual basis. In the analysis of this study, the strategies implemented by the HEIs also took into account the context experienced, the operation, and the rationale of the activities developed.
A Brazilian study\textsuperscript{20} created an educational tool aimed at undergraduate students, given that, during the COVID-19 pandemic, students' sleep was impacted, mainly due to the increase in screen consumption. The aforementioned study showed that creating an Instagram profile with interaction and engagement tools proved to be effective in reorienting some sleep habits and environmental changes.\textsuperscript{20}

It can be seen that the HPU movement can be built and rooted, as long as the HEI enables the participation of the academic community and its surroundings, allowing autonomy and the formation of alliances, seeking the transformation of contexts aimed at the good life of all the individuals who live there.\textsuperscript{21}

**Health promotion and equitable access policies**

As a result of the public health problems faced in Brazil and around the world, most public and federal universities have gained prominence in the view of Brazilians. However, despite this prominence, they are facing major budget cuts. The most recent cut of 14.5\% of the budget affected the resources allocated to student assistance, which compromises support for socially vulnerable students and, consequently, minimizes their access to the necessary health resources.\textsuperscript{22}

Financial support projects to promote student health at public universities are one of the attractions for low-income students, however, despite enabling access to food, for example, it makes quality control impossible, since structural actions offer better results, given that the university can control the quality of the services offered to the academic community.\textsuperscript{19,20}

An example of inclusive practices is the research project called "SOLIDARIS", which involves four European universities in Italy, Spain, Portugal, and Germany, plus six Latin American universities, two in Argentina, two in Chile, and two in Brazil. The aim of this project is to improve social inclusion through collaboration between HEIs, with the expansion of actions for students with disabilities, promoting the development of the cognitive, affective, and social skills of these students, who have naturally started attending universities.\textsuperscript{7}

A more recent example was the achievement represented by Resolution 269/2020, which established the Guidelines on Accessibility and Inclusion for People with Disabilities at the Federal Rural University of Rio de Janeiro. This deliberation highlights initiatives to promote activities that facilitate access, permanence, and effective engagement for students with disabilities.\textsuperscript{23}
The academic community, especially the students, is heterogeneous in terms of age, gender, color, ethnicity, and socioeconomic status. This diverse profile is due to Law No. 12.711/2012, also known as the Quotas Law, and social programs such as the Higher Education Student Financing Fund (HES), created in 1999. And the University Program for All (PROUNI), instituted in 2004 with Law 11.096/2005.

A study that analyzed gender and race disparity in Higher Education between 1996 and 2018 revealed that, over these years, gender inequality has been overcome. The new student profile shows that women now represent the majority in higher education. However, the study did not correlate this change with other categories, such as race and socioeconomic status. This suggests the possibility that, in the future, these women will occupy prominent positions in politics, research and other sectors. In addition, the study revealed a significant increase in the number of black students at HEIs, partly due to the implementation of affirmative action educational policies. Students' self-identification as black has also increased, which can be attributed to greater access to information and the growth of critical social movements.24,25

These elements have been fundamental in establishing equitable access policies, which has brought significant challenges for universities. They must not only guarantee entry, but also the permanence and completion of studies by these students. Therefore, understanding the economic and social reality of the members of the academic community is crucial to making decisions and implementing relevant activities. The COVID-19 pandemic has interrupted the activities of educational institutions, requiring reflection on how to continue teaching and guarantee the quality of this educational process.7

Students' access to and permanence in HEIs becomes irrelevant if there is no "learning" factor. Thus, profound changes are needed in the organization and operation of HEIs, in terms of pedagogical practices and teacher training. Therefore, managers and teachers need to be prepared not only to welcome students but also to offer them learning conditions, with the same opportunities to access the curricular content of the period in which they are enrolled.23,26

Considering this, one can see the existence of the HPU movement and the fluidity of actions and programs within the institution, which need to gain greater prominence on corporate agendas, focusing less on the performance and productivity of the academic community.26 In addition, this study has encouraged HEIs to encourage health-promoting
practices within their institutions and strengthen existing actions, seeking to transform higher education into a health-promoting context.

The different areas of study can produce evidence through participatory and multi-method research on the state of and access to health, quality of life, sociodemographic profile and lifestyles of the academic community and its surroundings, associating them with health determinants and conditioning factors.

Limitations of the study

This study shows limited access to information on the health-promoting activities carried out by universities on the institution’s official websites. This information is sometimes restricted to the websites of extension programs, undergraduate courses, or social media networks. There is also the obstacle presented by the official websites, in terms of search filters. It was necessary to carefully observe the dates presented by the website, manually, as they did not have a filter by year, only by keyword.

FINAL CONSIDERATIONS

This study has shown that HEIs play an important social role and ensure a significant impact on the health behavior of their community, through integrated and multisectoral actions. The fact that there are discussions about HP within the educational environment is already a victory for the health and education sectors. However, there is still a need for a broader view of this population, with innovative and funded activities, with the transition from a set of isolated practices to the operationalization of a health-promoting environment.

It is worth remembering that these practices must have a fundamental scientific and social basis, based on dialogical teaching-learning processes, in which researchers in the field must contribute by strengthening partnerships and technical-scientific and social capacities that enable the development and implementation of HPU practices in universities, and in the research groups involved, particularly in HPU institution and evaluation initiatives. From this perspective, the university is the model scenario for establishing and disseminating SP and sustainable development.

In view of this, it can be concluded that the integration of Brazilian institutions into HPU Networks strengthens their social commitment and contributes to the organization of a calendar for discussions on HPU policies, projects, and programs within institutions.
And thus broaden health discussions in this and other environments, in order to continue initiatives that foster an equitable and transformative society.

CONTRIBUTIONS

Conception and design or analysis and interpretation of data by Moraes JV and Khalaf DK. Furthermore, all authors of this study approved the final version of the manuscript and are publicly responsible for the content of the article.

CONFLICT OF INTEREST

Nothing to report.

REFERENCES


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