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CASE REPORT ARTICLE

PSICOEMOCIONAIS STUDENT DEMONSTRATIONS AGAINST THE ACTIVITIES OF THE NATIONAL CAMPAIGN OF SOIL: EXCHANGING EXPERIENCES

MANIFESTAÇÕES PSICOEMOCIONAIS DE ESTUDANTES FRENTE ÀS ATIVIDADES DA CAMPANHA NACIONAL DE GEOHELMINTÍASES: TROCANDO EXPERIÊNCIAS

PSICOEMOCIONAIS MANIFESTACIONES ESTUDIANTILES CONTRA LAS ACTIVIDADES DE LA CAMPAÑA NACIONAL DEL SUELO: INTERCAMBIO DE EXPERIENCIAS

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ABSTRACT

Objective: to share the psycho-emotional manifestations front students to the activities of Geohelminthiases national campaign in a city in Mato Grosso inside. **Method:** A descriptive study of its kind experience report conducted during the month of August 2014 with students from 5 to 14 years. **Results:** children reproduce in his imaginary specific concepts for each attended experience and in all age groups assisted by the campaign, the professionals were viewed as superior and that students had attitudes and behaviors of respect, trust and acceptance of new links as well as spontaneous fed back as enthusiasm, expressive facial expressions of interest, smiles and interactions during speeches. **Conclusion:** the visited school environments, few health actions undertaken by the family health teams and that these activities as well as constructive and rewarding for health professionals is receptive by the school community. **Descriptors:** Primary Health Care; Screening; Community-Institutional Relations; Perception.

RESUMO

Objetivo: compartilhar as manifestações psicoemocionais de estudantes frente às atividades da campanha nacional de Geohelminthiases em uma cidade do interior mato-grossense. **Método:** estudo descritivo do tipo relato de experiência realizado durante o mês de agosto de 2014 com estudantes entre os 5 aos 14 anos. **Resultados:** as crianças reproduzem em seu imaginário conceitos específicos para cada experiência presenciada e que em todas as faixas etárias assistidas pela campanha, que os profissionais eram visualizados como superiores e que os estudantes apresentavam posturas e comportamentos de respeito, confiança e aceitação de novos vínculos bem como, devolutivas espontâneas como entusiasmo, mímica facial expressiva de interesse, sorrisos e interações durante as falas. **Conclusão:** nos ambientes escolares visitados, poucas as ações de saúde desenvolvidas pelas equipes de saúde da família e que essas atividades além de construtivas e gratificantes para os profissionais de saúde é receptiva pela comunidade escolar. **Descritores:** Atenção Primária à Saúde; Programas de Rastreamento; Relações Comunidade-Instituição; Percepção.

RESUMEN

Objetivo: compartir las manifestaciones psico-emocional de los estudiantes frente a las actividades de la campaña nacional Geohelminthiases en una ciudad en el interior de Mato Grosso. **Método:** Estudio descriptivo de su experiencia en el informe tipo que se realiza durante el mes de agosto 2014, con estudiantes de 5 a 14 años. **Resultados:** los niños reproducen en sus conceptos específicos para cada experiencia imaginarios asistido y en todos los grupos de edad con la asistencia de la campaña, los profesionales fueron vistos como superior y que los estudiantes tenían actitudes y comportamientos de respeto, confianza y aceptación de nuevos enlaces, así como espontánea alimentado de nuevo como el entusiasmo, las expresiones faciales expresivas de interés, las sonrisas y las interacciones durante discursos. **Conclusión:** los entornos escolares visitados, algunas acciones de salud realizadas por los equipos de salud familiar y que estas actividades, así como constructiva y gratificante para los profesionales de la salud es receptiva por la comunidad escolar. **Descritores:** Atención primaria de salud; Proyección; Relaciones Comunidad-Institución; Percepción.

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INTRODUCTION

The National Campaign of Leprosy, Trachoma, and Soil is part of the strategy set by the Ministry of Health (MH) for the confrontation of the Soil in the period from 2012 to 2015. The goal of this campaign is to reduce the parasitic load of geohelminths in 5 to 14 years school of public education, to identify suspected cases of leprosy through the mirror and identify and treat cases of trachoma. After identification, suspects are referred to the basic health network for diagnostic confirmation and treatment.¹

Campaign activities include clinical evaluations performed individually, composed of research in history, living conditions and physical exams to identify changes in the surface of the skin, nerves or organs to be locus for development of a health surveillance, mobilization and guidance to teachers and students on the part of Community Health Agents (CHA), professionals in the Family Health Strategy (FHS) and partners, for example, universities and vocational education institutions, with the use of educational material provided by the Ministry of Health.²

The importance of the school as a production space of health, conducive to the development of various activities, such as workshops, lectures, seminars, and especially screening actions and clinical evaluation is fact because participants establish new perspectives based on activities worked, resulting in health education centered on the role of students and in exchange of this process.³

The school environment consists of an excellent scenario of formal and decisive character in many processes of the everyday choices, because they are defined based on the material and social context, economic, cultural as well as individual motivations that are implemented where stimulate autonomy, the critical conscience and creativity of the subject in the process of health education since the school phase will facilitate the accession of their health practices.⁴

The public school, in general, experience a phase characterized by intense learning processes, the search of self identity and for cognitive, emotional and social changes. Given this, it is not enough for the school to play its role only trainer based on construction of knowledge related to various aspects of growth and development, but also to build a privileged space for the critical, political and affective development, interfering directly in the social production of health.⁵

There is the need to work during the school year, the articulation of actions of health education through interdisciplinary and intersectoral activities with continuous actions and flows between the departments of health and education, however, the role of health professionals in intersectoral activities need to distance themselves from the old relations of health and education where it is necessary to establish the link with the actors involved in this case, teachers, students, family and community.⁶

Considering that context and scenario, the aim of this report is to share psicoemocionais student demonstrations against the activities of the national campaign of Soil in an inner city of Mato Grosso.

METHOD

Descriptive study of type case studies, based on the experiences of teachers of nursing degree from a public University of the State of Mato Grosso.

Campaign activities were developed during the month of August 2014, morning and evening periods, in eight public schools, four located in the urban area and four in the countryside, according to the list defined by the coordination of epidemiological surveillance.

The region has one of the largest study of rural settlements in Latin America, comprising three municipalities mato-grossenses. In this settlement live around 1.000 families distributed in 63 villages with predominantly male and southern origin, mainly from the State of Paraná who depend on family farming and benefits from the federal government to stay. Use well water and river, with average household income of two minimum wages and where the community leisure limited, for children and young people, school activities and to adults and the elderly, to contact with the fauna and flora of the cerrado.⁷

All schools were visited twice. On the first date, we used the frequency list provided by the school for nominal Conference by room, where were selected only schoolchildren between the ages of 5-14 years, as advocated by the Ministry of health. After checking the present orientation was held on the themes of the campaign, distribution of educational brochures highlighting harms to health prevention and delivery of the self-image, that would be taken at the next meeting of the team. These forms request that parents/guardians covers the regions of the body of young people to submit patches or lesions in order to direct for further clinical

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evaluation of health professionals for diagnosis of pathologies worked on the campaign.

In addition, as a way to prevent the disease, were given terms of Refusal, which reported to parents/guardians about the medicine adopted by the campaign and its importance, clarifying that had total responsibility for his decision, allowing or not the administration of the medicinal product as your consent. It was geared to parents who do not authorise the administration of Albendazole 400 mg, you should sign the record of the refusal. The medicine for trachoma was not used in this campaign because the region not be considered endemic area.

On their next visit, upon returning to school, were collected the filled sheets and individually, those with indication of dermatological changes to be investigated and those who presented the science of parents/guardians to be medicated. All medicated received the Medication, an instrument that was name, date of birth, school that belongs and anthelmintic information such as active ingredient, dosage, lot, expiration and date of administration.

Young people who have injuries and that after clinical examination had diagnosed suggestive of Leprosy were referred to the Health Center of reference, with scheduling with nurses and physiotherapists outside school hours.

RESULTS AND DISCUSSION

Due to the methodological design of the study opted for description: exchanging experiences.

♦ Exchanging experiences

The campaign contemplated 1.555 public schools students, between the ages of 5-14 years, of varying sexes and different social contexts, enrolled in the first year of elementary school to the first year of high school.

Schools, even if notified in advance, some reported not having received any document with the timeline of the actions by the Municipal Secretariat of Health (MSH), principal for the development of the campaign, and that caused higher dispensing time for organization, local dynamics and commencement of activities.

The first activity of the campaign was held in the classroom with the teacher's presence, already making a multiplier and health educator in the school environment. After permission from the professor and academic

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input in nursing, as field activity of collective and public health disciplines, immediately noticed that there was surprise and whispering of the students, but not shown. The looks on the part of children turned forward and kept a watchful eye over the guidelines, and the teenagers, some of them showed reluctant behaviors with little or no equity and positive contributions and lack of interest in relation to educational practices of health prevention and promotion. Immature attitudes were identified and not all fell in the age group covered by the campaign, i.e., above.

The attitude of adolescents can be justified to the fact of social practices and health education in the school context is not being worked on, such as the strengthening of the social subject to empower you to take care of themselves and act in Group and in defense of health promotion.⁸

The audience of 5 to 10 years, in the first step, had peculiar behavior, resignificando the moment as an extension of the ongoing class, especially when scholars approached the theme of the campaign to the family setting, to social issues and the news issued by the media. Many questioned and took advantage of the moment to remove the doubts as to the dictations and signatures for the campaign. It was found that the children reproduce in your imaginary concepts specific to each experience attended, without external abstractions.

It became apparent that in both age groups assisted by the campaign, academics of nursing were viewed as superior and this reading generated respect and at the same time the development of mechanisms for trust and acceptance of new ties, evidenced by spontaneous devolutivas, such as enthusiasm, facial expressive mimic, smiles and interactions during the talk.

School environments visited, was established through informal conversations with teachers and those responsible for coordination, that few are health actions carried out by Family Health Teams (FHT), absence of the multidisciplinary approach, dissatisfaction with the actions developed and that a partnership between the two could greatly contribute to the health of students and the population in General as well as collaborate with the teacher as health multiplier. This finding reinforces the perception that teachers, students believe that educators have a divine power to deal with, understand and deal with everything from family problems to health problems.⁹

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The low participation of nurses in schools, mainly those connected Family Health Teams (FHT) contributes with the detachment preventive practices and health promotion which may contribute to the increase of the possibilities of refusal or rejection of the seasonal activities, such as combating Soil. There is thus the need for greater investment in continuous communication and education activities not only in periods of campaigns, but that such disclosure through leaflets, posters become continuous practice in different contexts and not only in health services as the FHT's.¹⁰

In the second encounter, where the students brought the instruments accompanying the project, in classes of infants, the health team was met with the following expressions:

Uncle, I brought my father, my mother let me take the medicine!

Aunt, it's nice [...] I took last year

Uncle, give two tablets for him [...] it is full of worms! laughs

I took coffee!!! I will be able to take?

Aunt, my father said I've taken this year and will not need

It is now that no one will be more patient!

These lines referred enthusiasm, concern about being part of the action, be able to participate in helping a colleague, a visible selfless behavior. This relationship between the behavior of infants and the pedagogical practice established refers to normative education based on the behavior of someone who in addition to subject, know best what is appropriate for him and for all other.¹¹

For dermatological assessments, all the kids were shy and apprehensive, but with the presence of professor dialogue and at the same time preserving their intimacy, nursing academics were able to perform the tests for distinction of stains, including first corporeal global observation, focusing on the complaint, then the use of the Semmes-Weinstein monofilaments for susceptibility testing of suspicious spots.

Students over 13 years did many nasty jokes about colleagues who exhibited and accepted parents need to be medicated and evaluated. Others who participated, complained about the size and flavor of anthelmintic, inducing members to have the same taste and sensory perception.

Given these reactions, saw the need to change the focus of action for this audience, targeting the guidelines directly for their health needs, bearing in mind the

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vulnerability and risk behavior prevalent in this age group.¹²

For the continuity of activities was need to rethink quickly in strategies that sustain the action, so that you don't lose your potential resolutivo. A decisive step was to answer briefly, clearly and directed the activity-specific questions, and those other wishy-washy significance, have been reformulated by scholars and served as the goals of the project.

Dermatological assessments of teenagers occupied less time, by the small number of indications of stains and the practicality in the query. This audience attended, I've determined the location and history of appearance of hypo or hyper pigmentation, which made it easy to perform with excellence all tests and careful determination of suggestive cases. It is observed that for the age group, the change in behavior and practices related to health occurs due to their perception of how much there is subjectivity in the way of the subject see and represent the health-disease process.¹¹

CONCLUSION

The approach to health in the school environment was experienced positively by the health team and taken by the school community receptivity.

There is no need to work the health education of intersectoral, interdisciplinary manner and with cross-cutting issues in the disciplines taught in order to form critical citizens in the school community, as a means of valuing them and make them as jointly responsible for maintaining their own health.

It should be noted that the interaction between health services, especially the FHS, schools and University is of extreme importance in this action, all the actors involved have contributed to the prevention of helminthiasis, early diagnosis of leprosy and improving the quality of life of the students.

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