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CASE REPORT ARTICLE

THE MONITORING OF HEALTH EDUCATION IN NURSING: CASE REPORT

A MONITORIA DE EDUCAÇÃO EM SAÚDE NA ENFERMAGEM: RELATO DE EXPERIÊNCIA

EL MONITOREO DE EDUCACIÓN EN SALUD EN LA ENFERMERÍA: RELATO DE EXPERIENCIA

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ABSTRACT

Objective: to describe the experiences of monitoring lived together with the Health Education in Nursing discipline, according to the perception of the academic monitor, and to describe the contribution of the monitoring for the professional's formation. ***Method:*** descriptive study, based on the report of the experiences of monitoring with the Health Education in Nursing discipline at a Federal University in the interior of Minas Gerais. ***Results:*** academic monitoring favored the personal and professional development of the monitor, as well as the broadening of the view on the situations in which one can intervene in order to initiate transformations in the health context. ***Conclusion:*** monitoring with the Health Education in Nursing discipline represents an opportunity for the monitor to approach theoretical and practical knowledge, based on relations of exchange between colleagues themselves with teachers and the community. ***Descriptors:*** Mentors; Health education; Nursing.

RESUMO

Objetivo: relatar as experiências de monitoria vivenciadas junto à disciplina de Educação em Saúde na Enfermagem, segundo a percepção do acadêmico monitor, e descrever a contribuição da monitoria para a formação profissional. ***Método:*** estudo descritivo, fundamentado no relato das vivências de monitoria junto à disciplina de Educação em Saúde na Enfermagem em uma Universidade Federal no interior de Minas Gerais. ***Resultados:*** a monitoria acadêmica favoreceu ao monitor o desenvolvimento pessoal e profissional, bem como a ampliação do olhar sobre as situações nas quais se pode intervir a fim de iniciar transformações no contexto de saúde. ***Conclusão:*** a monitoria junto à disciplina de Educação em Saúde na Enfermagem representa uma oportunidade para que o monitor aproxime saberes teóricos e práticos, fundamentando-se em relações de troca entre os próprios colegas com os docentes e com a comunidade. ***Descritores:*** Mentores; Educação em saúde; Enfermagem.

RESUMEN

Objetivo: relatar las experiencias de monitoreo vivenciadas junto a la cátedra de Educación en Salud en Enfermería, según la opinión del académico monitor, y describir la contribución de seguimiento para la formación profesional. **Método:** estudio descriptivo, basado en las experiencias de monitoreo a lo largo del curso de educación para la salud en Enfermería, Universidad Federal de Minas Gerais/UFMG. **Resultados:** el monitoreo académico favoreció el monitor el desarrollo personal y profesional, así como la expansión de la mirada en las situaciones en que puede intervenir con la finalidad de cambiar el contexto de la salud. **Conclusión:** El monitoreo junto a la cátedra de Educación para la salud en Enfermería representa una oportunidad para el enfoque del monitor, basado en conocimientos teóricos y prácticos fundamentando las relaciones de cambios entre sus propios colegas, con los profesores y con la comunidad. ***Descriptores:*** Mentores; Educación em Salud; Enfermería.

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INTRODUCTION

Academic monitoring, governed by Federal Law 5540/1968, allows students to act as moderators in the teaching / learning process and participate in the organization and planning of pedagogical strategies with teachers. This experience provides an introduction to the context of teaching and, furthermore, prompts the monitor for stimuli to improve technical skills, interpersonal relationships, and leadership skills.[1]

In this sense, monitoring brings meaning to the concept of education in its many contexts. It is considered that health education seeks a construction of knowledge that relates the knowledge instituted, coming from the scientific production, and the common sense originated from the daily experience. The aim is to stimulate citizenship, social and health empowerment, and promote health prevention and recovery.[2]

Health education aims to build an effective sensitization in order to minimize the critical clinical picture of the population, through the co-responsibility of individuals, with the purpose of promoting health and preventing aggravations, based on the knowledge of the community contemplating the Social and cultural development. In this way, this process is characterized by an active search of the needs of the individuals, in order to identify them, enabling adequate and coherent interventions and transformations.[3]

In the contemporary context, the multiple dimensions of health have been valued and this emphasis is continuous, since it permeates a set of concerns among the social actors of the health sector.[4] In this context, health education represents a potential tool for identifying and performance in daily life situations and health of the populations. In this perspective, the monitoring allows the academic an approximation to the professional scenario and a reflection on the use of this strategy in the professional practice of the nurse.

With regard to the contributions of health education in the training of Nursing students, it is observed that it is an extremely important instrument for the profession, in order to invest in professional qualification from a dialogic perspective, recognition of social actors and appreciation of the multiplicity of knowledges that surround health production. An academic formation based on these precepts may allow modification of contexts and realities in health.[5]

The nurse, using a holistic approach, should promote educational activities, both individually and collectively, with the purpose of instigating the discussion of significant themes in the setting of action and, thus, arouse dynamic behaviors and critical thinking in the individual or population. It is the responsibility of the educator to enable the construction of a new knowledge anchored in the demands and wishes of the students themselves.

In view of the above, it is questioned how the experience of monitoring with the discipline of Health Education in Nursing contributes to professional training.

OBJECTIVE

- To report the experiences of monitoring lived with the discipline of Health Education in Nursing, according to the perception of the academic monitor.
- To describe the contribution of monitoring to vocational training.

METHOD

A descriptive study, based on the report of the experiences of monitoring with the discipline of Health Education in Nursing, from a Federal University in the interior of Minas Gerais (MG), Brazil. The experience was realized by a monitor of the discipline, during the months of March / 2015 to January / 2016.

The discipline of Health Education integrates the curricular component of the Nursing Undergraduate Course, of an obligatory nature, in the fifth period. This subject has a workload of 75 hours / class, being 40 hours theoretical and 35 hours of practical activities, and is taught by three teachers.

The strategies and teaching resources used in theoretical classes include dialogic expository classes, dynamics, videos, discussion of scientific articles and seminars. In the practical activities, the students are divided into groups, which must develop educational activities (situational diagnosis, planning, execution and evaluation) in different fields of the nurse, among them primary, secondary and tertiary care, women's health, man, child health, adolescent health, worker health and school health. The main strategies used were group dynamics, parodies, seminars and gymnastics, promoting a relaxed and educational environment.

The subject's monitor fulfilled a ten-hour weekly workload, including bibliographic survey activities of topics relevant to the

discipline, selection of potential practice fields for clinical teaching, academic follow-up in practical activities, and student orientation in planning actions to be implemented. All monitor activities were developed under the direct supervision of the teacher.

RESULTS

The monitoring activity carried out in the theoretical part of the course included the orientation of the academics in relation to the planning and development of the seminars presented, which dealt with themes such as learning theories, pedagogical models and teaching resources / tools.

The monitoring actions implemented in the practical component of the discipline addressed the nurses' performance in primary, secondary and tertiary care, the health of women, men, children, adolescents, workers and school children. The monitor guided the planning of activities that were performed in practice.

In primary health care, the monitor followed the practices carried out, with a focus on health promotion, in the following themes: Hypertension and Diabetes Mellitus, with questions of myths and truths being made on the subjects discussed so that participants could respond and group discussions, and the creation of educational parodies. The issue of Dengue and its vector, the Aedes Aegypti mosquito, through short dramatizations and small sentences like *slogans* and rhymes, complemented by a parody of the theme. It was noted that the population reacted well to this type of approach since it interacted throughout the activity. The actions were carried out in two Basic Health Units, in the said municipality, in the waiting rooms.

In secondary health care, activities focused on women's health were developed, addressing topics such as breastfeeding, phases of labor and delivery of newborns. The educational proposal, this time, was based on the clarification of doubts of the mothers about these subjects through a waiting room in the ambulatory of Gynecology and Obstetrics of the Hospital of Clinics of the University. The groups approached the topic verbally and supplemented with educational pamphlets that illustrated and clarified the doubts that emerged. It was observed that the women participating in the educational practice were available to participate and were involved in the discussions.

In tertiary health care, we worked with strategies of continuing education, for the professionals of the Hospital de Clínicas of a Federal University, in the interior of Minas Gerais, approaching the technique of hand hygiene, through demonstrations in the sectors. In the second activity, a group dynamics was carried out, with the purpose of sensitizing teamwork and interprofessional collaboration, in order to generate proximity among the members. After this moment, the theme explored was the ten steps to patient safety, in which each member of the group illustrated each step through drawings on a cardboard for employees of the Medical Clinic and Surgical Clinic Sectors. In these two educational actions, there was a significant response from professionals in the industry, revealed by their involvement and active participation.

Another essential and satisfactory practice was carried out in order to promote school health. The academics developed in a municipal school, activities related to personal hygiene and oral hygiene for children from six to seven years, through educational videos and dramatizations. The participation of the children was positive, since, in the course of the activity, the interaction of the target group with the work group contributed to the achievement of the proposed objectives.

Academic monitoring favored the personal and professional development of the monitor, as well as a broadening of the gaze on the situations in which one can intervene in order to initiate transformations in the health context. This critical and human perception, experienced in each situation, favored the direction of actions coherent with the priority needs of a given community. In this way, health education monitoring provided a qualified and effective performance, contributing to the formation of a professional capable of acting in different social and health contexts, in the perspective of integrality, in addition to arousing interest and prepare the undergraduate student for the Peculiarities of teaching in the academic context, which confers the importance and significance of the nurse as a health educator.

DISCUSSION

The monitor, in the development of the activities inherent to his or her function experiences situations that instrumentalize it for health practices, such as planning, group work, orientation and discussion of problems. This context of knowledge exchange leads to significant learning and training of

professionals sensitive to the health demands of the population.[8]

It is also worth noting that monitoring is a favorable field for the consolidation of the student as an employee. The monitor, in carrying out their activities, has the opportunity to experience educational and leadership practices, which prepare them for the exercise of his profession. In addition, there is also the contact with professionals and students from other areas, which favors the establishment of the concept of multidisciplinary team.[9]

The current conjuncture of the health work process may hinder the effectiveness of educational practices in the real scenario[10]. In view of this, the importance of health education monitoring is emphasized with the purpose of stimulating the professional future in the performance of these actions, since health education is an indispensable strategy for achieving health promotion and aims at modifying the quality of health education. Assistance and living conditions.[10]

The educational activities have the purpose of generating re-signification of concepts, contributing to the subjects making healthy choices and protagonists in their lives. Health education and care, in the work of the nurse, are interconnected and inseparable processes.[11]

Health education, as a valuable practice practiced by nurses, is a tool for health promotion, disease prevention and rehabilitation, since it aims at training and training of knowledge multipliers, in addition to promoting citizenship and self-management of health.[12] The monitor student, when performing his activities, can review contents and reinterpret them, which allows a deepening in theory, content consolidation, health practices strengthening and academic improvement.[13] In addition, monitor activity requires skills and professional and personal skills of the student, since the student must communicate and establish a good interpersonal relationship with students and teachers. This requirement contributes to the personal training of the student as a nurse, since these characteristics permeate the practice of health education and care.

In order for the work of monitoring to develop, an open dialogue relationship is established between the teacher and the monitor, in order to enable it and insert it into the didactic planning practices of the theoretical and practical constructions, which are intended to discipline. In this way, the monitor starts to play an important role, assisting the students in the required practical and research activities, which provides an improvement in the academic training, once the student becomes better acquainted with the role of the university professor.[14]

To act as a monitor is a great opportunity in the academic world due to the wealth that experiences provide for university education. Being a monitor, the student establishes direct relationships with his colleagues, but, also, with the teachers of the discipline, a fact that provides an awakening for the nurse as an educator.[15]

CONCLUSION

The monitoring with the discipline of Health Education in Nursing represents an opportunity for the monitor to bring theoretical and practical knowledge, based on relations of exchange between colleagues, teachers and the community. It contributes to the professional formation in the perspective of a horizontal performance, with a view to the construction of solidary, equanimous and dialogical relations.

When monitoring allows the accomplishment of practical activities with the population, in the context of health, it enhances the empowerment not only of the health service user, but also of the monitors themselves, who reconstructs concepts and resigns the healthcare in the logic of popular participation and respect the other. The experience in monitoring contributed to the training as the monitor develops health education actions and reflects on them and their impact to the transformation of reality.

The study made it possible to highlight the importance of monitoring in the context of health education as a tool that enables the construction of knowledge based on democratic, dialogical and coherent aspects of empowerment proposed by health promotion.

The fact that the report was described by a single monitor, which may seem reductionist, was minimized when found, in scientific production, authors presenting ideas similar to the results found, which underlies and reinforces the report in focus.

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