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CASE REPORT ARTICLE

EXPERIENCE REPORT FROM THE PARTNERSHIP BETWEEN HEALTH AND EDUCATION ON THE HEALTH AT SCHOOL PROGRAM

RELATO DE EXPERIÊNCIA DA PARCERIA SAÚDE E EDUCAÇÃO NO PROGRAMA SAÚDE NA ESCOLA

INFORME DE EXPERIENCIA DE LA ASOCIACIÓN ENTRE SALUD Y EDUCACION EN EL PROGRAME DE SALUD EN LA ESCUELA

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ABSTRACT

Objective: to report the experience from the professional partnership between health and education. **Method:** descriptive study, from the experience report kind, in which were described the developed actions, from 2012 to 2014, by the health and education professionals on the Health at School program in Alagoa Nova/PB. **Results:** the main conducted actions were the nutritional situation evaluation, visual and dermatological acuity, prophylaxis of worms and the oral exam conduction on the students. **Final remarks:** the actions propitiated the access to the Family Health Strategy(FHS) at the city's public schools, promoting caring actions and diseases' protection. Furthermore, it was possible to inform about the school's role at the health-disease process and emphasize to the students the necessity of prevention practice of the health at the scholar sphere. **Descriptors:** Health Promotion; Education; Scholar Health.

RESUMO

Objetivo: relatar a experiência da parceria profissionais da saúde e educação. **Método:** estudo descritivo, tipo relato de experiência, no qual foram descritas as ações desenvolvidas, entre os anos de 2012 e 2014, pelos profissionais da saúde e da educação no Programa Saúde na Escola do município de Alagoa Nova/PB. **Resultados:** as principais ações realizadas foram a avaliação da situação nutricional, acuidade visual e dermatológica, a profilaxia de verminoses e a realização de exames bucais nos educandos. **Considerações finais:** as ações propiciaram o acesso da Estratégia de Saúde da Família (ESF) às escolas públicas do município, promovendo ações de cuidado e proteção de doenças. Além disso, foi possível informar sobre o papel da escola no processo saúde-doença e enfatizar aos educandos a necessidade das práticas de prevenção da saúde no âmbito escolar. **Descritores:** Promoção da Saúde; Educação; Saúde Escolar.

RESUMEN

Objetivo: reportar la experiencia de la asociación profesional entre la salud y la educación. **Método:** estudio descriptivo del tipo informe de experiencia, en el que se han descrito las acciones desarrolladas, entre los años 2012 y 2014, por los profesionales de la salud y la educación en el Programa de Salud de la Escuela en la ciudad de Alagoa Nova/PB. **Resultados:** las principales acciones llevadas a cabo fueron la evaluación del estado nutricional, la agudeza visual y dermatológica, profilaxis de gusanos y que llevan a cabo los exámenes orales de los estudiantes. **Consideraciones finales:** acciones llevaron al acceso de la Estrategia Salud de la Familia (ESF) a las escuelas públicas en la ciudad, promoviendo acciones de cuidado y protección de la enfermedad. Por otra parte, era posible informar sobre el papel de la escuela en la salud-enfermedad y destacar a los estudiantes la necesidad de prácticas de salud preventiva en las escuelas. **Descriptor:** Promoción de la Salud; Educación; Salud Escolar.

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INTRODUCTION

Aiming to make the actions in health developed by the Familiar Health Strategy (FHS) overtake the Basic Health Units Family (BHUF) and reach till the community, was created the Health Program at School (HPS).¹ The partnership between the Ministry of Education with the Ministry of Health has provided an improvement in the quality of health of students. In this sense, with the implementation of HPS, this partnership has been gaining strength in the prevention of various diseases.²

The HPS was established by Decree No. 6286 of 05 December 2007 and aims to contribute to the integral formation of the students, through prevention, promotion and health care, with a view to addressing the vulnerabilities that compromise the full development of children and young people in the public school system. HPV is a program that advances in the consolidation of Health Unic System, and exceed the expectations of actions aimed at school by processes involving the health of students.²

This program aims to promote health, enhance disease prevention and articulate the health of public actions with the public education network actions. It also seeks to expand relations of students and their families with the FHS and provide social actions that strengthen the information on popular participation of students in basic education and health policies.²

In the city of Alagoa Nova/PB GPS was introduced in 2012 and the actions to be developed in this program were planned both by the education sphere (teachers, coordinators, school managers and municipal secretary of education) as the health sphere (FHS professionals, community health workers, coordinator of primary care, coordinator of Oral Health, and the municipal secretary of health).

In this context, the HPS serves to reinforce the idea that health should go beyond the walls of BHUF and achieve a historical context, social, cultural, political and economic development of individuals and communities. Because of this, we must look at the school as a space to form children, teens and families opinion, to that the health actions works to auxiliary the students in the social context, making them concerned citizens and responsible at the health care.³

OBJECTIVE

- To report the partnership experience between the health and education professionals.

METHODOLOGY

Descriptive study, with the experience reportkind, developed at the Health Program at School in Alagoa Nova/PB, located in the agreste region, with 19.681 habitant sand 122.25km².⁴

In its health network the city of Alagoa Nova has eight teams of FHS, four in rural areas and four in the urban area. In addition, it has a Municipal Hospital, aMobile Emergency Care Service (MECS), aSupport Center for Health (SCH) team and also aDental Specialty Center (DSC).

The education of the municipality network consists of approximately 34 schools, corresponding to the total of 5,000 students enrolled in the public school system.⁴

The construction of experience report was based on the actions undertaken under the HPS in six schools in the period from April 2012 to April 2014, conducted by Dr. FHS Nelusko Torres, located in the urban area of the municipality of Nova Alagoa. The actions took place in urban schools, with students of the fourth class the ninth year; already in rural schools in classes from first to fifth year. The project's activities were divided into three steps: In the first stage were performed anthropometric examination, visual acuity and skin examination; in the second stage were delivered to students medication against worms and the third stage was conducted oral examinations. The actions counted with the support of a multi disciplinary team composed by: doctor, dentist, nurse,nursing technician, oral health auxiliary, community health worker and school teachers.

RESULTS

◆Experience Report

The actions begun in April 2012 and took place, at the beginning, in urban zone schools (2 schools, from the 4th to 9th grade), after that, it was spread to the rural zone schools)4 schools, from the 1st to the 4th grade).

Meetings were held with all members of staff for the planning of each action to be taken, and to define the activity that would be developed by each professional. At the meetings, it was established that each professional would develop specific actions of their particular area of professional

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practice and the other would assist in its activities. In addition, it was agreed that before the shares to staff of the Family Health Strategy (FHS), would make a presentation to inform students about the work that would be developed.

The first activity carried out was the anthropometric assessment of students in this action the Community Health Agents (CHA) measure the height and weight of students; the nurse calculated the Body mass index (BMI); Nursing technique along with the Oral Health Auxiliary have assessed the blood pressure of school and performed anamnesis; Medical and Dental hold consultations.

The students were awarded the anthropometric assessment is considered a relevant assessment to indicate the excess weight as well as malnutrition. In addition, the evaluation of the nutritional status of children and adolescents is an important way to prevent obesity and Chronic Diseases No communicable (CDNC), related to food and intake.^{5,6}

Then, the evaluation of view of the students through visual acuity testing was performed by Snellen chart, which serves to identify if the student has poor eyesight,⁷ with the application of this scale occur the need to use glasses to correct and, when necessary, the students were referred to an ophthalmologist. Recognizing the school as a unifying institution of large numbers of children and adolescents, the analysis of visual acuity, aims to detect problems that will entail losses for psychomotor development, hearing and cognitive development.⁷ These actions were carried out by the team of professionals who had done training (nurse, dentist and nurse technician).

Among the activities developed by HPS, also include dermatological consultations, a practice developed by the program to watch for signs and symptoms of some visible skin diseases, among them leprosy and dermatitis. These are diseases that can be diagnosed more easily without more detailed methods.² Dermatological situation of the medical students was analyzed through skin test.

The second activity was the delivery of drugs to school (Albendazole and mebendazole) for treatment of worm infections. At the time as educational lectures aims to inform students about the use of medication they were carried out as well as was done by the health team a request parents to authorize their children to take medication. The delivery of these drugs was

made by all professionals in the FHS, except for the doctor, who had the responsibility to carry out individual consultations and referrals when needed. Intestinal parasitic infections are very common in childhood, especially in preschool and school. They are considered public health problems particularly in developing countries and in developed.⁸

Por último, foram feitos exames bucais, com o intuito de monitorar a saúde bucal dos educandos por meio da avaliação odontológica, que evidenciava o índice de Decayed Missing teeth and filled (DMTF). In addition, educational lectures were carried out that emphasized the use of dental floss, explaining the correct way of brushing, cleaning the oral cavity and the importance of regular dental visits. Allied preventive practices that promote oral hygiene, it is important to provide the public adequate guidance on the care of oral health especially for children and adolescents, addressing factors that influence public health actions.⁹

In the case of students who were seen in schools and needed some treatment of medical and / or specific dental health, referrals were made to the USF Dr. Nelusko Torres. All schools belonging to this BHUF were contemplated by the actions promoted by the HPS. In addition, education professionals also participated in the actions supporting health professionals, multipliers becoming shares.

The students were eager to participate in activities developed in schools, every visit the FHS they provide what to do the activities that were being proposed. They could answer certain questions about certain diseases and the care for health. All work was planned by professionals FHS in order to warn children and adolescents about prevention and health care.

Deeds was pointed out that if they needed care could then count on the help of the staff, since not all students used the services offered by FHS, because they do not know the services offered, or because they never had interest to seek the FHS.

♦ School profiles

Only schools Violeta Professor Costa and Fernando Cunha Lima belong to the urban area, the others are located in rural areas (Figure 1).

School	Classification	StudentsNumber	Students Age
Professora Violeta CostaSchool	Primary I and II	430	11 to 17 yearsold
Dr. Fernando Cunha LimaSchool	Primary I	232	4to13 yearsold
São Jose School	Primary I	19	4to 13 yearsold
Mariana LídiaSchool	Primary I	42	4to 12 yearsold
Bom JesusSchool	Primary I	39	4to 12 yearsold
Valdevino Benigno da RochaSchool	Primary I	22	4to 12 yearsold

Figure 1. School Characteristics attended by the school health program in Alagoa Nova, 2014.

It was found that health actions developed in rural schools had greater acceptance by the students, as they were very participative. With regard to students in urban schools, it was observed that they accepted the actions of more timid, some initially did not want to participate in activities, but when they saw their colleagues involved, they ended up attending. These actions take place weekly in schools through a performance schedule of activities.

◆Perspectives and challenges of school health program in Alagoa Nova - PB

The actions taken by the HPS showed increasing advances in integration policy between Departments of Health and Education, strengthening the ties between health and education, and contribute to improving the lives of students and their families. In addition, the actions taken will serve to bring the children and adolescents of the services offered in primary care, strengthening the educational practices in schools proposals.

For health practices in school ensure shared knowledge of constructions supported in the individual and collective histories, they should be considered the different contexts in which they are performed, respecting the popular knowledge and the formal proposals that make sense to people.¹⁰For this, the active participation of several members of the school community, health professionals, and especially of children and adolescents in the construction of HPS, since innovative health initiatives in education should gradually is important, be incorporated into thePedagogical Political Project (PPP) of the school.

The main challenge faced was the difficulty of access to some schools because some are located in suburbs or far away. In most of these neighborhoods socioeconomic and environmental conditions are very precarious. In addition, another challenge overcome was the involvement of students in the proposed actions, as even the students who at first resisted in part, at one point gave way and ended up engaging in activities.

The HPS in its general context came to reveal the longings found in schools on the health-disease process and propose strategies of knowledge on certain matters relating to the health of children and adolescents in schools.²In this sense, the activities carried out in New Alagoa local schools fulfill their role and success, because all developed intervention actions sought to promote the health and considered both the reality of the FHS, as educators and learners. Because, it was considerate that all those sectors have own policy to be developed and that their objectives converge.¹¹

FINAL REMARKS

The HPS in Alagoa Nova - PB was the start point so the FHS professional sand the education Professionals found to build an interaction. Although it was a challenge for the managers, the implementation of the HPS favored an improvement in the quality of life of children and adolescents from public schools, after the implementation of HPS, moreover, there was an increase in the demand for the services offered by BHUF.

The relationship between the Department of Education and the Health Department potentiated expectations in health and education, schools were adequate support for the implementation of the program, the proposed activities served to promote health, as well as awakening knowledge of students for the prevention of diseases and disorders.

It was understood from the lived experience, to diversify the health care facilities, as well as putting into practice educational strategies, expand the possibilities for improving the care provided by the team at FHS, as well as providing greater visibility and effectiveness of the activities developed in primary care.

The actions led to the access of (FHS) as public schools in the city, promoting care actions and disease protection. Furthermore, it was possible to inform about the school role at the health-disease process and emphasize to the students the necessity of prevention practices at health in the scholar sphere.

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