Journal of Nursing
Revista de Enfermagem
UFPE On Line
ISSN: 1981-8963

ARTICLE EXPERIENCE CASE REPORT

VER-SUS: AN EXPERIENCE REPORT ABOUT A LIFE EXPERIENCE-STAGE IN THE REALITY OF THE UNIFIED HEALTH SYSTEM

VER-SUS: UM RELATO DE EXPERIÊNCIA SOBRE UMA VIVÊNCIA-ESTÁGIO NA REALIDADE DO SISTEMA ÚNICO DE SAÚDE

VER-SUS: UN INFORME DE EXPERIENCIA SOBRE LA VIVENCIA-ETAPA EN LA REALIDAD DEL SISTEMA ÚNICO DE SALUD

José Cláudio Garcia Lira Neto[1], Roberto Wagner Júnior Freire de Freitas[2], Emmanuel Calisto da Costa Brito[3], Leianny Rodrigues dos Santos[4], Lívio Eduardo Pereira Alves[5], Lunara Rocha Antunes Alves[6]

ABSTRACT

Objective: to report the experience about a stage-experience in the reality of the Unified Health System - SUS. ***Method:*** report of an experience of a life experience-internship for nursing students, in the reality of SUS, offered by the Ministry of Health. The internship took place in February and March 2012, in the city of Teresina, with the participation of 40 scholars of several courses in the health area. ***Results:*** part of the undergraduates in the health care is not formed to understand the SUS. Still there is a barrier between the universities and the insertion of students at the SUS. ***Conclusion:*** it is believed that experiences such as the provided one by the VER-SUS contribute to technical training, scientific and political of the students, through interdisciplinary and intersectoral perspective. Thus, it becomes essential to effective public policies that integrate the areas of health and education, ensuring that educational practices conducted in SUS configures devices for the analysis of the experiences of local healthcare. ***Descriptors:*** SUS (Public Health System); Public Health; Education; Health Policy.

RESUMO

Objetivo: relatar a experiência sobre uma vivência-estágio na realidade do Sistema Único de Saúde - SUS. ***Método***: relato de experiência de uma Vivência-Estágio por estudantes de enfermagem, na realidade do SUS, ofertado pelo Ministério da Saúde. O estágio ocorreu nos meses de fevereiro e março de 2012, na cidade de Teresina, contando com a participação de 40 acadêmicos de diversos cursos da área da saúde. ***Resultados***: parte dos graduandos da área da saúde não é formada para compreender o SUS. Ainda encontra-se uma barreira entre as universidades e a inserção dos alunos no âmbito do SUS. ***Conclusão***: acredita-se que vivências como a propiciada pelo VER-SUS contribuem para a formação técnica, científica e política dos alunos, na perspectiva interdisciplinar e intersetorial. Assim, torna-se imprescindível a efetivação de políticas públicas que integrem as áreas da saúde e da educação, garantindo que práticas educativas realizadas no SUS configurem dispositivos para a análise das experiências de saúde locais. ***Descritores*:** Sistema Único de Saúde; Saúde Pública; Educação; Política de Saúde.

RESUMEN

Objetivo: presentar la experiencia sobre una vivencia-etapa en la realidad del Sistema Único de Salud - SUS. ***Método:*** relato de experiencia de una Vivencia-Etapa por los estudiantes de enfermería, en la realidad del SUS, ofrecido por el Ministerio de Salud. La etapa se llevó a cabo en febrero y marzo de 2012, en la ciudad de Teresina, con la participación de 40 académicos de varios cursos del área de la salud. ***Resultados***: parte de los académicos de la área de salud no es formada para entender el SUS. Aún existe una barrera entre las universidades y la inserción de los estudiantes en el SUS. ***Conclusión:*** se cree que las vivencias como las proporcionadas por la VER-SUS contribuyen para la formación técnica, científica y política de los estudiantes, por una perspectiva interdisciplinaria e intersectorial. Por lo tanto, es esencial la efectuación de políticas públicas que integren las áreas de salud y educación, lo que garantiza que las prácticas educativas realizadas en el SUS configuren dispositivos para el análisis de las experiencias de salud local. ***Descriptores:*** Sistema Único de Salud; Salud Pública; Educación; Política de Salud.

[1,3,4,5,6]Academics in Nursing, Federal University of Piauí / UFPI - Campus Amilcar Ferreira Sobral / CAFS. Floriano (Piaui), Brazil. E-mails: zecklira@hotmail.com ; leianny.rs@hotmail.com ; liviopa@hotmail.com ; lunara.antunes@hotmail.com; [2]Nurse, Professor, PhD, Federal University of Ceará/UFC. Floriano (Piaui), Brazil. E-mail: robertowjff@globo.com

INTRODUCTION

The Unified Health System (SUS) is arguably one of the largest public health systems in the world. Created in 1988 by the Brazilian Federal Constitution, he seeks cover from simple outpatient care to organ transplantation, trying to ensure full access, universal and free to the entire population of the country. Many criticisms are thrown into NHS management, indicating that this is the crucial point for his failures and his inability to fully assist all customers. However, what we cannot forget is that to have an efficiency in implementation, SUS needs, besides, good management, health workers proficient in their area and what can be seen is often the lack of technical, scientific and some of these political workers.[1-2]

When speaking of qualified health workers to work in instances of SUS, is inevitable association made with the training and preparation of these professionals in their respective educational institutions. What is known is that the need for change in the education of students is nationally recognized and is accompanied by criticism regarding the inaction of some institutions, which have high strength and difficult changes, continuing to prepare professionals with profile directed and concerned primarily with the care models.[1]

One of the biggest questions and concerns of students in the area of health is a feeling of insecurity and unprepared to work in health care in Brazil. Countless are the academics who complain of not knowing the actual operation of SUS, its management, its peculiar activities, its objectives and its scope. It is noteworthy that one of the causes for this unpreparedness may be related to poor development practices curricular activities, often with insufficient workload, tied to health services overflowing with students.

In seeking to fill this gap and modify the identified problem arises in 2002 the program "Living and Training in reality the Health System," the VER-SUS. Initially conducted by the School of Public Health of Rio Grande do Sul, the VER-SUS born of a proposal called Summer School, a project that arose from the need of integration of students in the management of the national health care system and had the purpose of establishing experiences only during the holidays of the college students. Today, the Ministry of Health of Brazil develops VER-SUS in partnership with the Higher Education Institutions (HEIS) which have great courses in the area of Health Sciences, as well as with the Municipal Health Department, with the goal of offering university moments of experiences and internships in SUS, offering them the opportunity of experimenting with a new learning space, which is the daily work of organizations and networks of health systems.[3]

Considering that the main objectives of the VER-SUS are: provide opportunities for participants to experience achievements and challenges of SUS, deepen the discussion about teamwork, management, health care, education and social control and promote discussions about importance of social movements, especially the student movement[4], it is clear its relevance as a research subject. Still, there is the VER-SUS an opportunity to empower and complement the training of students who will make up, without a doubt, the mass of professionals who are directly linked to the population in need of a good provision of health services.

Thus, the study aims to screen report the experience of nursing students in the program "Living and Training in reality the Health System."

METHOD

Experience report, experienced by students of Bachelor of Nursing, the program "Living and Training in reality the Unified Health System – VER-SUS ".

The stage occurred during the school holidays, February and March 2012, while in some cities in the state of Piaui (Parnaiba, Piripiri and Beneditinos), Teresina is the main one. With the participation of academics from institutions of public and private schools in the state, from various courses, belonging or related to health: nursing, medicine, physiotherapy, psychology, biomedicine, nutrition, dentistry, physical education and social service.

The selection of students who would participate in this internship was done so online, through the website http://versus.otics.org membership to the Ministry of Health. The registration form was composed by structured questions, covering sociodemographic variables and related academic life. Among the inclusion criteria are: having a full-time during the course of the project, be willing to exchange the interstate and be properly enrolled and attending courses belonging or relating to health. Based on these criteria we selected 100 students, 40 to the city of Teresina-Piaui.

All selected students have had the opportunity to meet different instances in

which SUS acts as Basic Health Units (BHU), Hospitals (regional and municipal), Municipal Health Councils, and Centers for Psychosocial Care (CAPS) and Departments of Health, besides attending meetings with local communities, with social movements and educational institutions.

After each day of training, participants debated the situations seen in the form of systematization and drafting reports, highlighting key points and the potential limits to situations and possible interventions to be drawn for each location / situation. The academics also had as a basis for the discussions the use of texts, lectures assisted during the process and support of facilitators; usually alumni project VER-SUS.

RESULTS AND DISCUSSION

Throughout the experience of VER-SUS, students were faced with the most distinct scenarios and realities of health in Brazil, passing through the primary, secondary and tertiary, and its management. The results of this experience are highlighted below:

• Primary Health Care

During visits to the Basic Health Units (BHU) found that teamwork and between the teams was inadequate and poorly articulated. Many nurses said that communication between health professionals does not occur satisfactorily, and there is a calendar in the units, moments of interaction of the multidisciplinary team, to be discussed the actions directed to the family.

This statement is troubling, considering that team work is seen as essential for the creation of an assembly of strategies and actions for improving the health of the population, generating link, host, quality care and improved access for users professionals and health services.[5] The UBS are places where we should prioritize actions to protect and promote the health of individuals and families, both adults, as children, healthy or sick, comprehensively and continuously.[6]

With regard to the capacity of the health service, many professionals reported that patient demand is high and is not consistent with the purposes and the reality of Primary Care. One of the reasons to justify such a statement is in fact, still persists large proportion of professionals who work primarily in the welfare model in which emphasis is placed on the discovery of the etiologic agent and the simple drug treatment, in search of a cure, leaving side aspects aimed at promoting the health of individuals. How to have a select clientele for primary health care, if it occurs to the predominance of this model of care? There is a need to demonstrate that promote health is to empower and enable the subjects to which they are active in the disease process.[7]

Involve structured knowledge within for change in population health is a major obstacle in primary care. Team work, which should meet the multidisciplinary, interdisciplinary and transdisciplinary, involving the peculiarities of each profession, always ends up being tied to individualistic work of each professional, which does not contribute to the effectiveness of health promotion actions.

• Secondary and Tertiary Care in Health

With eyes on the practices adopted in order to improving the quality of health of people with mental disorders, trainees VER SUS-known some of Centers for Psychosocial Care (CAPS) are available in the city, that among all the devices attention to mental health, have strategic value to the Brazilian Psychiatric Reform. The visit contributed to the understanding of actions taken at these centers.

Among the functions of CAPS, it was possible to see that the same: to support the mental health care in primary; welcomes and serves people with severe and persistent mental disorders, seeking to preserve and strengthen social bonds user in its territory; provides clinical care in day care arrangements, avoiding hospitalizations; strategically articulates the network and mental health policy in the territory and, above all, promote the social reintegration of the individual through access to work, recreation, exercise of civil rights and strengthening family and community ties, and a mechanism of extreme importance in the regulation of activities on improving the quality of health of people with mental problems, demystifying prejudices that the students had about these organs.

Knowledge of physical and organizational structure, which was analyzed settings work in an interdisciplinary way, was the high point on visits to some hospitals in medium and large. The insights gained towards professionals revealed that most of them performed their work in isolation, with no directly, a collaboration that integrates the actions of an interdisciplinary approach.

The limitations of inputs, lack of knowledge of protocols, the vertical work, care so bureaucratic and lack of discussions for a reorganization to improve working conditions and improving patient care, were

undoubtedly the major problems encountered in the existing hospital organizations in the county.

Thus, the boundaries of these situations change are needed, implying a greater emphasis by professionals, knowledge of actions in improving the health of hospitals. Already by the management, the transfer of subsidies aimed at structuring complete hospital, as well as control over education and knowledge of professionals within these institutions is necessary.

- **Health Management**

The strengthening of shared knowledge production, the expansion of the popular role in the defense of the right to health and people's participation in SUS undoubtedly points were most prominently throughout the VER-SUS. The analysis of society involvement in the construction and supervision of SUS gains strength and has been an important strategy used as a means of inclusion of system users in their own health.[8]

Students experienced the performance of popular participation in discussion groups about the topics health, education and safety, with municipal and community leaders, besides the massive involvement of the community. Other ways of working population in the municipal health were experienced during the meetings of the Municipal Health Council, and through articles and texts led by ex-trainees of VER-SUS for systematizations daily.

The approach of managers with real health needs and quality of life, through it, is a constant in the meetings of the popular movements in health and Municipal Councils Health

The non-recognition of management about their own duty and the community about their rights, causes local problems are treated generalized, not specific approaches that population, resulting in a vertically integrated health system and ineffective.

It is apparent the need for users to know their role in the constitution of the SUS. Incorporating the popular health education as a democratic practice becomes important in building public health policies and impact on improving the quality of public health. As such, popular participation becomes essential and therefore must be preserved and expanded.

Part of the undergraduate health care is not formed to understand the SUS. Many use the system for its technical and scientific learning, however, are not trained to act on it in a critical and reflective.

The barriers between universities and inclusion of students in all areas of SUS, with no real knowledge of the reality of it, creates a gap in promoting discussion and reflection practices aimed to share knowledge and population health.

However, the VER-SUS becomes important to contribute in building the link between student health field and work practices in the National Health System in Brazil. Therefore, it is essential to effective cooperation between the Ministries of Education and Health to be viable integration between the university and SUS.[4]

CONCLUSION

The VER-SUS like teaching device, wake up with the new, the feeling of discomfort and desire for action of each participant in the process of training as well as in their professional future. The accumulation of experience and the experiences it produces stimuli and changes in students' views.

Enable learning, knowledge production and testing of these spaces of health, through different perceptions, constructions and aggregations of values, establishing relationships and linkages, and the development of educational activities aimed at continuing education, transform VER SUS-in individual character and essence, hardly applicable in the academy; generating unique opportunity of training contemplated by the unique features never seen in universities.

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Submission: 06/07/2012
Accepted: 16/01/2013
Published: 15/03/2013

Corresponding Address

José Cláudio Garcia Lira Neto
Conjunto Bulganville
Rua B, 29, Bairro São Judas Tadeu
CEP: 64204-400 – Parnaíba-(PI), Brazil