ABSTRACT
Objective: to analyze the process of health education in the group of guidance for medical discharge through the perception of women with mastectomies. Method: a qualitative study, descriptive and exploratory. It will be held on field observation and interviews with women who had mastectomies that were instructed in a high-oncology unit between April and May 2013. The number of women participants will be obtained obeying the criterion of data saturation. After transcribing the interviews will be held the Technical Content Analysis by the method of thematic analysis. The research project was approved by the Research Ethics under CAAE 07210812.5.0000.5274. Expected results: to contribute to the process of health education in high steering group to promote reflection on the knowledge presented by these women after their participation in the group, seeking to improve dialogicity, promoting self-care and empowerment of women after mastectomy.

Descriptors: Health Education; Self Care; Mastectomy; Nursing.

RESUMO
Objetivo: analisar o processo de educação em saúde no grupo de orientação de alta pela percepção da mulher mastectomizada. Método: estudo qualitativo, descritivo e exploratório. Será realizada a observação de campo e entrevistas com mulheres mastectomizadas, que receberam orientação de alta em uma unidade oncológica, entre abril e maio de 2013. O número de mulheres participantes será obtido obedecendo ao critério de saturação dos dados. Após a transcrição das entrevistas será realizada a Técnica de Análise de Conteúdo pelo método de Análise temática. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa sob CAAE 07210812.5.0000.5274. Resultados esperados: contribuir com o processo de educação em saúde no grupo de orientação de alta, para promover reflexão acerca do conhecimento apresentado por essas mulheres após a participação no grupo, buscando melhorar a dialogicidade, favorecendo o autocuidado e a autonomia da mulher após a mastectomia. Descriptors: Educação em Saúde; Autocuidado; Mastectomia; Enfermagem.

RESUMEN
Objetivo: analizar el proceso de educación para la salud en el grupo directivo de alta médica por la percepción de las mujeres mastectomizadas. Método: estudio cualitativo, descritivo y exploratorio. Se llevará a cabo la observación de campo y entrevistas con mujeres mastectomizadas, que fueron instruidas en una unidad de alto oncología, entre abril y mayo de 2013. El número de mujeres participantes se obtendrá obedeciendo el criterio de saturación de datos. Después de transcribir las entrevistas se llevarán a cabo el Análisis de Contenido Técnico por el método de análisis temático. El proyecto de investigación fue aprobado por el Comité de Ética de Investigación en CAAE 07210812.5.0000.5274. Resultados esperados: contribuir al proceso de educación para la salud en el grupo directivo de alta a promover la reflexión sobre el conocimiento presentado por estas mujeres después de su participación en el grupo, buscando mejorar la dialogicidad, promover el autocuidado y la autonomía de la mujer después de la mastectomía. Descriptors: Educación para la salud; El Autocuidado; La Mastectomía; Enfermería.
One of the health problems of women today in the world is breast cancer, which involves preventive and curative measures. In 2012, it was waited for Brazil, 52,680 new cases of breast cancer, with an estimated risk of 52 cases per 100 000 women.¹

The assistance to women with breast cancer requires technical skill and scientific updated, for the recovery of the health of the client. For the treatment and care are maintained, it is necessary therapeutic bond and seizure of effective health education activities performed by nurses and staff. As indeed there is a responsibility with full recovery of the client relationship and to assist her in coping with the disease and its consequences.

There is a need for health professionals committed to minimizing this problem, as well as for the prevention of complications and spread of information in order to enhance self-care.²

A mastectomy is a surgical procedure that brings aggressive consequences traumatic experiences in the life and health of women. The body schema is modified by changing the way you feel and experience the body. The breast since adolescence is a striking component of femininity, as it represents part of the body image, sexual, besides fulfilling the function of breastfeeding.³

The postoperative period is marked by ambivalence. There occurs the relief of having survived the surgery and the hope of being cured. But there is also the fear of recurrence, fear of facing the pain and healing, the fear of facing the possibility of a permanent body mutilated and also concerns with femininity and with the reactions of fellow front mastectomy. It follows, then, postoperative period, during which may occur depression, anxiety, and low self-esteem.⁴

Given this reality nursing can act minimizing complications and suffering through care and educational interventions for these women, enabling overcome in the process of coping with the disease with a view to recovery and rehabilitation. Thus, from the foregoing, the observations in practice and considering the issues surrounding women after mastectomy, it is critical that health education for transformation of this reality, the process of stimulating awareness of self-care.

In this sense, the object of this project is to study the learning process in the steering group for the high perception of women with mastectomies. We seek to answer the following questions: How is being applied the learning process in the group of women with mastectomies high? What information do women with mastectomies would like to receive home care? There assimilation of knowledge by women after mastectomy group orientation high? Which instrument applicable to improve the group of women with mastectomies high?

This study aims to contribute to the reflection on the knowledge presented by these women after high orientation, which aims to build educational technology as a liaison facilitator of this process.

**OBJECTIVES**

- To analyze the process of health education in the steering group of the high perception of women with mastectomies.
- To lift with women with mastectomies information needs for home care.
- To check the knowledge assimilated by women after mastectomy group orientation high.
- To build technology in health education for the steering group of high applied women with mastectomies.

**METHOD**

This is a descriptive, exploratory and qualitative approach, taking the theoretical method of Paulo Freire awareness and the definition of selfcare by Orem. This method requires that think and live education as the practice of freedom. In true learning learners will becoming real subjects in the construction and reconstruction of knowledge taught alongside the educator, also subject of the process.⁵

The scenario will be an oncology unit in the State of Rio de Janeiro / RJ serving daily, the predominantly female clientele, diagnosing and treating people with breast cancer. Study subjects will be women after mastectomy group who participated in the orientation of this unit high.

Inclusion criteria are: having declined to participate in the study and signed an informed consent form for this study, women who underwent mastectomy in use of drainage system that participated in the steering group for high. The exclusion criteria are: Women who partially withdrew the breast without axillary dissection; women with some cognitive impairment that prevents participation.

Data collection will be conducted between April and May 2013 through semi-structured...
The number of women participating in the study will be obtained by obeying the criterion of saturation of data. A semi-structured interview will be recorded. Will be asked questions related to the topic of study to obtain data to enable responding to the goals set on the knowledge learned after participation in the steering group for high and their demands for home care. The interview will be held seven days after the women have participated in the steering group for high performed by nurses. This is the seventh day that this occurs returning to the hospital, specifically the dressing room where you will be met by a nurse who will follow up to his post-operatively.

Aiming to know the process of health education in the steering group will also be used for high single observation field with journaling field during the course of the steering group will be used as a roadmap for a better analysis of the data. In this type of observation the researcher acts only as a viewer attention, without being part of the context. Furthermore, data collection by observation is followed by a process of analysis and interpretation of data, which gives the required control and systematization of scientific procedures.

After transcribing the interviews will be conducted content analysis by the method of thematic analysis, which consists in discovering the meaning units that make up the communication and whose presence or frequency of appearance can mean something for the chosen analytical objective.

Also be held to categorize data in order to understand the speech of subjects who were interviewed and records of daily field arising from the simple observation of the field during the course of the steering group for high.

This project Professional Master's Program in Nursing Care Nursing School Aurora Afonso Costa UFF (EEAAC / UFF) was approved by the Research Ethics Committee of INCA under No. CAAE: 07210812.5.0000.5274, opinion: 133365 meet the standards of Resolution 196/96 of the National Health Council.

**EXPECTED RESULTS**

Contribute to the process of health education in high steering group for a reflection on the knowledge presented by these women after their participation in the group, seeking to improve dialogicity, promoting self-care and empowerment of women after mastectomy. It is expected to generate new educational technologies in health for the group in order to expand the evaluation process, approach, intervention and monitoring, in order to improve the quality of the steering group of high and consequently the quality of life of these clients.

**REFERENCES**

Health education in a group of guidance...