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CASE REPORT ARTICLE

WESTERN SANTA CATARINA VER-SUS: VISUALIZING A TRAINING ITINERARY IN NURSING DIRECTED TO THE UNIFIED HEALTH SYSTEM

VER-SUS OESTE CATARINENSE: VISLUMBRANDO UM ITINERÁRIO FORMATIVO EM ENFERMAGEM DIRECIONADO AO SISTEMA ÚNICO DE SAÚDE

VER-SUS OESTE CATARINENSE: VISLUMBRANDO UN ITINERARIO FORMATIVO EN ENFERMERIA DIRIGIDO AL SISTEMA ÚNICO DE SALUD

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ABSTRACT

Objective: to relate the experiences of the Program on Experiences and Training in the Reality of the Unified Health System. ***Method***: descriptive study of experience report type developed from the realization and participation in four editions of the Program in the west of Santa Catarina State. ***Results***: accumulated experience demonstrates that professional education and practice are interconnected and interdependent. Therefore, innovative and liberating training can be a very useful tool to assist the consolidation of a Unified Health System that may meet all principles and guidelines of its theoretical-philosophical framework. ***Conclusion***: the Program is relevant for the qualification of health and nursing training, as well as to give a new meaning to teaching-learning in health in university relations. ***Descriptors***: Training of Human Resources in Health; Nursing Education; Unified Health System.

RESUMO

Objetivo: relatar as experiências do Programa de Vivências e Estágios na Realidade do Sistema Único de Saúde. ***Método:*** estudo descritivo, tipo relato de experiência, desenvolvido a partir da realização e participação em quatro edições do Programa no Oeste do Estado de Santa Catarina. ***Resultados:*** a experiência acumulada demonstra que o ensino e a prática profissional estão interligados e são interdependentes, portanto, uma formação inovadora e libertadora pode ser um instrumento muito profícuo para auxiliar na consolidação de um Sistema Único de Saúde que atenda a todos os princípios e diretrizes de seu arcabouço teórico-filosófico. ***Conclusão:*** denota-se a relevância do Programa como dispositivo para qualificar a formação em Saúde e em Enfermagem, bem como para ressignificar nas relações universitárias o ensino-aprendizagem em saúde. ***Descritores:*** Capacitação de Recursos Humanos em Saúde; Educação em Enfermagem; Sistema Único de Saúde.

RESUMEN

Objetivo: relatar las experiencias del Programa de Experiencias y Etapas en la Realidad del Sistema Único de Salud. ***Método:*** estudio descriptivo, tipo relato de experiencia, desarrollado a partir de la realización y participación en cuatro ediciones del Programa en el Oeste del Estado de Santa Catarina. ***Resultados:*** la experiencia acumulada demuestra que la enseñanza y la práctica profesional están ligados y son interdependientes, por lo tanto, una formación innovadora y libertadora puede ser un instrumento muy provechoso para auxiliar en la consolidación de un Sistema Único de Salud que atienda a todos los principios y directrices de su esqueleto teórico-filosófico. ***Conclusión:*** se nota la relevancia del Programa como dispositivo para calificar la formación en Salud y en Enfermería, así como para resignificar en las relaciones universitarias la enseñanza aprendizaje en salud. ***Descriptores***: Capacitación de Recursos Humanos en Salud; Educación en Enfermería; Sistema Único de Salud.

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INTRODUCTION

In 1988, the Federal Constitution designed a new logic of health organization: the Unified Health System (SUS). This system emerged as a government policy that establishes a set of actions and health services for the Brazilian population and is composed of federal, state and municipal public bodies and institutions for the direct and indirect management of the foundations maintained by the public power.[1]

Regulated by Law 8.080/90, SUS has in its theoretical-philosophical framework the function of guaranteeing access to health in a universal, integral, equitable and humanized manner to the entire Brazilian population.[2] However, as a result of the existing health model and human resources, health care is constantly offered in a fragmented way with focus on the pathology, what does not fully meet the demands and desires of users, thus tracing an inconsistent and weakened line of care.

In all lines of care, it is notable that the management of financial resources and the management of human resources reflect on the quality of services provided, as well as on the level of user satisfaction. SUS professionals must understand the real needs of the population, carry out actions of planning, organization and evaluation of the assistance provided, so that a well to offer qualified service for all users.

In order to change the weaknesses present in the care practice, it is essential to act in the training of health professionals. Curricular experiences in the health area reproduce teaching from a curative, hospital-centered and fragmented paradigm of knowledge.[3] This characteristic of the training causes professionals' actions to become reductionist.

In order to transform the reality of the training of future health professionals and to encourage mobilizations towards a better quality of SUS, there are several pedagogical initiatives aiming at the problematizing both theoretical and practical-theoretical teaching, and promoting the reflection of real working contexts that provoke important discussions on health education.

Among initiatives, we highlight the project entitled Experiences and Training in the Reality of the Unified Health System (VER-SUS). This project aims, in addition to stimulating the health training focused on the study of the context present in the SUS, to train professionals ethically committed with the principles and directives of the system and that identify themselves as social/political actors capable of promoting transformations in the various spheres of the System. In this way, the objective of this study is to report the experiences of the Program of Experiences and Training in the Reality of the Unified Health System.

METHOD

This is a descriptive study of experience report type developed with Nursing students about the construction and participation in four editions of the program VER-SUS, in the Western Region of Santa Catarina, Brazil, in the years 2014, 2015 and 2016.

The editions of the project in this region had the objective of enabling participants to develop their questions and perceptions about SUS management and care policies in a constructive and liberating manner, as well as about the whole context surrounding the care model and the provision of health services to the Brazilian population.

The selection of students for collecting experiences was based on Information and Communication Technologies (ICTs), using a form produced by the local organizing committee of the project. In this registration form, there were questions related to the SUS, the academic involvement of the individual and also to the reasons that aroused his/her interest to participate in this project. Among the main evaluative criteria were: to be able to stay the whole immersion period (eight days) and to be enrolled and attending a Higher Education Institution (HEI), whether public, community or private.

During the four editions, 224 participants (living and facilitators) were selected from several undergraduate courses, as shown in the Figure 1.

Undergraduate course / number of participants			
2014	2015/1	2015/2	2016
Law (1)	Accounting (1)	Biomedicine (1)	Administration (1)
Physical education (3)	Nursing (17)	Biological Sciences (1)	Biomedicine (3)
Enfermagem (46)	Physiotherapy (1)	Nursing (19)	Physical education (2)
Pharmacy (4)	Speech Therapy (1)	Pharmacy (5)	Enfermagem (30)
Physiotherapy (4)	Medicine (4)	Physiotherapy (4)	Civil Engineering (1)
History (1)	Nutrition (2)	Medicine (3)	Production Engineering (1)
Medicine (6)	Dentistry (1)	Nutrition (3)	Pharmacy (6)
Nutrition (6)	Psychology (5)	Dentistry (3)	Physiotherapy (1)
Dentistry (6)	Accounting (1)	Psychology (6)	Speech Therapy (1)
Psychology (9)		Collective Health (2)	Journalism (2)
		Social Service (1)	Medicine (2)
			Nutrition (7)
			Dentistry (3)
			Psychology (11)
			Chemistry (1)
			Occupational Therapy (1)

Figure 1. Participants (living and facilitators) of several undergraduate courses. Chapecó (SC), Brazil, 2016.

The activities developed generally comprised two days of training for the trainees, four days of experiences in health services and one day of socialization activities carried out in the period of immersion. Facilitators were previously qualified/trained aiming to deepen their knowledge on the themes that involve health education and SUS. Among the issues addressed that were essential to the training process of these mediators were the history and proposal of VER-SUS, struggles of Social Movements in Western Santa Catarina, sanitary reform, principles and guidelines of the SUS and of the Unified System of Social Assistance (SUAS), culture of peace, and conflict-mediating strategies.

Students were divided into subgroups. Each subgroup, besides analyzing the general aspects of the establishments and institutions visited, was responsible for deepening in a predetermined theme that was related to the context of the theme chosen by the organizing committee. The topics covered in each edition were: general aspects and health education focused on SUS (1st edition); Health Care Networks (2nd edition); guiding axes of the 15th National Health Conference (3rd edition); and Care Networks and Vulnerable Populations (4th edition).

The use of problematizing and reflexive methodologies was the main work strategy for development of activities. At the end of the daily shift, each group debated the situations observed in a collective way, having as a product a daily report highlighting the most relevant points of each place, possible interventions to transform weaknesses into potentialities and also issues around the "versusian" context of building knowledge. Furthermore, students were challenged to discuss the situations experienced in health institutions with a technical-scientific basis in order to qualify the process of knowledge construction. Therefore, in addition to the theoretical foundation offered by tutor teachers and by the organizing committee, trainees used materials they found, such as texts and articles, and material from lectures they attended during the immersion.

All students, in all editions, were able to experience the three levels of health care that are part of SUS, knowing institutions such as: Basic Health Units (BHU), Psychosocial Care Centers (CAPS), Hospitals (regional and municipal), Centers for Dental Care, Women's Network to Combat Cancer, Epidemiological Surveillance, Human Rights Reference Centers, Indigenous Villages, Worker's Health Reference Centers, among other institutions directly or indirectly related to the health of the population. Trainees could participate in meetings with the local population, through local and municipal health councils and representatives of social movements, enriching the experiences and collaborating in the process of knowledge construction.

DISCUSSION

During the period of experiences in VER-SUS of Western Santa Catarina, students were able to know and recognize several scenarios that make up the SUS context. The visits to different institutions, with different ways of managing and caring, but belonging to the same System, provided a broadening of views on the health service offered in the macro region of Western Santa Catarina, as well as, aroused interest in unveiling the reasons why these differences are so marked among health services.

Among the multifaces contained in the essence of this questioning, we sought to explore in this text the issues that involve SUS, teaching and training in Health, especially in Nursing. The numerous reconstructions and re-significations about conceptions of each subject regarding the

characteristics of this context are presented below in three main themes.

♦ Health education and SUS

In the VER-SUS "experience", we repeatedly saw universities inserted in health institutions, either by means of students performing theoretical-practical activities, or by the performance of Permanent Health Education (PHE), or even by professionals who act/acted there, since they graduated in educational institutions. This situation made us reflect on the role of training in the construction of SUS and how this is understood within the System.

We know that the training focused on issues involving the SUS is fundamental in order that the effectiveness of the SUS actually take place. However, this is still a huge challenge for most Brazilian universities.[4] A large part of the institutions that offer health courses continue to develop a teaching method traditionally focused on the biomedical model, centered on biological issues of the health-disease process and fragmented in several points, as well as the SUS itself.[5]

This configuration of education based on flexnerian precepts, decrepit but still very present, can result in the students' understanding of health process as consisting only in the performance of activities aimed at rehabilitation and treatment of acute diseases, devaluing public health and the SUS, which has been increasingly active in health promotion and disease prevention. If we take into account that the training processes, modes of management and modes of care are intrinsically related6, the influence that higher education has on the reality that reflects on SUS becomes evident, as well as the importance of the use of educational methodologies that have as a principle the use of practice scenarios, since health systems and education must work in consonance with the coordination of actions and strategies of workforce production.[7]

Several discussions during the pedagogical and problematizing dynamics, developed daily during the period of the project, pointed the reflection of the teaching sector as an instrument capable of improving SUS quality. The notes on the subject emerged from group discussions, in which the most striking difficulties perceived by students were the method of reductionist teaching to the disease and the difficulty in developing critical-reflexive thinking about what one learns in the academy.

Reflective practice, according to the students, usually takes second place in graduation scenarios. This, in turn, translates into fragility in the understanding of SUS. Due to its complexity, it is necessary to reflect on several aspects to know and identify oneself with the System. This can only be achieved through meaningful and problematizing learning, according to the Freirian strategies adopted in the activities of VER-SUS.[8]

In short, the relationship between training and the SUS permeates several fundamental points to achieve the success of health actions and services. The experiences and discussions of the project have shown that teaching and professional practice are interconnected and are dependent on each other. Therefore, innovative and liberating training can be a very useful instrument to help to consolidate a system that meets all principles and guidelines of its theoretical-philosophical framework.

♦ Nursing training: challenges and weaknesses

When entering some places of the experience in the VER-SUS project, great gaps in the training of nursing professionals regarding the SUS work are still perceptible, as well as are the challenges faced by SUS. This causes us some concern and highlights the need to train competent, critical and creative professionals capable of acting not only in their area of training, but surpassing the theoretical-practical domain demanded by the labor market, innovative agents, transformers and inserted in the reality.[9]

This concern in training professionals focused on work in the SUS was emphasized on November 7, 2001, with Resolution CNE/CES Nº 3, when the National Curricular Guidelines of the Undergraduate Nursing Course were established. They reaffirmed the need and duty of the Institutions of superior education (ISE) to train professionals with these characteristics, assuring the quality and humanization of care, pointing to a new profile of egress nursing professionals, with generalist, critical and reflexive education, based on ethical principles, prepared to act with a sense of responsibility and commitment to citizenship.[10]

Rethinking Health/Nursing training is not an easy task. The formation process, far beyond obtaining a diploma or endorsement for health practice, has the potential of transforming the conceptions of future health professionals into a commitment to the construction and strengthening of SUS. The nurse is usually the professional who manages health actions and

services, a task that encompasses several challenges, among them, fields not yet known by the professional, dissociation of theory with practice and a certain "flexibility and creativity", which develop from the experiences to which the professional is submitted. The daily life of a new health work unfolds in an integral and human perspective from the exercise of citizenship, considering the voice and action of subjects in the transformation of their social practices.

The SUS remains as one of the great work fields of nursing professionals and ignoring this condition would be a big mistake. Universities, more than ever, need to be aware of this and accept this reality by proposing to train nurses in a differentiated way.

In order that this differential training take place, it becomes imperative that the formative process be articulated with the world of work; that students have the opportunity to participate/experience SUS, not only in projects such as VER-SUS, but within their own university, from the beginning of graduation. The existing gap between theory and practice must be broken and health professionals must be stimulated to develop a critical-reflective look to transform practices, aiming problem-solving attitudes and the qualified services to the population.11

From this perspective, it is possible to reflect that Nursing education must be capable of forming a professional with ethical/political commitment and a critical/reflexive being, involved in the current conjuncture, problematizing everyday life as a bold participant in social construction, pointing failures and indicating possible solutions. This professional profile should compose pedagogical projects to train thinking nurses.[12]

♦ VER-SUS as a training tool capable of filling the gaps left by traditional teaching in Nursing

Nursing training is opening up to educational reform opportunities, due to the stimulation of the concept of health interdependence and the rise of meaningful educational strategies.13 In this logic, the VER-SUS project is one of several tools created to assist the re-orientation of professional training and is a joint work of the Ministry of Health and United Network, supported by several universities and carried out by students through the student movement.

VER-SUS seeks to fill the "intervals" that the classic teaching that universities leave during the training process just as do the National Program of Reorientation of Vocational Training in Health (Pro-Health) and the National Program of Education for Health Work (PET-Health). For this, the program has the use of innovative and transformative methodologies that incite reasoning and understanding of the whole System, without fragmenting the parts that compose it, as its fundamental basis.

With the objective of improving the training process, the project is not dedicated to a technical professionalization of students, but highlights the potentialities and fragilities of services on-site in several health institutions visited. It does not represent a "lesson" about the SUS, but seeks to emphasize its characteristics to set students free from vertical education, allowing them to understand themselves as protagonists in their field of activity, both as students and as users.

The majority of participants of the VER-SUS of Western Santa Catarina are students from ISE of the Western Macroregion of Santa Catarina, and the project presents scenarios that are/will be common during theoretical-practical classes and curricular training of these subjects. The possibilities provided by the project allow future nurses to return to their universities with an expanded look, adding enriching and meaningful experiences to their training.

With regard to nursing, the contributions of the program are remarkable. They range from encouraging the militancy in favor of professional valorization, to the encouragement to fight for major causes, such as the reorganization of the health care model, in order to turn it more humanized, integral and effective.

The participation of students of the course has an expressive number of trainees and facilitators, totaling 112 individuals throughout the four editions (50% of the participants). This demonstrates the interest and the transformation that has been taking place in the Brazilian health and nursing scene.

The VER-SUS played an unique role for training nurses in the sense that broadened the perceptions about the operation and management of processes in different areas of the SUS, such as: communication strategies and humanized care, the structure and stabilization of health network policies and programs developed from social participation and aimed at socially segregated groups and

assurance of universal access to health and education. This expanded perspective, with the students' recognition of the context of Brazilian public health, focused on reflection and constructive criticism, is capable of developing better strategies to qualify the performance of students in clinical practice.[14]

In this sense, VER-SUS of Western Santa Catarina confirms the improvement of teaching and education in health and, above all, in the nursing of Western Santa Catarina. The project positively interferes with the prerogatives that involve this sector and seeks the construction of a professional profile with political characteristics of struggle and up building of the System.

CONCLUSION

VER-SUS enables us, as a teaching tool, to broaden our perspectives on conceptions of public health in Brazil. Through this project, it is possible to experience all that was previously only theoretically studied and to understand the fragilities and potentialities of the System.

Engaging in such a rich and liberating knowledge-building period is a differential in the academic trajectory. The experimentation of the new, the visits to health institutions, reflective pedagogical practices and the reality of SUS, generate in the student a desire for militancy in favor of qualified health care; generate a bond that goes beyond the vulnerabilities of the service model; and, above all, cause the desire to participate in the construction of SUS to grow.

To experience the VER-SUS is to experience SUS itself, it is to find hope in health, in training and in the human being. Trying to translate what was experienced into words (which is almost impossible) and paraphrasing Paulo Freire: "no one walks without learning to walk, without learning to walk the path, remaking and retouching the dream for which he walk".

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