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HEALTH EDUCATION ACTIVITIES NEAR CHILD EDUCATION: RELATED EXPERIENCE

ATIVIDADES DE EDUCAÇÃO EM SAÚDE JUNTO AO ENSINO INFANTIL: RELATO DE EXPERIÊNCIA

ACTIVIDADES DE EDUCACIÓN EN SALUD JUNTO A LA ENSEÑANZA INFANTIL: RELATO DE EXPERIENCIA

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ABSTRACT

Objective: to describe the experience of planning and development of health education activities with early childhood education. **Method:** qualitative, descriptive study of the of experience report type of activities of the Child Health discipline of the Undergraduate Nursing Course of a public university of the South of Brazil next to the nursery school. The topics covered were: hygiene habits, infant feeding, childhood accidents. **Results:** play activities, such as gymkhana, drawings, painting, learning and exchange of knowledge among children were carried out. For each meeting, two or three activities, were planned, and more topics could be addressed in the same meeting, using the gymkhana modality. **Conclusion:** it is hoped to contribute to the dissemination of ideas about health education activities with children's education and the possibility of replicating such activities in other contexts, aiming at the promotion of health in the scope of Nursing care. **Descritores:** Child Health; Health Promotion; Child Rearing; Health Education; Play and Playthings; Nursing.

RESUMO

Objetivo: descrever a experiência de planejamento e desenvolvimento de atividades de educação em saúde junto ao ensino infantil. **Método:** estudo qualitativo, descritivo, do tipo relato de experiência, de atividades da disciplina de Saúde da Criança do Curso de Graduação em Enfermagem de universidade pública do Sul do Brasil junto à escola de educação infantil. Os temas abordados foram: hábitos de higiene, alimentação infantil, acidentes na infância. **Resultados:** realizaram-se atividades lúdicas, como gincana, desenhos, pintura, para o aprendizado e troca de conhecimentos entre as crianças. Para cada encontro, foram planejadas duas ou três atividades, podendo abordar mais temáticas no mesmo encontro, utilizando-se da modalidade de gincana. **Conclusão:** almeja-se contribuir para a divulgação de ideias de atividades de educação em saúde junto à educação infantil e a possibilidade de replicar tais atividades em outros contextos, visando à promoção da saúde no âmbito do cuidado de Enfermagem. **Descritores:** Saúde da Criança; Promoção da Saúde; Educação Infantil; Educação em Saúde; Jogos e Brinquedos; Enfermagem.

RESUMEN

Objetivo: describir la experiencia de planificación y desarrollo de actividades de educación en salud junto a la enseñanza infantil. **Método:** estudio cualitativo, descriptivo, del tipo relato de experiencia, de actividades de la disciplina de Salud del Niño del Curso de Graduación en Enfermería de universidad pública del Sur de Brasil junto a la escuela de educación infantil. Los temas abordados fueron: hábitos de higiene, alimentación infantil, accidentes en la infancia. **Resultados:** se realizaron actividades lúdicas, como, gincana, dibujos, pintura, para el aprendizaje y el intercambio de conocimientos entre los niños. Para cada encuentro, se planearon dos o tres actividades, pudiendo abordar más temáticas en el mismo encuentro, utilizando la modalidad de gincana. **Conclusión:** se pretende contribuir a la divulgación de ideas de actividades de educación en salud junto a la educación infantil y la posibilidad de replicar tales actividades en otros contextos, visando la promoción de la salud en el ámbito del cuidado de Enfermería. **Descritores:** Salud del Niño; Promoción de la Salud; Crianza del Niño; Educación en Salud; Juego e Implementos de Juego; Enfermería.

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INTRODUCTION

The practice of health promotion aims to act on the determinants of the living conditions of populations, such as work, education and leisure, as well as investing in the empowerment of individuals and communities.¹ With regard to the promotion of children's health, it is necessary to consider the family context in which it is inserted, since it depends on the responsible adult² to satisfy basic elementary needs, such as food and hygiene, and more elaborate needs, as a stimulus to its growth and development.

In this context, early childhood education aims at the integral development of the child up to six years of age, comprising its physical, psychological, intellectual and social aspects and being complemented by family and community action.³ In Brazil, this stage of the schooling process of the child is developed in institutions known as nursery school, formerly called nursery schools, which are powerful spaces for acting or interdisciplinary dialogue, especially with the health area.

Thus, the nursery school should be considered a Nursing care practice field, which favors the articulation of actions that promote transformation, offering the possibility of an association between research and teaching and providing the exchange of knowledge. The nurse has, in their training, the essence of care in a holistic way, having competence to perform the health care to the children in these institutions, for having knowledge about the child's growth and the development, being able to understand its peculiarities.⁴

In countries such as the United States of America and France, the school is formally a place of work for nurses, where, in addition to routine care, these professionals act as health educators, promoting it among children, families and the community.⁵⁻⁶ However, in Brazil, the insertion in these spaces still occurs fragmented or through interinstitutional actions between Basic Health Care and Schools, which have been nationalized by the Health in School Program.

The insertion of Nursing actions in the nursery school cooperates for a space favorable to the development and the lowest illness of the child.⁷ Thus, the opportunities for integration of educational

and health practices are expanded, contributing to the best child care.⁸

In this sense, health education emerges as a process that contributes to the formation and development of people's critical awareness, stimulating the search for solutions and the organization for collective action. The participation of a multidisciplinary team is fundamental, since health professionals are essential in building knowledge about healthy habits in the school environment.⁹ To this end, nurses should seek appropriate teaching strategies that favor the exchange of information and the interaction between all that make up the school environment.¹⁰

OBJECTIVE

- To describe the experience of planning and development of health education activities with children's education.

METHOD

A qualitative, descriptive study of the experience report of an activity of the discipline "Care in Nursing to the newborn, child and adolescent" approaching the scope of the promotion of children's health in the nursery school. This course is located in the Nursery-Infant Department of the Undergraduate Nursing Course of the Federal University of Rio Grande do Sul (UFRGS).

The activity was developed by the academics of the 6th semester of this institution, two professors responsible for the activity, and two doctoral students of the Graduate Program in Nursing of UFRGS, in a stage of oriented teaching. It was held at the Vera Fabrício Carvalho Nursery, of the Hospital of Clinics of Porto Alegre (HCPA), during the period from October to December 2016. The School for children's education is intended for the teaching of the children of professionals and servants of the HCPA, which constitutes a school hospital linked to UFRGS. Thus, the school of early childhood education has several activities of other undergraduate courses of UFRGS, so, its choice for such care practice.

The syllabus contents included: the process of growth and development of the child; child health promotion; hygiene care; and prevention of child accidents. As a teaching methodology, theoretical and practical activities were developed; workshops with students; health education

activities at the kindergarten through scanners, drawings, paintings; construction of educational material for children and individual and group orientation in a practical field.

The activities occurred with two groups, composed on average, by five Nursing students, totaling a total of 12 meetings for each group. Each group developed activities with one of the classes of the nursery school (Nursery 1 and 2), with an average of 20 children aged four to six years. The care practices at the nursery school were accompanied by a graduation teacher and a doctoral student. In addition, the teacher of the nursery class participated to assist during the proposed activities.

Nursing students were instructed to propose practical health education activities to be developed with children, using their creativity, research on the appropriate material and knowledge about the stages of children's development. The themes were pre-defined after a conversation with the children's educators and the board of directors of Escola Infantil. In this way, it was possible to know the routines of the institution and identify their demands/difficulties in providing care to the child, enabling the elaboration of strategies for the development of educational and health actions in the routine of schools. In order to do so, meetings were held in the classroom for planning and construction of materials by Nursing students to develop in the practical assistance activity in the school of early childhood education.

These meetings were based on participative methodologies for the health area, which consists of creating, from real situations of health work, educational practices that allow students to live and learn in problematized concrete situations. In this methodology, the teacher assumes the role of constructor of possibilities for learning enabling, the participants involved in the learning process, the articulation between a previous knowledge and a new one. The most used strategies are those of group work, dramatic games, among others, which presuppose the importance of the student's experience in a group and that the learning is driven by the interrelationships experienced in the process, dictated by the time and rhythm of their students. components. The group motivates the

individual and the individual motivates the group; the individual learns with the group and the group with him, so it is emphasized that it is important to alternate between individual and group work.¹¹

The activities of care practice in the school for early education took place in the morning, being inserted in the planning of daily activities of the children by the early education teacher and lasted up to two hours. After closing the practical assistance activity, a feedback and evaluation of the activities of the day with the Nursing students.

RESULTS

♦ Planning of health education activities

In the first meeting with Nursing academics, a workshop was conducted using the Dynamics of Creativity and Sensitivity (DCS), which integrates the Creative-Sensitive Method (MCS), 12 divided into five moments. For this, material such as brown paper, cardboard, watercolor pens, crayons, crayons and school scissors were made available. The guiding question of artistic production was: What is health education in the context of children for you? The academics answered the question by means of an artistic production produced collectively and later discussed. The reflection about health education in the children's context was necessary in order to sensitize the students to the complexity of the professional performance in this context.

On the days in the classroom, prior to each meeting with the children, the activities and materials for the development of the children's school were prepared. Playful activities were chosen to address the themes listed in order to enable dialogue and the exchange of knowledge.

For the planning of activities by the academics, was held the consultation and the discussion of materials from the Ministry of Health, scientific productions in the area, video sites. It was sought, with this process, to define terms, to recover concepts and meanings of the themes to be worked in order to be as close as possible to the reality experienced by the child. This process of planning and construction of health education activities was mediated by the trainee doctoral trainees.

For each meeting, two or three activities were planned with the children, being able to approach one or more topics in the same meeting. In the course of the meetings, the themes were kept in order to establish the learning of the previous meeting and to deepen in other questions not addressed, and then, start a new theme. It is noteworthy that all the meetings began with a conversation with the children, questioning their experiences and knowledge on the themes.

Against this, the development of the activities with the children in the form of gymkhana, was organized, dividing the class into two teams. The two teams should go through and complete the stages of each meeting. At these meetings, children were encouraged to relate to healthier behaviors as well as the main methods of disease prevention. It is noteworthy that the children answered positively the activities in the modality of gymkhana and, for that reason, it was decided to keep the meetings in this organization.

♦ Development of health education activities

In the first contact of the Nursing academics with the children of the nursery class, a dynamic of presentation and integration between the nurses was realized. For that, the dynamics called "Web of friendship" were used, with a circle and a ball of wool, that the children and the academics would introduce themselves and each other, briefly mentioning, who was and what I liked to play/play. After the presentation, each child threw the ball to one of the people in front of him, and so on, until all presented themselves, aiming at a bond establishment.

In the "Hygiene" theme, eight activities were carried out. For each one of them, the academics organized a poster with drawings on hygiene for children to identify the actions and utensils used in various daily actions, such as when bathing, going to the bathroom, before eating and brushing teeth. The poster was divided into the daily actions, and there were drawings of utensils that the children should associate and paste next to the hygiene actions. In the case of "bathing", children should mention the necessary utensils such as soap, shampoo and conditioner and describe how to bathe in your step-by-step. This activity was aided

by the academics who, in a playful way, gave tips to the children.

The puzzle game was designed by the academics, with two puzzle games with nine pieces, each constituting a hygiene action figure for the children to assemble as quickly as possible than the other team. In the Q & A game, teams were asked about aspects discussed in the previous meeting on hygiene and each correct answer corresponded to points on the scoreboard.

The memory game consisted of figures on hygiene. Nursing academics produced two memory sets containing 12 pieces each. This game was also performed in the form of two-team gymkhana.

In the guessing game of the fruits, the children had their eyes blindfolded and should guess the fruit they were tasting (banana, apple, orange, strawberry, papaya, bergamot). The fruit display was used to explain the relevance of its intake, since its nutrients and vitamins provide well-being and help in the growth and development of the body. Also, the importance of hand hygiene before feeding and the correct washing of fruits was discussed. At the end of the meeting, the fruits were distributed to the children and teachers, performing a healthy snack.

In addition to games and games, theater was performed with characters created by Nursing academics: Boca Antoinette, Evil Caries, Hot Balloon, Captain Toothbrush and Super Dental Fiber. In this story, a child was too lazy to brush their teeth after eating candy before bed and a decay celebrates that, would soon, grow in their mouth. Then, they wake up, and the toothbrush emerges to overcome the caries and is assisted by the dental floss. At the end of the theater, children, who had not yet brushed their teeth, after breakfast at school, were invited to brush their teeth. Similarly, at another time, after physical education, the children danced, with Nursing students, the song "Washing Hands" by Arnaldo Antunes, and they were invited to wash their hands before lunch. These actions aimed at reinforcing these hygiene habits with children, developing them correctly and ratifying their importance.

For the relaxation and fixation of learning, a parody of a song using the theme "hygiene" was carried out, which contained sections such as "Soap, soap, wash hands before dinner". The children were

encouraged to sing and dance, and the music contained, in their lyrics, the encouragement of proper hygiene, which allows the child to strengthen their knowledge on the subject.

In the theme "Accidents in Childhood", five games were played, prioritizing the main children's accidents, such as falls, burns, intoxications, drowning, electric shock, respect for the traffic code. It was carried out the memory game, that was used of figures about childhood accidents, elaborated by the Nursing academics.

It was also performed theater with puppets and fingertips telling four stories about childhood accidents, created by Nursing academics. These addressed burns, shock, falls and intoxication. In all stories, the accident victims were taken by ambulance to the hospital and, afterwards, shown playing happily happier. The set of baskets, for which they were to form a queue and each child intercalating between the teams, would receive a figure about childhood accidents and should classify it as "right" or "wrong" and place it in the corresponding basket. For this activity, the Nursing academics created figures about childhood accidents containing what would be right or wrong in the actions of the figures, such as, riding a bicycle with protective equipment, crossing the pedestrian crossing, others.

The game Dodgeball was played with a ball in the courtyard of the nursery, with the children divided between two teams. Whoever was with the ball should hit some component of the opposing team. The child who was hit with the ball should answer the questions about the topics discussed about accidents at previous meetings.

In one of the meetings, the academics elaborated a parody of a song on the theme "domestic accidents" for relaxation and fixation of learning. The song contained, in its lyrics, the incentive to protect children's accidents, which allows the child to strengthen the linguistic and psychomotor side.

In the theme "respect for differences and attention to strangers", two videos were presented to the children. The first told the story of a school class that received a new colleague, with habits and culture different from the majority. Throughout the video, the new member of the school suffers debaucheries and is ignored by colleagues,

but, it is stepping up and showing that the differences can constitute as an opportunity to know different ways to play. In the video, the first friends of the boy are two girls, being that, when they were together, they did not distinguish games of girls or boys. In the final moments of the video, the new boy in the school helps the first colleague who ridiculed him to face a change in the visual, showing his class that everyone can be different and in solidarity. At the end of the day, students in early childhood education began to count their impressions of the video, spoke about the importance of respecting people of different ages (especially, the teacher, parents and elders), ethnicities as well as special children. To support the discussion on gender, different toys were shown and questioned about who could play with them. After watching the video, the children came to the conclusion that everyone can play with everything, without the need to separate toys or games between girls and boys.

The second video illustrated the story of two brothers who were deluded by the offer of "Free candy, chocolates and ice cream" proposed by a gentleman with a kind and trustworthy appearance that circulated in a truck and colorful candy filled neighborhood. Initially, the children remembered the guidelines already received about never talking to strangers, so little accepting treats or gifts. However, at the insistence of the stranger, they went to meet him. When they got into that beautiful truck, it turned into a cell, just like the kind man, in a villain. After watching the video, students at the nursery school were very apprehensive and worried about what might happen to the brothers in the video. So the story continues, showing that after that scene, the children managed to escape and learned not to believe strangers, no matter what they look like. In the discussion about the video, they told them the direction they received from their families about the subject and agreed to talk to their friends about the danger of believing in stories told by strangers.

The children were receptive and participative to the activities of health education promoted by the students and professors of UFRGS. Despite the short period of activities, they were emotionally

attached to the team and satisfied by the attention they received.

It should be noted that the children involved had a good prior knowledge of the topics addressed, which facilitated the conduction and use of the proposed practical activities. It is believed that this may happen because the parents/guardians of the children are employees of a health institution and have a good socioeconomic and educational level.

At the end of the meetings with each class, a closing ceremony was held, in which all the children received a symbolic trophy. In spite of performing a gymkhana modality, it was considered a tie of teams, aiming to reward everyone for participation and encourage learning.

At the final meeting of the activities with the Nursing students, a discussion was held about an article on health education in children's education, reflection on the activities carried out, shared experiences and performance evaluation. A feedback was also carried out on the actions developed with the staff of the kindergarten school (children, educators and board).

DISCUSSION

♦ Planning of health education activities

The option for DCS is related to its foundation in Paulo Freire's conception of dialogic and problematizing education. During DCS, the importance of collective construction is explained and emphasized, which must happen from the knowledge acquired in the very experiences of the people who share the collective space. In the constant reinvention of their own knowledge, the participants become more autonomous and able to critically consider the reality in which they live and, as a consequence, have the possibility to transform it.

The workshop was developed in five moments, as proposed by DCS¹²: preparation of the environment and reception of the group; presentation of the participants of the group; explanation of the dynamics and individual or collective activity; presentation of the productions and collective analysis.

We chose to choose ludic activities to deal with themes related to children, in order to enable dialogue and exchange of knowledge. Ludicity is used as an instrument to establish relationships,

becoming a channel of communication between health professionals and children, favoring self-knowledge, cooperation, imagination and creativity.³

The idea of organizing activities in the form of gymnastics arises with the purpose of disseminating information and knowledge related to health. Thus, aiming to favor the involvement of children in the construction of new and/or reinforce attitudes, habits and care, while at the same time performing a pleasurable activity.¹³

Moreover, the fact that the process of planning and construction of health education activities is mediated by doctoral trainee trainees, highlights the integration between undergraduate and graduate students as a positive strategy in the teaching/learning process. This integration favors the exchange of experiences and allows the insertion of the post-graduate in the current context of professional training in their area, based on the experience of pedagogical practices and methodologies that integrate teaching and service.¹⁴

♦ Development of health education activities

During the meetings, there was the concern to fix the learning of the previous meeting and to deepen in other questions not addressed, and then, start a new topic. Resuming the contents of previous meetings refers to homework exercises. It is proposed that the fixing of content, in a significant way, occurs naturally, because the child will build the proper relationships and understanding of the content.¹⁵

It is emphasized that the children's approach, through a conversation, wheel favored the integration through the knowledge of their experiences and knowledge on the themes. The individual report of the children makes it possible to construct a diagnosis for the continuity in the conduct of the actions and to value the knowledge already constituted.¹⁶ In this sense, knowledge about health was constructed integrating the popular knowledge with knowledge based on the scientific knowledge through the various ludic activities carried out.

The play activity, through games and play, gains visibility in the educational process, as it serves as a stimulus for the construction of human knowledge, constituting an important aspect of personal, social and cultural development,

collaborating with the improvement of the quality of life and health. These activities facilitate learning and are capable of stimulating changes in the behavior of children and are increasingly used by health professionals.¹⁷ Considering that play is part of the child's world, it is an understandable, familiar language.

The children were encouraged to sing and dance, aiming to strengthen their knowledge on the subject. It is emphasized that music acts in the promotion of health, revealing contributions to the development and health of children of school age.¹⁸

The ludic moment promoted by music can be characterized as an important resource for care, promoting relaxation, well-being and the pleasure of being with oneself and with the other. In addition, it is an important resource to humanize the educational process, transforming it into something pleasurable and evidencing how much nurses and other health professionals can use the use of music in their practice of caring.¹⁸

The profile of the children participating in activities promoted with a good socioeconomic and educational level differs from the difficulties found in a study that addresses children from families with precarious socioeconomic conditions or social vulnerability.¹⁶ The socioeconomic and cultural characteristics of the different populations are important parameters for the planning of actions of efficient health education, since its social insertion, its values and beliefs strongly influence in its practices and conducts in health.¹⁹

CONCLUSION

With this report, it was intended to describe the experience of planning and development of health education activities with children's education. From the beginning, it was tried to value the children's previous knowledge, as well as to organize moments that could deal with subjects pertinent to the daily life of the infantile education. Teaching-service partnerships were established, which contributed to the proposal's effectiveness and a closer relationship among the establishments, as well as providing children with collective health promotion actions.

It reinforces, with this report, the possibility of discussing the theme and the forms of health education with the children,

aiming at valuing these actions and increasing the motivation for lifestyle changes. The aim, of this report, is to contribute to the dissemination of ideas about health education activities among children in early childhood education and the possibility of replicating such activities in other contexts.

The pedagogical experience for students and teachers of Nursing was recognized as a promoter of learning and satisfaction. It is important to highlight health education in children's education as a practice of care for nurses. This must be perceived as a process of knowledge sharing between individuals and groups, stimulating the transformation of reality. Nursing plays an essential role in occupying the spaces that comprise health education, especially in child education, in order to prevent sickness, promote health and quality of life not only for children, but, also, for their families and teachers.

The use of playfulness, as a pedagogical tool, was coherent for the promotion of childhood health. It is understood that work with health promotion is a powerful tool to produce quality of life in the population. It is intended, from this successful experience, to continue the work developed in the next semesters of the Nursing course.

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REFERENCES

1. Heidemann ITSB, Boehs AE, Fernandes GCM, Wosny AM, Marchi JG. Health promotion and quality of life: conceptions of the Ottawa charter on scientific production. *Cienc Cuid Saude*. 2012 July/Sept;11(3):613-9. Doi: <http://dx.doi.org/10.4025/cienccuidsaude.v11i3.13554>

2. Borenstein MS, Althoff CR, Maia ARC, Carvalho JB, Simoni DS, Padilha MI. Ingrid Elsen: a professional career and her dedication to the study of family care. *Texto contexto-enferm.* 2014 Jan/Mar;23(1):83-91. Doi: <http://dx.doi.org/10.1590/S0104-07072014000100010>
3. Araújo MG, Cassiano AN, Holanda CSM, Moreira PVSQ, Giovannini PE. Health education in the childhood education: active methodologies in approaching of the extensionist action. *J Nurs UFPE on line [Internet]*. 2013 Jan [cited 2017 May 21];7(1):306-13. Available from: http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/3470/pdf_1936
4. Monteiro AI, Santos ADB, Macedo IP, Gurgel PKF, Cavalcante JMP. Nurse's autonomy monitoring child growth and development. *Rev enferm UERJ [Internet]*. 2011 July/Sept [cited 2017 May 16];19(3):426-31. Available from: <http://www.facenf.uerj.br/v19n3/v19n3a15.pdf>
5. Berger D, Mabrouk N, Courty P. School nurses: representations and practices in health education. *Sante Publique*. 2009 Nov;21(6):641-57. Doi: 10.3917/spub.096.0641
6. National Association of School Nurses, Maughan E, Bobo N, Butler S, Schantz S, Schoessler S. Framework for 21st century school nursing practice. *NASN School Nurse*. 2015 June;30(4):218-31. Doi: <https://doi.org/10.1177/1942602X15589559>
7. Santos SMR, Jesus MCP, Peyroton LS, Linhares FS. Educational practice in a school of early childhood education: case studies. *J Nurs UFPE on line [Internet]*. 2015 Feb [cited 2017 May 16];9(2):768-72. Available from: <https://periodicos.ufpe.br/revistas/revistaenfermagem/article/viewFile/10397/11160>
8. Motta JA, Silva PO, Marta CB, Araújo CBM, Francisco MTR, Seabra Junior HC. Care for children at day care centers: integration between health and education. *Rev enferm UERJ [Internet]*. 2012 Dec [cited 2017 Mai 16]; 20(Esp.2):771-6. Available from: <http://www.facenf.uerj.br/v20nesp2/v20e2a13.pdf>
9. Bivanco-Lima D, Moura JC, Tirico SHN, Mazzeo MR, Cunha MT, Sperandio RA, et al. Health promotion and accident prevention in childhood: an intervention of medical students. *Rev Med (São Paulo)*. 2013 Apr/June;92(2):119-27. Doi: <http://dx.doi.org/10.11606/issn.1679-9836.v92i2p119-127>
10. Rodrigues JP, Pereira ES, Moura MRP, Pereira Neta MHM, Rodrigues SR, Silva ABB. Nutritional status and the effects of health education for pre-school children: a literature integrative review. *Rev Enferm UFPI*. 2016 Apr/June;5(2):53-59. Doi: <https://doi.org/10.26694/reufpi.v5i2.3833>
11. Leite MMJ, Prado C, Peres HHC. Educação em saúde: desafios para uma prática inovadora. São Caetano do Sul: Difusão Editora; 2010.
12. Soratto J, Pires DEP, Cabral IE, Lazzari DD, Witt RR, Sipriano CAS. A creative and sensitive way to research. *Rev Bras Enferm*. 2014 Nov/Dec;67(6):994-9. Doi: <http://dx.doi.org/10.1590/0034-7167.2014670619>
13. Fadel CB, Alves FBT, Fillus TM. Intellectual scavenger hunt: extension tool for health education. *Em Extensão*. 2015 Jan/June;14(1):106-15. Doi: http://dx.doi.org/10.14393/REE_v14n12015_rel02
14. Lima MM, Vendruscolo C, Prado ML, Reibnitz KS. Teaching training in construction of knowledge to teach: integrative review. *J Nurs UFPE on line [Internet]*. 2015 Jan [cited 2017 May 16];9(1):220-7. Available from: http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/5363/pdf_6941
15. Chagas CC, Matumoto FS, Gallo GO, Kita MT, Lozza SI. A importância da lição de casa no desenvolvimento da aprendizagem da criança em processo de alfabetização. *Memorial TCC Caderno Graduação [Internet]*. 2016 [cited 2017 May 16];1(1):473-88. Available from: <https://memorialtcccadernograduacao.fae.edu/cadernotcc/article/view/30/28>
16. Bomfim AMA, Souza MDCA, Rocha MCG, Porto VFA, Lima EB, Mesquita TM. Recurso lúdico no processo de educação em saúde em crianças de escolas públicas de Alagoas: relato de experiência. *Interfaces Rev Extensão [Internet]*. 2015 July/Dec [cited 2017 May 16];3(1):117-21. Available from: <https://www.ufmg.br/proex/revistainterfaces/index.php/IREXT/article/view/108/pdf>
17. Medeiros ER, Costa AB, Santos PFBB. O cuidado à criança na educação infantil: um

relato de experiência. Rev Recien [Internet]. 2016 [cited 2017 May 16];6(16):32-47. Available from: <http://www.recien.com.br/index.php/Recien/article/view/133>

18. Zanettini A, Souza JB, Franceschi VE, Finger D, Gomes A, Santos MS. Sing away sorrow, cast away care: an experience report on the use of music as an instrument for child health promotion. REME rev min enferm. 2015 Oct/Dec; 19(4):1060-4. Doi: <http://www.dx.doi.org/10.5935/1415-2762.20150079>

19. Choun TTA, Ferreira NS, Kubo CH, Silva EG, Huhtala MFRL, Gonçalves SEP, et al. Evaluation of the knowledge and behavior of the patients in dental treatment in relation to caries, periodontal disease and oral hygiene. RPG Rev Pós Grad [Internet]. 2011 July/Sept [cited 2017 May 18];18(3):140-7. Available from: <http://revodonto.bvsalud.org/pdf/rpg/v18n3/a03v18n3.pdf>

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