HEALTH EDUCATION AND CULTURE IN THE PERSPECTIVE OF PAULO FREIRE

ABSTRACT

Objective: to describe the experience of holding a seminar to discuss the theoretical and philosophical assumptions of education and culture in health, in the perspective of Paulo Freire. Method: qualitative, descriptive study, from the accomplishment of an academic seminar, in a discipline of the Master Course in Nursing, with teachers and students. The seminar was divided into two parts. Audiovisual resources, dramatization and reading of scientific articles were used. The reflections were based on the theoretical-methodological bases of the educator Paulo Freire, through the "Culture Circle". Results: the seminar promoted the broadening of the discussions on these issues in the academic environment, favoring the understanding that education and culture are indissociable aspects and of fundamental relevance in the area of health. Conclusion: the dynamic and dialogic seminar, provided support for trainers and professionals to rethink the model of education applied in educational institutions and health services, with a view to developing liberating, horizontal practices that value the cultural aspects of people. Descriptors: Health Education; Culture; Nursing; Teaching; Education, Nursing, Graduate; Methods.

RESUMO

Objetivo: descrever a experiência da realização de um seminário de discussão dos pressupostos teóricos e filosóficos de educação e cultura em saúde, à luz de Paulo Freire. Método: estudo qualitativo, descritivo, a partir da realização de um seminário acadêmico, em uma disciplina do Curso de Mestrado em Enfermagem, com docentes e discentes. O seminário foi dividido em duas partes. Utilizaram-se recursos audiovisuais, dramatização e leitura de artigo científico. As reflexões pautaram-se nas bases teórico-metodológicas do educador Paulo Freire, por meio do "Círculo de Cultura". Resultados: o seminário propiciou a ampliação das discussões sobre essas temáticas no meio acadêmico, favorecendo a compreensão de que a educação e a cultura são aspectos indissociáveis e de fundamental relevância na área da saúde. Conclusão: o seminário, dinâmico e dialógico, ofereceu subsídios para que formadores e profissionais repensem o modelo de educação aplicado nas instituições de ensino e nos serviços de saúde, com vistas a desenvolver práticas libertadoras, horizontais e que valorizem os aspectos culturais das pessoas. Descriptors: Educação em Saúde; Cultura; Enfermagem; Ensino; Educação de Pós-Graduação em Enfermagem; Métodos.
Education, with its focus on health, in a traditional conception, refers to the set of technical knowledges regarding the use of health professionals in the sense of their action in the health-disease process and the engagement of individuals, families and the community for improvement of quality of life. Based on the model of curative medicine, this conception presupposes a linear learning, based on the transmission of knowledge that, like all phenomena involving human society, suffers the influence of historical-social constructions.

The idea of actions of health education as a pedagogical practice was organized, for the first time in Brazil, in the second half of the nineteenth century, extending until the beginning of the twentieth century. It was a vertical, controlling and normative education, with a biological conception of the disease, which aimed at behaviors and habits considered healthy. It was a hygienist-eugenist conception, and aimed at the development of a healthy and productive race, considering people incapable of any understanding of health. Some practices included, confinement of patients for disinfection, blame of individuals, control of communicable diseases and health guidelines through the distribution of educational leaflets. However, most of the population, at the time was illiterate, which resulted in incomprehension of information, since public policies were based on vaccination campaigns.

At that time, concern for the health of the poor was not necessarily due to the question of social law or human dignity, but was linked to the dangers they could pose due to poor hygiene and unhealthy housing, such as spread of contagious diseases. The hygiene discourse aimed at health policy actions. This policy turned its attention to the urban port centers, where the commercialization of merchandise was concentrated.

In the middle of the twentieth century, the State was forced to structure the first systematic interventions of health education extended to the popular classes, in order to combat the epidemics of yellow fever, smallpox and plague. However, the then education sanitary, prescriptive and informative, had the idea that the disease was biological, and also related to personal hygiene. Thus, health education aimed, to teach new habits, that could stimulate health and avoid diseases. Educational practices were started, by health professionals, with emphasis on the creation of a health conscience, as well as the fight against infectious diseases. Joining efforts to achieve the goals, the first health platoon, was created that assisted in the maintenance of hygiene in schools, and the preparation of teachers of the public network to be educational agents of health.

Health education began in the 21st century and has broadened conceptions and concretized spaces over the years. It is based on the expanded concept of health, aiming at the transformation of knowledge and practices, in a context in which subjects become the actors of their care with autonomy and responsibility. It began to look to the prevention of diseases and health promotion, horizontally, using physical spaces to carry out health education with a view to health promotion.

From the 70's, a series of popular movements began to question the repression they lived in and to demand better living conditions, making the health sector awake at this time, to a culture of relationship with the popular classes, which represented, a rupture with the authoritarian and normalizing tradition of health education, because, until then, they were only actions subordinated to the interests of the political and economic elites of Brazil.

In this scenario, the movement of popular education in health, which, mobilizes individual and collective autonomies, opens up the alterity between individuals and movements in the fight for rights, contributing to the expansion of the meaning of citizenship rights and instituting growth and change in life of people. This is endowed with relevant philosophical values regarding the search for an effectively liberating education, evolving the understanding of health to the encounter of the positive concept of individual, collective, social, cultural and political consciousness and transformation.

Paulo Freire was a pioneer of the work of theoretical systematization of Popular Education. The educator spread, throughout the world, a humanistic and liberating pedagogy, leading people to think about the need for change, overcoming and autonomy.

**OBJECTIVE**

- To describe the experience of holding a seminar to discuss the theoretical and philosophical assumptions of education and culture in health in the light of Paulo Freire.
A qualitative, descriptive study that reports the experience of the accomplishment of an academic seminar on education and culture in health, linked to the subject Theoretical and philosophical Foundations of the thought of Paulo Freire: Itinerary of Research and Practice, of a postgraduate program in Nursing, from a public institution in the Southern region of Brazil. The objective of this discipline was to know the philosophical currents; the philosophers who supported Freire's thought and work, as well as the conceptual basis of the educator; to critically reflect the theoretical-philosophical and political aspects of Freirean education; to know and deepen the experiences of the theoretical and methodological assumptions of Paulo Freire, focused on the health area, adding to this, the development of critical thinking in relation to health care, research and reflective education.

The seminar took place in June 2016, with a duration of three hours, with the participation of two teaching coordinators, ten students enrolled/linked to the discipline and five post-graduates who planned and mediated the meeting. Guided by the dialogue and unveiling of the theoretical and philosophical presuppositions of education and culture in Paulo Freire, the space/environment was increased with some resources, such as the circular organization of the chairs facilitating the look and the exchange with the group, local/anthem of the municipality and stimulating the beginning of a culture-oriented reflection; billet cushion characterizing the cultural origins of the city and the energy element (colored mandala) providing a welcome encouragement to the people who were constituting the group.

In the search to enhance and deepen the discussions, the seminar was divided into two parts, each part consisting of four moments. In relation to the first part, it stands out: 1st moment - presentation of the lesson plan; 2nd moment - (re) visitation of reality in health care, whose purpose was to promote connections between the daily health care and the theme of the seminar, based on a dramatization with volunteers from the group, elucidating fragments of a banking education and a liberating education about the assistance to the mother, child and family, in the surroundings of the puerperium, rescuing the cultural knowledge and practices of care; 3rd moment - socialization of the connections triggered after the dramatization, seeking to approach popular knowledge and scientific knowledge, dialoguing on the theoretical and philosophical assumptions of education and culture in Paulo Freire; 4th moment - presentation of two excerpts from the film "The smile of Monalisa", the first, characterizing a traditional education model and the second showing a liberating, critical and reflective model of education. The film was used as a tool for closing the discussions of the first part of the seminar.

In addition, after a brief interval the second part of the meeting began, constituting: 1st moment - division of three subgroups to deepen the concept of culture, from the reading and discussion of conceptions of different epochs and authors, to emphasize "Analysis of the concept of culture until the middle of the twentieth century", "The concept of culture from the perspective of symbolic/interpretative anthropology" and "Relation of the concept of culture and education proposed by the Freirean approach". For this, the article "The necessary interface between nursing, health education and the concept of culture" was used, as reference. 10 2nd moment - sharing of the discussions and synthesis of the subgroups, making a reflection with the larger group about evolution historical context of the concept of culture and different aspects, rooting the conception in Paulo Freire; 3rd moment - presentation of an excerpt from the documentary "Benzedeiras de Florianópolis: talk about healing through the bendizer", with the intention of rescuing the popular knowledge and practices of health care that emerged in the discussions about education and culture; 4th moment - closing of the seminar, with a brief evaluation.

To support the discussions, a framework was developed characterizing the types of education directed to health, composed of hygiene education, health education, health education and popular education in health, showing some differences and historical evolution of each model. This framework was made available, in a printed form, for the group and allowed to sharpen the reflections, looking, more critically at the types of education, relating to the daily practice in health.

It should be emphasized that this experience report used, as instruments for data collection, participant observation and audio recording, after signing the Free and Informed Consent Term(FICT) by the members of the group. The anonymity of the participants and the secrecy of the information was guaranteed, according to Resolution 466/2012 of the National Health
Initially, with the activity of dramatization of a health care situation, considering the culture and representing both a perspective of banking education, and a perspective of liberating education, the group was able to observe the contrasts between both and to recognize its main characteristics. In this sense, referring to banking education, the group identified: authoritarianism of the health professional; devaluation of users' feelings and beliefs; professional, normative, positivist, professional stance; informational education; lack of empathy on the part of the professional; power relationship through professional knowledge; focus on biological aspects. Whereas in relation to liberating education, the group emphasized: reception, listening and availability on the part of the professional; valuing users' beliefs and explaining other possible behaviors; professional commitment to people; dialogue; power and shared knowledge; trust relationship.

From these observations, emerged collective reflections and discussions, in which participants recognized that all professional action in the area of health involves education and that the characteristic elements of banking education and liberating education are present in the daily care of health. However, they still perceive a predominance of banking education and the biomedical model, where valid knowledge is only that of the professional, since it is a scientific knowledge (known, tried and tested).

It was evidenced that, although assuming a practice based on the biomedical model is more comfortable and safe for the health professional, it does not favor the bond, does not guarantee a change in behavior, nor does it meet the real health needs of the population. Thus, it is necessary for health professionals to seek liberating education, considering, respecting and valuing different knowledge and cultures; establishing dialogue; avoiding the (pre) concept; knowing the reality and the context in which the subjects are inserted; and encouraging popular participation for the necessary transformations.

Throughout these discussions, the group also indicated that there is a relationship between the practice of health professionals and their model of training. Thus, when presented, in the sequence, two excerpts from the film "The smile of Monalisa", which depicts two classes in higher education performed differently by the teacher, considerations about the model of teaching in health emerged again.

The participants expressed that they notice advances in the model of professional formation, starting from a banking education towards liberating education, but that, in this walk, are some difficulties, such as: students accustomed to banking education from childhood, causing a shock between the predominant model of education in basic/middle and higher education; teachers who have experienced the banking model throughout their training; ignorance and prejudice about the methodologies used in liberating education. However, they believe in the potential of liberating education, which is based on the dialogue between teacher and student, allowing the student to express and think, instigating his critical and reflective thinking about reality, with a view to its transformation. According to this conception, the teacher needs to know the students, their culture and the context in which they are inserted, in order to promote meaningful learning.

Subsequently, with the subdivision of the group to read fragments of texts on culture, based on different conceptions, followed by synthesis and sharing in the large group, they found different concepts of culture and how these are reflected in the professional performance. They recognized that, in education and health care, culture is not properly respected and sometimes ignored, even though it is implicated in these processes. To close the moment, there was an excerpt from the documentary "Benzedeiras from Florianópolis: talk about healing through the blessing" with the intention of portraying and valuing the local culture.

At the end of the seminar, participants received positive feedback regarding their implementation and contribution. It was observed that each moment promoted discussions and reflections that were complemented and, thus, contributed to the group's unveiling about the theoretical and philosophical assumptions of education and culture in Paulo Freire and its interface with health care and teaching.

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DISCUSSION

When reflecting on the results pointed out, it is perceived that there is a clear and important difference between the two perspectives of education. The first is banking
education, represented by a strong authoritarianism and concomitant devaluation of the culture and beliefs of the other, and the second, a liberating education prepared for a sincere and proactive reception together with an active and dialogical listening. According to Brighente and Mesquida,\(^\text{12}\) the banking conception of education denies dialogue, being exemplified by the practice of few words, where the teacher “deposits” (hence the idea of “banking”) the contents in their heads, as if they were containers. Completed. It also reinforces, that banking education is not liberating, but, oppressive, denying the freedom and awareness of its students and valuing a vertical and authoritarian relationship, not allowing criticism or questioning of learners.

Linked to the experience of the seminar described in this study, a strong and respectful relationship between liberating education and the valorization of cultural practices was also noticed, stimulated by the educator Paulo Freire in many of his works. Freire contributes with reflections and practices about the liberation of the oppressed, valuing their past and their beliefs, highlighting the importance of dialogue, “of the conscientization, of the man-subject, and not of the object man, but of the historical individual who can and must interfere in the course of its history.”\(^\text{12, 14}\)

Over the last few years, in the direction of the necessary changes in health care and education models, professional health training has sought closeness to Paulo Freire's Critical Pedagogy, in order to meet the real demands of health care of the population, guided by the principles and guidelines of the Unified Health System (UHS).\(^\text{13}\) This is because this pedagogical proposal guides education as a possibility for the transformation of social reality; thus, in the area of health, beyond technical knowledge, it develops the political and ethical engagement in the professional performance.\(^\text{14-5}\)

In this sense, during the seminar, the group reinforces this relationship between the training and the practice of health professionals, since, it is often reproduced, both in the assistance, and in the teaching practice, attitudes that reflect the models of education and health with which we had contact. The challenge of training professionals imbued with a new and different approach to health is based on the need for new health practices that are more horizontal and focused on work processes. In this sense, the training practices need to be designed in line with the diversity of the social and cultural conditions of the learners, proposing a methodology that adapts to the heterogeneity of situations, constructing contents and procedures appropriate to the needs and culture of the interested parties.\(^\text{16}\)

With this, it can be seen that the contributions pointed out with the liberator model meet the scenarios in which is sought as an ideal, mainly due to its characteristics based on autonomy, strengthening and respect for personal skills, converging with the proposals of our current health system.

### CONCLUSION

The seminar allowed the deepening and understanding of the theoretical and philosophical assumptions of education and culture in Paulo Freire, as a result, circle experience brought the members of the group closer together, promoting critical-reflexive dialogue geared towards professional, care and teaching, in order to see the individual, family, social and cultural aspects, and their influence on the life and health of each subject.

It was perceived that education and the culture are indissociable aspects and of fundamental importance in the health area, either in the academic space or in the popular/community territory, as it allows, the professional, to broaden the view on the processes of health care and the formative processes. In addition, it was identified that there is still a predominance of banking education in educational institutions and the biomedical/curativist model in health services, both marked by prescriptive actions, vertical practices and a monopoly of scientific knowledge, being a challenge for professionals who believe and fight for liberating, horizontal and inclusive forms of education and health care, with recognition and appreciation of cultural aspects, integrality and humanization.

The experience, as a whole, made possible gains for the group that participated, adding knowledge, reflections, questions, expansion of Freirean concepts and oxygenation of the dream of an education and health, that are coherent with its conceptual essence and philosophical presuppositions. For the mediators, the seminar and the positive return of the members symbolized the adequate theoretical and methodological approach during the meeting, represented by the depth of the discussions and reflections, as well as the critical unveiling involved in the concepts of education and culture in Freire.

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