

Continuing health education: theory that leads to good professional practice

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ABSTRACT

In Brazil, there was a growth in the occupation scenario for the teaching nurse, which ended up being exposed by the growth of the numerous nursing teaching institutes, which in turn, becomes essential that there is a debate on aspects inherent to the teaching activity for nursing. This is a bibliographic review, where the following guiding question was elaborated: What impact does permanent education in health have on professional practice? The bibliographic survey was carried out from March to April 2019 to 2022. The National Curriculum Guidelines for Teaching Undergraduate Nursing present, for example, in their Art. 4th, Continuing Education, treating it as one of the skills necessary for nurses. In this way, the close connection of the PNEPS with what the National Curriculum Guidelines (NCGs) value for the undergraduate health course, highlighting the Nursing Course, is perceived.

Keywords: Permanent education, Health, Nursing.

1 INTRODUCTION

The training of the Nursing Graduate for being a Bachelor's degree course ends up not having the subjects that are more specific in a more in-depth way focused on working in teaching. What ends up being reflected in the pedagogical methodology discipline that is seen in undergraduate nursing courses. The nurse's training is directed to the most assistance areas and that are inherent with the area, whether this assistance is focused on primary care or that which is applied at other levels of health care. In Brazil, there was a growth in the occupation scenario for the teaching nurse, which ended up being exposed by the growth of the numerous nursing teaching institutes, which in turn, makes it essential to debate aspects inherent to teaching activity for nursing (AZEVEDO *et al.*, 2018).

Health education belongs to a method focused on interventions directed to the process of promotion, prevention, treatment and rehabilitation. In this way, it should help individuals to know not only to guard their health before leadership, but also to recognize the reasons for illness, understanding



that its occurrence is not only a lack of the development of conduct or instruction of health specialists. In our country, health education has two precepts. The first belongs to the actions of preventive and curative aspects in which they aim to achieve health as well as the confrontation of diseases; in the second, the ways of health promotion as a collective structuring of health as well as well-being itself. The provision of preventive and therapeutic tools to achieve health and confront pathology is related to the foundations that govern society today as well as its culture, or rather, they are founded on the incessant formulation permanently restored of various services, essential in the scientific and technological environment, presented for the use of individuals. The rise of health, understood as the reciprocal method of any citizen within the scope of his daily existence and not only of individuals at risk of becoming ill, when he wishes to conquer the life possibilities of the community, encompasses, among other objectives, eliminate or reduce the incidence of diseases resulting from the lack of these possibilities (BITTENCOURT; VILELA; NUNES., 2020).

2 METHODOLOGY

This is a literature review, where the following guiding question was elaborated: What is the impact of permanent health education on professional practice?

The bibliographic survey was carried out from March to April 2019 to 2022 in three indexed databases: Latin American Literature in Health Sciences (LILACS), Scientific Electronic Library Online (SciELO) and Medical Literature Analysis and Retrieval System Online (MEDLINE). For the survey of articles, the controlled descriptors of the Virtual Health Library were used through the Descriptors in "Permanent education" and "health" and "nursing".

The criteria used for the selection of the sample were: complete articles available electronically, in Portuguese, English or Spanish; articles that address the theme of continuing education; research carried out in Brazil on the theme and published from 2014 to 2020; and that has at least one nurse researcher among the authors. As exclusion criteria, repeated articles were removed from the study analysis. In the initial search 100 articles were found, however, of these only 10 bibliographic materials answered the guiding question and defined the final sample of this review.

3 RESULTS

Health education is not limited only to the professional sphere, that is, health units, professionals can work in schools and daycare centers, for example, with teachers and teaching directors, addressing the various topics in collective health, first aid, sexuality among other topics, according to LIMA (2019), it was seen that teachers of primary grades did not have the necessary knowledge of first aid, especially musculoskeletal trauma, after evaluating the results saw the need to perform an intervention through health education.



Health education, seen from the Ottawa Declaration as necessary for the realization of health, consists of a heterogeneous area and, because of this, has suffered interference from areas such as anthropological sciences, biological sciences, communication, nursing science, medical sciences, psychology and other sciences. However, it is exactly this multidisciplinary value which has been contributing to its success. The lack of a certain health education aimed at the insufficiencies in a global way and concomitantly characteristic, the lack of preparing people for an acquisition of knowledge in the course of their life, with the perspective of monitoring and intervening above their touching health causes. Such a point of view leads health education from a certain ability in a curative or even preventive way, destining it to a promotional disposition, which presumes, in the same way as recommended since Alma-Ata, a certain concordant vision of health (MARTINS, 2019).

The National Policy for Permanent Education in Health (PNEPS), established by means of Ordinance 198/GM/MS, of February 13, 2004, was a decision that set the discussions regarding professional construction for health work. Over time, the policy took its guidelines published in Ordinance GM/MS No. 1,996/2007, having as a basis the principles and guidelines of the Unified Health System (SUS), since this is the provision for the training of human resources in health. The PNEPS, therefore, assumes the figure of learning at work, associating teaching and learning in the day-to-day work in health. Based on the establishment of this Policy, Permanent Education in Health (EPS) began to be considered in various sectors of activity. Thus, few points the EPS refers to the professional scenarios, we can give as an example the provision of training, training and realistic practical activities (RIBEIRO, 2018).

The National Curriculum Guidelines for Undergraduate Nursing Education present, for example, in its Art. 4, Permanent Education as one of the competencies necessary for nurses. Thus, the close connection of the PNEPS with what the National Curriculum Guidelines (DCNs) for the undergraduate health course, highlighting the Nursing Course, is perceived. We have the changes in the socioeconomic aspect where the population has passed, the development of the elements of risk of the natural nosology, bring coated changes in the conception of health and, in a very natural way, in the natural way of educating towards health. Weighing in conceptions of health education proposed by the National Education Plan in force in Brazil, the adequacy of Education about the peculiar member of the human being includes it in total follow-up for human advancement, complementing for this purpose the training on its variable forms, together with the process of social integration and personal satisfaction. In this vast scenario, Collective Health emerges as a characteristic content of the Undergraduate Course (MARTINS, 2019).

Thus, through this discussion of direct and indirect health actions, everyone was harmed, as the Ministry restricted this area of education to a single department, called the National Health Foundation, which had no structure for educational actions to be carried out. It was only in 1996 that health



education activities were again emphasized by the Ministry, due to the fact that thousands of elementary schools (integrated into the MEC's TV Escola network) received educational guidance on a weekly basis, through the Health at School project. In this sense, in 1998 an important step was taken for actions in education, as several proposals emerged, which expanded the health project at school to a health education program. At all times, dealing with health education has always been a great challenge, all the failures that occurred in the poor transmission of guidelines to the population were motivated by the lack of structure and the little investment in this area. Brazilian health services have always had a care model that favored curative actions, placing little emphasis on preventive practices; thus, the educational actions of these services aimed to modify and eradicate the culture and experiences of individuals, without considering their experiences (FERNANDES, 2019).

4 CONCLUSION

Thus, in the face of any type of educational action, in the form of lectures or courses, the final word was always the professional, however, the population only accumulated doubts, insecurities, generating lack of knowledge about their own health, consequent abandonment of their treatment and also return several times the health units. However, educational practices began to take on a new meaning based on the principles of the SUS, where the right to health and the individual's ability to choose their own well-being were considered fundamental axes in this new process. In this sense, knowledge began to be shared, where users and professionals exchange life experiences, accept beliefs and values, no longer try to judge attitudes, but to understand them. In short, such attitudes are revealed in the understanding of the needs of each individual at each moment of their life (FREIRE, 2019).



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