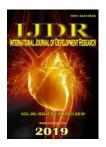


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# **ORIGINAL RESEARCH ARTICLE**

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## POTENTIALITIES AND CHALLENGES OF THE NURSE AS A HEALTH EDUCATOR IN PRIMARY CARE

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### **ABSTRACT**

Objective: To analyze the choices available in the literature on the role of nurses as health educators in primary care. Materials and methods: This is an integrative review study. The search was conducted in the databases, Latin American and Caribbean Literature in Health Sciences (LILACS), National Library Medicine National Institutes of Health (PubMed), and the Database of Nursing (BDENF). The following descriptors were used: Primary Attention; Role of the professional nurse; Health education; health promotion. Included in the research are articles written in the last 05 (five) years, original that contemplate the theme, available in full, free and online, in Portuguese, Spanish or English. Excluded theses, dissertations; articles that did not meet the inclusion criteria. The analysis of the findings was performed through Bardin's proposal. Results: Ten articles on the role of the nurse as an educator were found. Three studies talked about the importance of the nurse in the nursing consultation in the FHS, two on the work of the nurse in the FHT marked by the work overload, one on the work process in the FHT, two on the educational actions in the FHT, and two refer - educational health actions in schools. Conclusion: The study demonstrated the lack of knowledge of nurses regarding the importance of actions related to health education. Since educational practices are an important tool for health promotion and prevention, it is fundamental that the nurse empowers these attributions and includes actions directed to health education in their routine work.

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# **INTRODUCTION**

In order to break with the history of public health with a focus solely curativist, hospital-centered and doctor-centered (FIGUEIREDO *et al.*, 2010), the movement of Health Reform in Brazil emerges, a social movement that consolidated in 1986 with the the National Health Conference, where new ideas regarding changes and transformations in the health area are beginning to be considered and discussed, which have their results incorporated into the Federal Constitution of 1988 (BRASIL, 2007). With the establishment of the Unified Health System in 1988 (SUS), a new political and organizational formation was defined for the reorganization of health services and actions, which made it possible to broaden the view of the community (BRASIL, 2010).

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In 1996, after eight years of operation of SUS, the Ministry of Health (MS) regulates the Family Health Program (FHP), now the Family Health Strategy (ESF), as a device to reorganize the care model (BRASIL, 2012 ). This care model becomes one of the most important changes in the structure of public health in Brazil, mainly because it seeks the inversion of the previous model, going in search of integral attention to the people and their needs, aiming to absorb the problems less defined, using of different social spaces, such as health centers, schools and homes, aiming to integrate professionals and community (STARFIELD, 2002). The ESF seeks to work on a multi professional basis, thus increasing the possibilities of nursing to operate at different levels of health care, either through health education, where it will act clarifying and orienting on health related issues, or promoting and recovering health (BACKES et al., 2012). It is noticed that the nurse has a fundamental role in this process, since he can perform activities aimed at health education, within his team to coordinate, supervise and also seek means and actions capable

Figure 1. List of articles selected for data analysis

Nº	AUTHOR / YEAR	TITLE	Data Base
E1	Souza AF, Costa LHR 2015	Knowledge of women on HPV and cervical cancer after nursing consultation	LILACS
E2	Caçador BS et al 2015	Being a nurse in the Family Health Strategy: Challenges and possibilities	BDENF
E3	Salum GB, Monteiro LAS 2015	Health education for adolescents at school	LILACS
E4	Souza KR et al 2015	Popular education as a participatory tool for gynecological cancer prevention: Perception of women	LILACS
E5	Fonseca RSB et al 2015	Assistive technology in promoting the health of the elderly	BDENF
E6	Camargo RAA, Anjos FR, Amaral MF 2013	Family Health Strategy in primary health actions for patients with systemic arterial hypertension	LILACS
E7	Silva LB, Soares SM 2013	Communication in the practices of coordination of socio-educational groups in family health	LILACS
E8	Duarte SJH, Ferreira SF, Santos NC 2013	Nurses challenge of the Family Health Strategy in the implantation of the adolescent health program	LILACS
E9	Roecker S, Nunes EFP, Marcon SS 2013	The educational work of nurses in the Family Health Strategy	LILACS
E10	Nunes GBL, Barrada LP, Landim ARE 2013	Concepts and practices of nurses in the Family Health Strategy: Men's Health	<b>BDENF</b>

of updating and empowering his team for this type of activity generating both individual and collective change (RANGEL et al., 2011). Thus, it is important to emphasize that in primary care nurses are given the opportunity to develop and implement educational strategies using local resources and diverse knowledge, making dialogue with the population relevant to the continuity of care of each individual. it is up to nursing to educate in health, to guide and to establish the population's awareness regarding their health-related choices, thus contributing to the better health status and quality of life of the population (SOUZA et al., 2010). Considering that these educational activities seek actions that benefit the promotion of health, prevention of injuries and rehabilitation of the users and understanding the important role of the nurse as a professional that can transform its practice through education presents itself as a guiding question: "What challenges and potential of the nurse as an educator in primary care? " In this sense, it is believed that this research will help the nurses to know their importance as a health educator. To answer this question, the study aimed to analyze the available evidence in the literature about the challenges and potential of the nurse as a health educator in primary care.

# MATERIALS AND METHODS

This study was methodologically characterized as an integrative type review. The integrative review of the literature consists of the construction of a broad literature review, contributing to discussions about methods and results of research, as well as reflections on future studies. The initial purpose of this research method is to obtain a deep understanding of a certain phenomenon based on previous studies (SOUZA; SILVA; CARVALHO, 2010). According to the same author, this type of review must occur in six stages, being: identification of the theme and selection of the hypothesis or research question for the elaboration of the integrative review; establishment of criteria for inclusion and exclusion of studies / sampling or search in the literature; definition of information; evaluation of studies included in the integrative review; interpretation of results; presentation of knowledge review / synthesis. The data collection stage was carried out in March 2018. In order to guide the development of the study, the following question was used as the guiding question: "What are the challenges and potentialities of the nurse as an educator in primary care?" The strategy for identifying and selecting the studies was to search for indexed publications in the Latin American and Caribbean Literature in Health Sciences (LILACS), National Library of Medicine of the United States of America (MEDLINE), and the Banco de

Nursing Data (BDENF). Inclusion criteria were articles that were written in the last five years, original, in the Portuguese, Spanish and English languages and available in full, free and online. Considering the specific characteristics of the databases, the following descriptors in health sciences (DeCS) were used as search strategies: family health strategy, public health nursing and health education. As exclusion criteria, we chose not to use dissertations, theses and articles that did not meet the inclusion criteria. The search for publications occurred in March 2018, a refinement was made using the inclusion and exclusion criteria of repeated publications, making a total of twenty - four articles in this phase. Subsequently, the titles and abstracts of the articles were read carefully, and fourteen articles were excluded because they did not fully meet the purpose of the study. Thus, ten articles were selected for final analysis that m et al., I the criteria and fit the objective of this study, which were part of this research. A detailed reading of each of the articles obtained in the data collection was performed. For the organization of the data, the researchers elaborated an instrument of data collection containing: title, author, periodical, year of publication, method of analysis and objective. The analysis of data occurred according to Bardin's content analysis, which goes through three phases, such as the pre-analysis, which is the stage of elaboration of indicators for the final interpretation, the stage of exploration of the material that would be the phase in which the transformation of raw data into coded material. The classification and aggregation of data is done by choosing theoretical or empirical categories that will command the specification of the topics and the treatment of the results obtained and interpretation that is the stage in which the researcher makes inferences and interpretations, based on his theoretical framework or other dimensions suggested by reading the material (BARDIN, 2009).

### **RESULTS**

The results can be observed in Figure 1, which presents a synthesis of them, with author, title, year of publication and database where they were found. Ten articles were found that addressed the role of the nurse as an educator. Being that of these, three talked about the importance of the nurse in the nursing consultation in the FHT, two addressed on the work of the nurse in the FHT marked by the overload of work, one on the work process in the FHS, two on the educational actions in the FHS, and two refer to educational health actions in schools for adolescents. Studies 1, 3, 4 and 10 fit into the category: The educational practices of nurses in different settings, and other studies in the category: The work process and its

influence on the organization of groups. The largest concentration of publications is from the years 2013 and 2015, with five articles in the year 2013 and five articles in the year 2015. It should be noted that results were not obtained in the Med Line database and the ten articles found, seven were found in the LILACS database and three in BDENF.

# **DISCUSSION**

In order to enable discussion and following the adopted methodology, the thematic categories that emerged were: the educational practices of nurses in different settings, the process and work overload and their influence in the formation of groups focused on health education.

The Nursing educational practices in different scenarios: The selected studies identified the importance of nursing education at the nursing consultation at the FHS (E1, E4, E10). As Souza and Costa (2015) carried out a qualitative study with ten women in the age group of 21 to 50 years old who showed the lack of knowledge about the human papilloma virus and its relation to the carcinoma of the cervix after the nursing consultation in the FHS, which indicates a deficiency in the communication between nurse and patient during the consultation, identifying that the guidelines given during the consultations were not directed at the prevention of cervical cancer, but only aimed at collecting the material for cyto pathological examination. Similarly, Souza et al. (2015) conducted a study with fifteen women attending a health unit where they identified that the difficulties and feelings mentioned by women in the cytopathological examination are related to the lack of information provided by the health professionals who perform the Pap smear, though most of the women participants know the importance of performing the exam, and realize that education is a decisive factor for prevention, early diagnosis and treatment. According to Aguilar and Soares (2015), it is perceived as an important factor that the health professional knows the barriers created by the taboos and prejudices that women carry when they arrive for a gynecological appointment, in order to reduce the prevalence of women without coverage by the Papanicola exam strengthening the establishment of effective actions in the field of cervical prevention. Thus, the importance of a methodological approach that prioritizes listening and dialogue in nursing consultations, the establishment of affective bonding, empathy and involvement between nurses and women, which are essential elements in this relationship, in this way the professional will be able to identify the needs and stimulate the self care and co-responsibility of the users.

Thus, in relation to nursing consultations, it is worth emphasizing the influence that such activity allows to reach at the care level, being that the moment of the consultation allows the user and professional approach, starting from the promotion of the reception, listening and consequently favoring health education practices, in addition to providing a warm and trusting environment to the patient (SOUZA *et al.*, 2015). Nunes, Barrada, Landim (2013) interviewed ten nurses working at the FHT in the city of Teresina (PI) where the studies pointed out that the man also needs an incentive to be motivated to attend the FHS, because it is a group that is difficult to access , who ends up looking for the service in situations of illness already established. The study by Cavalcanti *et al.*, (2014) reinforces the importance of health professionals, especially nurses, to take advantage of all the

opportunities and not just to meet the male needs that motivated the search for the FHT, facilitating and making possible any and all man's access to programs such as hyperdia, immunization, continuing education, guidance on prevention and health promotion, using these moments to carry out orientated guidelines for health education. In this way it is emphasized that the nurse must be motivated and realize what their functions and duties are in the collective health environment.

Another study (E3) reveals the valuation of other spaces that nurses can occupy to carry out health education. Salum and Monteiro (2015) carried out an experience report of a group of students of the 9th period of Nursing, about an intervention of adolescent health education, promoted in a municipal school, in this study it was noticed that the work with adolescents to From the strategy of group building, it allows the creation of a space to share common doubts and exchange experiences through discussions between subject and professionals. Since the school is a favorable space / environment for educational practices in health generating a health system more integral by articulating school and health service. Adolescents revealed their demands and needs regarding health care in a more expressive way than in health services, because a new space of meeting and exchange between health and education was made available, thus strengthening the bond with these adolescents at the same time in which it promotes health (DUARTE, FERREIRA AND SANTOS, 2013). Considering that the nurse can occupy varied scenarios to carry out health education, such as nursing consultation for diverse population groups, among them, women, elderly, men, children, among others, the school then appears as a promising environment / spaces for the implementation of actions aimed at health promotion and prevention, making it essential for this professional to appropriate his / her duties and responsibilities for the purpose of carrying out and implementing health education actions whether within health spaces, in the school environment or in other appropriate places, such as community centers, churches and pastoral centers.

The work process and its influence in group organization: The educational actions in health are considered the main strategies of care for the promotion of health, prevention of diseases and injuries, enabling the development of the autonomy of the subject, through the exchange of knowledge. The studies show that when planning educational actions, nurses hope to achieve the objectives, achieve the valorization of their work, wish that the users actively participate in the actions and understand the orientations made, from this contribute to the improvement in the health conditions of all. reducing the rate of preventable diseases through educational actions (ARRUDA; MOREIRA, ARAGÃO, 2014). It is understood that health education is characterized by the purpose of educating from the construction of critical awareness of the citizen of the determinants that influence the health and disease process, in a way that involves the interpersonal exchange of knowledge between professional and user, in the search by the development of the autonomy and responsibility of the subject in the care with their health, making the actions directed to health education fundamental in the practice of the professionals of the health areas. In the study by Fonseca (2015), the development of audiovisual material as a tool to work in health education with the population, demonstrates that it is a methodology that can be explored in the work process and also used by health

professionals techniques to share knowledge with the population. The study demonstrates that it is fundamental for nurses to use creativity to make health education activities attractive to the community by creating strategies that dynamize care and adapt to the reality of each community or group. However, the nurse in the family health strategy assumes several functions, both in the administrative and care aspects, and is subjected to numerous challenges in his daily work, especially in what concerns the division of responsibilities and tasks, team relationships, work as available time and resources, thus accumulating assignments that interfere with the quality of service and the development of activities (CAMARGO, 2015). Regarding the work process, it is inferred that the nurses' work in the FHS is marked by the overload, which results from the need to provide answers to the demands related to the health unit and the population. The nurse has an important role to incorporate practices aimed at health promotion and prevention of diseases, identifying the risks in the community and intervening to solve them (Hunter 2015, SILVA, 2013).

Still on the analysis of Caçador et al., (2015), nurses bring in their reports that the work overload causes impacts on the quality of the care, occurring feelings of frustration and doubt about the full performance of the professional activities in the FHT. According to Pires et al. (2016), those professionals who work in teams tend to strengthen the bond with patients and when they include the participation of Community Health Agents (ACS), this contributes to reduce workloads within the service of health. The authors also elucidate that the organization of the work process in order to make educational actions feasible must be carried out collectively, compromising the entire team, generating satisfactory results in relation to performance, thus promoting good working relationships and patient recognition. As a way of organizing the work process and assisting in the educational practices of nurses, it is known that the National Policy on Permanent Education in Health brings a proposal for action capable of contributing to the necessary transformation of the training processes and pedagogical and health practices, also covering the organization of services (BRASIL, 2009). According to Roecker et al., (2013), permanent education strategies should be organized for the entire health team, considering that it is not only nurses that promote educational actions inside or outside health spaces, since the lack of information and lack of mastery appear in the speeches as a labor resource together with other professionals of the health team.

Corroborando Duarte, Ferreira and Santos (2013) reinforce the importance of the practices of permanent education with the purpose of favoring the construction of knowledge, methods / didactics that will improve and facilitate communication, exchange and trans disciplinarity between professionals and population, to improve the practices of the actions directed to the promotion of health in individual and collective level. With the purpose of awakening and broadening the professionals' view of continuing education actions, it is important that the development of programs / projects that seek to qualify and encourage these professionals, even during the academic training process and in the same way during their professional career, take place. As health professionals are qualified, many actions can be taken to improve and facilitate the population's access to health services, that is, to qualify professionals to assist in health education actions (MEDEIROS, 2015).

### Conclusion

The present study demonstrated that nurses do not have enough knowledge about the importance and dimension of actions related to health education, either within the health area or in different environments, which is not often due to the accumulation of these professionals' convergence with the lack of time available to plan this type of action. Considering that educational practices are an important tool for promotion and prevention of health, considering the proposal of integrality of care, it is elementary that nurses should be empowered with these duties and the spaces that can be used for such. It is necessary to include actions aimed at health education in its work routine and do not focus basically on care and management actions, this restructuring represents great challenges for health professionals, since it requires a certain domain to solve the issue "overload "To develop these activities, since these require prior organization and consequently occupy some time for their planning. It is suggested that other studies be done in order to highlight the educational practices of nurses in primary health care.

## **REFERENCES**

- AGUILAR RP, SOARES DA. Barreiras à realização do exame Papanicolau: perspectivas de usuárias e profissionais da Estratégia de Saúde da Família da cidade de Vitória da Conquista-BA. Physis. 2015 Jun; 25(2): 359-379.
- ARRUDA LP, MOREIRA AC, ARAGÃO AE. Promoção da saúde: atribuições do enfermeiro como educador na estratégia saúde da família. Ciência da saúde/ Enfermagem. Essentia, Sobral. 2014 Jun-nov; 16 (1): 183-203.
- BARDIN, L. Análise de Conteúdo. Lisboa, Portugal; Edições 70, LDA, 2009.
- BRASIL EGM, SILVA RM, SILVA MRF, RODRIGUES RP, QUEIROZ MVO. Promoção da saúde de adolescentes e Programa Saúde na Escola: complexidade na articulação saúde e educação. Rev. esc. enferm. USP. 2017; 51: e03276
- BRASIL, Ministério da Saúde. Entendendo o SUS. Disponível em: http://portalarquivos.saude.gov.br/images/pdf/ 2013/agosto/28/cartilha-entendendo-o-sus-2007.pdf
- BRASIL, Ministério da saúde. Glossário Temático: Gestão do Trabalho e da Educação em Saúde. Secretaria de Gestão do Trabalho e da Educação na Saúde. 2. ed. Brasília : Ministério da Saúde, 2012.
- BRASIL, Ministério da saúde. Memórias da saúde da família no Brasil. Secretaria de Atenção à Saúde, Departamento de Atenção Básica. Brasília-DF, 2010.
- BRASIL. Ministério da Saúde. Secretaria de Gestão do Trabalho e da Educação na Saúde. Departamento de Gestão da Educação em Saúde. Política Nacional de Educação em Saúde. Brasília: Ministério da Saúde; 2009.
- BACKES DS, BACKES MS, LORENZINI AE, BÜSCHER A.O papel profissional do enfermeiro no Sistema Único de Saúde: da saúde comunitária à estratégia de saúde da família.Ciência& Saúde Coletiva, Rio de Janeiro, 2012; 6.
- CAMARGO RAA, ANJOS FR, AMARAL MF. Estratégia saúde da família nas ações primárias de saúde ao portador de hipertensão arterial sistêmica. Rev Min Enferm. 2013 out/dez; 17(4): 864-872.
- CAÇADOR BS *et al.*, Ser enfermeiro na estratégia de saúde da família: desafíos e possibilidades. Rev Min Enferm. 2015 j ul/set; 19(3): 612-619.

- CAVALCANTI JRD, FERREIRA JA, HENRIQUES AHB, MORAIS GSN, TRIGUEIRO JVS, TORQUATO IMB. Assistência Integral a Saúde do Homem: necessidades, obstáculos e estratégias de enfrentamento. Escola Anna Nery Revista de Enfermagem, 2014 out- dez; 18. (4).
- DUARTE SJH, FERREIRA SF, SANTOS NC. Desafios de enfermeiros da Estratégia Saúde da Família na implantação do Programa Saúde do Adolescente\* Rev. Eletr. Enf. 2013 abr/jun;15(2):479-86.
- FIGUEIREDO NMA, TONINI T. SUS e PSF para Enfermagem: práticas para o cuidado em saúde coletiva. São Caetano do Sul; São Paulo, 2007.
- FONSECA RSB *et al.*, . Tecnologia Assistiva na Promoção da Saúde de Pessoas Idosas. RevEnferm UFPI. 2015 Jan-Mar; 4(1):74-80.
- MEDEIROS LC. Educação permanente como instrumento de mudança na rede de atenção à saúde com foco na estratégia saúde da família: um relato de experiência. Revista Ciência Plural, 2015; 1(1): 65-74.
- NUNES GBL, BARRADA LP, LANDIM ARE. Conceitos e práticas dos enfermeiros da estratégia saúde da família: saúde do homem. Revista Baiana de Enfermagem, Salvador, 2013 jan./abr. 27(1): 13-20.
- PIRES DEP, MACHADO RR, SORATTO J, SCHERER MA, GONÇALVES ASR, TRINDADE LL. Cargas de trabalho da enfermagem na saúde da família: implicações no acesso universal. Rev. Latino-Am. Enfermagem. 2016; 24: 2677.
- RANGEL RF, FUGALI MM, BACKES DS, GEHLEN MH, SOUZA MHT. Avanços e perspectivas da atuação do enfermeiro em estratégia saúde da família. Cogitare Enfermagem. Universidade Federal do Paraná Curitiba Paraná, Brasil.2011; Jul/Set; 16 (3): 498-504.

- ROECKER S, NUNES EFPA, MARCON SS. O trabalho educativo do enfermeiro na Estratégia Saúde da Família. Florianópolis, 2013; Jan./Mar; 22(1).
- SALUM GB, MONTEIRO LAS. Educação em saúde para adolescentes na escola: um relato de experiência. Rev Min Enferm. 2015 abr/jun; 19(2): 246-251.
- STARFIELD B. Atenção primária: Equilíbrio entre necessidades de saúde, serviços e tecnologias. UNESCO, Ministério da Saúde. Brasília-DF, 2002.
- SILVIA LB, SOARES SM. Comunicação nas práticas de coordenação de grupos socioeducativos na saúde da família\*. RevEscEnferm USP 2013; 47(3):640-7.
- SOUZA AF, COSTA LHR. Conhecimento de Mulheres sobre HPV e Câncer do Colo do Útero após Consulta de Enfermagem. Revista Brasileira de Cancerologia 2015; 61(4): 343-350.
- SOUZA KR *et al.*, . Educação popular como instrumento participativo para a prevenção do câncer ginecológico: PERCEPÇÃO DE MULHERES. RevCuid 2015; 6(1): 892-9
- SOUZA LB, TORRES CA, PINHEIRO PN, PINHEIRO A.K. Práticas de educação em saúde no Brasil: a atuação da enfermagem. Rev. enferm. UERJ; Rio de Janeiro, 2010 jan/mar; 18(1): 55-60.
- SOUZA MT, SILVA MD, CARVALHO R. Revisão integrativa: o que é e como fazer. Einstein. 2010; 8 (1):102-6.

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