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COMMUNITY EMPOWERMENT: MULTIPLIERS OF GOOD - INTEGRATING FAMILY AND COMMUNITY MEDICINE GRADUATES AND RESIDENTS IN A CURRICULAR EXTENSION PROJECT IN PRIMARY CARE

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Abstract: INTRODUCTION: The Extension Curricularization was established as a guideline for all courses in the health area in 2018. In Guarujá, at a university linked to the Mais Médicos Program, the curricularization project involved medical graduates with family medicine residents and community, in an action to train community leaders to work on spreading topics related to maternal and child mortality, given the epidemiological situation in the municipality. EXPERIENCE REPORT: All undergraduates were randomly distributed into groups and sponsored by one or two residents. In total, nine meetings took place and the training took place in a conversation circle model. DISCUSSION: The community leaders who participated in the training, brought the perceived demands and helped the health teams in planning actions to minimize the problems identified. Students became aware of the importance of the university in this scenario and their role as health professionals. CONCLUSION: It is understood that the project managed to achieve the estimated objective. The graduates reflected on the role of the doctor in promoting health and preventing diseases. The integration between student and resident awakened and stimulated interest in teaching among postgraduate students.

Keywords: Medical Education; Interdisciplinary Practices; Community-Institution Relations; Child mortality; Maternal Mortality

INTRODUCTION

RESOLUTION NUMBER 7, OF DECEMBER 18, 2018¹ established the guidelines for extension in higher education as “the activity that is integrated into the curricular matrix and the organization of research, constituting an interdisciplinary, political, educational, cultural, scientific, technological, which promotes transformative

interaction between higher education institutions and other sectors of society, through the production and application of knowledge, in permanent articulation with teaching and research”¹. The National Education Plan (PNE) adds that curricular extension projects must consider and prioritize action in “large areas of social relevance”².

To comply with the PNE guideline and recommendation, universities promoted a broad debate to include the resolution in the curriculum of students enrolled in the medical course. The objective of the discussions was the construction of projects consistent with the learning objectives of the subjects, which would enable significant learning of the skills and competencies proposed by them³ and which would have relevance and social impact². As a result, at our university, the result was the implementation of the Extension Curricularization in the basic cycle subjects: Health Communication; Public Health; Epidemiology; Pharmacology and Progressive Approach to Practice Program (PAPP).

Regarding the specific learning objectives of the Progressive Approach to Practice Program discipline, there is a direction to promote, through internships in municipal Family Health Units, called USAFA, that students interact with health professionals and the local reality, focusing on addressing health problems in the territory in which they are located. The PAPP is a longitudinal discipline in the curricular matrix of the Unoeste Medicine course, which accompanies students from the 1st to the 5th period. This internship provides students with access to theoretical and practical knowledge, inserting them into the daily life of the Health System (SUS), with a local-regional emphasis, so that they are able to contribute to a fairer, more equitable health care model., democratic, participatory and supportive, promoting the

subject's health, knowing and understanding the demands of the family and the context.

The objective of the discipline is also to decentralize the teaching of medicine in hospitals, using the Family Health Strategy (ESF) as a priority model for the (re) organization of PHC and all health care in the country⁴.

In this focus on local problems, it was pointed out that the municipality of Guarujá, as a whole, had high rates of infant mortality in recent years, becoming one of the worst, in the entire national territory. Infant mortality is an important health indicator that estimates the risk of a live birth dying before reaching one year of age. When we have high values, this indicator reflects precarious living and health conditions and a low level of social and economic development⁵.

To illustrate, in August 2022, when the curriculum extension project began, epidemiological surveillance and the maternal and child mortality committee recorded 18 deaths per 1,000 live births. These data are shocking and provoked outrage among everyone who was, in some way, involved with health in the city, such as the university. Analyzing the main causes of deaths, following the classification of the Ministry of Health, that is, early neonatal (0 to 6 days of life), late neonatal (7 to 27 days) and post-neonatal (28 to 365 days), from data from the Guarujá Maternal and Child Mortality Committee, to identify the most effective actions to prevent these deaths, the highest incidence of infant mortality was found in the late neonatal period, and among these, those with preventable causes were: 8 cases (1 case of Covid-19, 2 cases of Pneumonia, 1 case of Neurotoxoplasmosis, 1 case of milk aspiration, 1 case of malnutrition, 1 case of convulsive syndrome and 1 still in the investigation process). In this analysis, it was also found that: 36.4% of deaths occurred in mothers

with less than six prenatal consultations.

With this scenario, the university, as a higher education institution linked to the Unified Health System (SUS), installed in the city through the Mais Médicos Program (PMM)⁶, aiming to collaborate in the reduction of these indicators, installed its own committee formed by groups of work, involving teachers and students, with the aim of contributing, through research and extension activities, with projects that could directly and indirectly impact the reduction of this indicator.

EXPERIENCE REPORT

The project "Community empowerment, multipliers of good" was designed involving all students enrolled in the first period of university; the city's family and community medicine residents; medical preceptors; and managers of family health units (USAFA). This model enabled the application of transdisciplinarity as a pedagogical strategy, enabling complex connections and interconnections between those involved in different stages of knowledge, sometimes student learning with the preceptor, sometimes preceptor learning with resident, sometimes resident learning with student and so on⁷.

In parallel and just to contextualize, the Guarujá Family and Community Medicine Residency Program (PRMFC) began in the municipality in 2021, through a partnership between the university and Guarujá city hall, in line with the Mais Médicos law (Law n° 12,871 / 2013)⁶ and the ordinance that established the guidelines for the celebration of the Organizational Contract for Public Education-Health Action (COAPES) (Interministerial Ordinance Number: 1,127/2015)⁹— with the aim of qualifying and strengthening training in basic health areas⁶⁻⁹. The Family and Community Medicine (MFC) residency is present in Guarujá in three ESF units, namely:

Jardim Brasil Unit, Jardim Las Palmas Unit. The three health units are located in territories with widely different characteristics, both in sociodemographic and epidemiological data.

Therefore, the multidisciplinary project was created involving the disciplines Health Communication and PAPP. Both subjects aimed to: address the learning objectives proposed in the respective teaching plans; the objectives proposed in the National Curricular Guidelines for the Medicine Course (DCN, 2014)¹⁰; and promote actions that would train local leaders and community health agents to raise awareness in the community about the importance of prenatal care and care for newborns.

With this, these empowered leaders could act as a reference for the population in health promotion and prevention actions, educating and acting as a support network. Furthermore, it is possible to find in the literature the benefits of group and interdisciplinary work to acquire skills related to the communication process, which was one of the objectives of the Health Communication discipline⁸.

Going a little further, the project also aimed to stimulate the practice of preceptorship of family and community medicine residents, through integration with medical students, to increasingly stimulate knowledge multipliers in Primary Health Care (PHC). According to Vygotsky's Socioconstructivist Theory, social interaction and reflective practical activity are fundamental to the dynamic processes that involve teaching and learning, and thus, residents would be expanding the skills expected by professional practice on a daily basis¹¹.

Finally, the objective was also to approach humanistic content, through a non-traditional teaching environment, to promote autonomy and critical and reflective practice, contemplating the curricular guidelines of the medicine course¹⁰⁻¹²⁻¹³.

Following this approach, meetings were held between Unoeste professors, the USAFAS teams and the Working Groups of the university's internal committee to list the most relevant topics for health promotion and prevention of avoidable deaths resulting from lack or failure. in care, in addition to ways of involving the population, which could be carried out by medical students and MFC residents.

After frequent discussions and using data from the Guarujá Maternal and Child Mortality Committee, the themes listed were:

1. The importance of prenatal care and why it must be done early.
2. STIs during pregnancy
3. Teenage pregnancy

With the themes defined, a randomized division of students enrolled in August 2022 in the 1st term of the undergraduate course in Medicine at the Universidade do Oeste Paulista – Guarujá campus was carried out and they were distributed into 9 groups. Each group of students was sponsored by one or two MFC residents.

Three different dates were subsequently agreed for the project to be carried out. Firstly, on 10/14/2022, there were three groups, allocated to three USAFA to talk about topic 1.

The importance of prenatal care and why to do it early. On 11/04/2022, three other groups were located in three USAFA to talk about topic 2 - STIs during pregnancy. And finally, on 11/18/2022, the three remaining groups were allocated to the three USAFA to talk about topic 3 - Teenage pregnancy.

This way, 3 different dates were organized for the meetings to take place simultaneously in the 3 USAFA with the medical residency program present, thus totaling 9 meetings in 2022.

With the methodological procedures completed, the project was presented at the Municipal Health Council, in September

2022, with the aim of raising awareness among community leaders present for support and active participation in the project. At this stage, MFC residents also participated and were important in mobilizing the involvement of those present.

Following up, after the support of the Council, medical students began to prepare informative posters on the first 3 themes (The importance of prenatal care and why to carry it out early; STIs during pregnancy; and Pregnancy in adolescence) always supervised and guided by resident doctors and professors responsible for the disciplines.

At this stage, the managers of the participating health units (Jardim Brasil; Jardim Las Palmas; and Vila Rã) also began the process of identifying community leaders with the support of the Municipal Health Council and Community Agents. After this identification, the leaders were formally invited to meetings at the health units, aiming to contextualize the problem in focus and how - with their active participation - it could be mitigated.

With all stages of planning and preparation of the material completed, meetings between family and community medicine resident doctors, medical students, medical preceptors, managers, community leaders, community agents and responsible teachers began to be outlined with the purpose of promoting exchange of knowledge, multiplication of knowledge and strengthening of the sense of community.

RESULTS AND DISCUSSIONS

The meetings were held on 3 different dates and took place in the 3 health units simultaneously, but all maintained the same day of the week (Friday) and the same time (from 2pm to 5pm).

On 10/14/2022, groups 1, 2 and 3 were present at USAFAS Jd Brasil, Jd Las Palmas and

Vila Rã addressing the topic “The importance of prenatal care and why to do it early”. On 11/04/2022, groups 3, 4 and 5 were present at USAFAS Jd Brasil, Jd Las Palmas and Vila Rã addressing the topic “STIs in Pregnancy”. And on 11/18/2022, groups 7, 8 and 9 were present at USAFAS Jd Brasil, Jd Las Palmas and Vila Rã addressing the topic “Teenage pregnancy”.

All meetings took place in the best possible way, probably due to the teams’ familiarity with this type of intervention. The health units were prepared to receive the medical students, and the residents reserved their schedules to carry out the project that afternoon.

Each graduate received an on-site assignment, preparing the space for the group’s reception, preparing a coffee break for everyone’s integration after the training, recording all processes through reports, minutes and photographic images, supporting residents in managing the group and presenting the posters to community leaders.

During the meetings, residents began with an explanation to present the problem to those present, taking care to keep it simple and in accessible language, but focusing on health indicators and their impact on the development of the municipality. Then, the students presented the prepared posters, explaining the objective of that material, but also using easy and comprehensive communication to facilitate understanding.

The purpose of this conversation circle was to increase access to information from community leaders, so that they can be multipliers of health education and reach, mainly, the population that is difficult to reach, with reduced numbers of prenatal consultations and areas in that community agents have difficulty obtaining coverage. In addition to sharing important information on various topics among the community, the materials made into posters were distributed to leaders so that they could be spread

MAP OF GUARUJÁ WITH USAFAS INDICATION

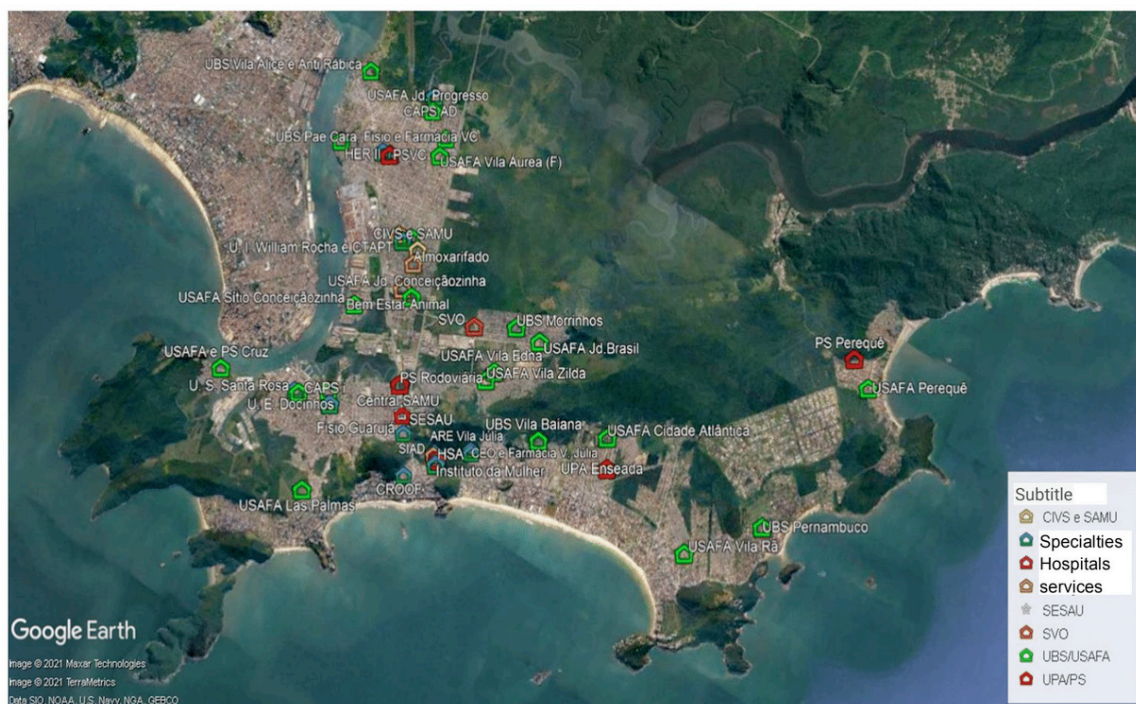


Figure 1 - Image taken from Google Earth and edited by Kátia Souza PP Alves, from the Health Planning department of the Municipal Health Department, in 2022.

throughout the territory within and outside the scope of USAFA, aiming to disseminate important knowledge and with the purpose of raising awareness of general population about the sensitivity of the matter.

As a preliminary result, the project managed to achieve its objective and the posters created by the students have already been seen in local businesses by people who did not participate in the meetings, revealing that important information about Pre-Natal is disseminated; STI in Pregnancy; and Teenage pregnancy occurred according to project planning. The community leaders who participated in the training, in the conversation circle model, brought the perceived demands and helped the health teams in planning future actions that enable the minimization of the identified problems. Students also became aware of the importance of the university in this scenario and their role as health professionals - in addition to reflecting on the role of doctors

in promoting health and preventing diseases. Finally, it was also noted that students expanded their verbal and non-verbal communication skills, group management, teamwork and work cooperation. And as a final product, the concept of health promotion through group activity was also formed.

Here, it is worth emphasizing the reflection that emerged among residents, after the first meeting. Due to the entire post-pandemic scenario - and all the distance it generated between USAFA and the community - the population, agents and regional leaders themselves initially appeared to not believe that the project could help them in any way. Few had knowledge about the reality of the municipality, and how it could directly impact their lives. But this scenario changed throughout the meetings, and in the end, they understood that the message was transmitted and the seed of the project germinated in the units.

Currently, it can be seen that in these 3 health units in which the project was inserted, there was a significant improvement in infant mortality rates and the team demonstrated more motivation and articulation on the topic. The work provided a rapprochement between USAFA and the community, the result of which today is seen in an increase in the number of visits with the possibility of improving the quality of assistance. Although such impacts are still not sufficient and difficult to measure on the association between the project and the indicators, integration and exhaustive discussion on the topic proved to be a viable path. In the future, the project also aims to contribute to improving the maternal and child mortality indicator, beyond the territory of USAFA participating in the intervention project, reaching the municipality of Guarujá as a whole.

In conclusion, it is important to highlight that the project's evaluation metrics were: attendance (100%); active participation in tasks and self-assessment, and that the project was coordinated with the Pedagogical Project of the Medicine Course (PPC) at Unoeste Guarujá and with the Teaching Plan for the subjects: Health Communication and Progressive Approach to Practice Program (PAPP), as he worked on acquiring the skills described.

- Analyze the biological, psychological and social dimensions in an integrated way;
- Critically analyze information and its sources based on scientific evidence;
- Synthesize, socialize and appropriately discuss information to generate new knowledge.
- Be responsible, punctual and diligent in all academic activities;
- Present an ethical attitude in relation to respect and cooperation with work

groups;

- Communicate appropriately with co-workers, patients and their families;
- Inform and educate patients, families and the community regarding health promotion, prevention, treatment and rehabilitation of diseases, using appropriate communication techniques;
- Use family and community approach tools;
- Communicate through different resources and languages (written, verbal and non-verbal), in the context of health care, based on ethical and humanistic principles.

FINAL CONSIDERATIONS

The project was the result of the articulation of the PPC of the Medicine course at Unoeste Guarujá and the teaching plan for the Health Communication Discipline and the Progressive Approach to Practice Program, as it worked on acquiring the skills proposed by the disciplines. It is understood that the project managed to achieve its objective and the posters created by the students were seen scattered around local businesses. The community leaders who participated in the training, in the conversation circle model, brought the perceived demands and helped the health teams in planning future actions to minimize the problems identified. Students also became aware of the importance of the university in this scenario and their role as health professionals. They also reflected on the role of the doctor in promoting health and preventing diseases. The integration between student and resident has awakened and stimulated interest in preceptorship and teaching among postgraduate students and some have already expressed interest in continuing with academic activities after graduation.



Figure 2 - posters created by medical students from UNOESTE, Guarujá medical school, enrolled in the 1st term of the second semester of 2022.

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REFERENCES

- BRASIL. Ministério da Educação. Conselho Nacional de Educação. Câmara de Educação Superior. RESOLUÇÃO Nº 7, DE 18 DE DEZEMBRO DE 2018. Disponível em: https://normativasconselhos.mec.gov.br/normativa/pdf/CNE_RES_CNECESN72018.pdf
- Gadotti M. “Extensão Universitária: Para quê?” Brasil: Instituto Paulo Freire, 2017.
- Imperatore, S. L. B.; Pedde, V. Curricularização da extensão universitária no Brasil – questões estruturais e conjunturais de uma política pública. XIII Congresso Latinoamericano de Extensión Universitaria, 2015. Disponível em: <https://www.unirio.br/reitoria/proreitoria-de-extensao-ocultural/curricularizacao-da-extensao/producoes-sobre-o-tema/Artigo1CurricularizaodaExtensaoUniversitarioBrasil.pdf>. Acessado em: 14/11/2023.
- Demarzo MMP, Almeida RCC de, Marins JJN, Trindade TG da, Anderson MIP, Stein AT, Guimarães FG, Oliveira FP de, Carvalho FP de, Silva FD, Oliveira FA de, Carlos GT, Marques JB, Geniole LAI, Silveira LMC da, Pinto MEB, Silva NA da, Bagatelli RC, Batista SRR, Barboza T de A, Sarti TD, Barreto V, Gusso GDF, Belaciano MI. Diretrizes para o ensino na Atenção Primária à Saúde na graduação em Medicina. Rev Bras Med Fam Comunidade [Internet]. 25º de maio de 2011 [citado 25º de setembro de 2023];6(19):145-50. Disponível em: <https://rbmfc.org.br/rbmfc/article/view/116>
- BRASIL. Boletim Epidemiológico. Secretaria de Vigilância em Saúde. Ministério da Saúde. Volume 52. Out. de 2021. Disponível em: https://www.gov.br/saude/pt-br/centrais-de-conteudo/publicacoes/boletins/epidemiologicos/edicoes/2021/boletim_epidemiologico_svs_37_v2.pdf. Acessado em: 14/11/2023.

6. BRASIL. Presidência da República Casa Civil. Subchefia para Assuntos Jurídicos. LEI Nº 12.871, DE 22 DE OUTUBRO DE 2013. Disponível em: https://www.planalto.gov.br/ccivil_03/_ato2011-2014/2013/lei/12871.htm. Acessado em: 14/11/2023.
7. Carvalho, Edgard de Assis. “Saberes complexos e educação transdisciplinar.” *Educar em Revista* (2008): 17-27.
8. Dalla, M. D. B.; Moura, G. A. G. De; Bergamaschi, M. S. Metodologias ativas: um relato de experiência de estudantes de graduação em medicina da Universidade Vila Velha na disciplina de Interação Comunitária. *Revista Brasileira de Medicina de Família e Comunidade*, Rio de Janeiro, v. 10, n. 34, p. 1–6, 2015. DOI: 10.5712/rbmfc10(34)647. Disponível em: <https://rbmfc.org.br/rbmfc/article/view/647>. Acesso em: 25 set. 2023.
9. BRASIL. Ministério da Saúde. PORTARIA INTERMINISTERIAL nº 1.124, DE 4 DE AGOSTO DE 2015. Disponível em: <http://portal.mec.gov.br/publicacoes-para-professores/30000-uncategorised/59421-dados-da-legislacao-cgeges> Acessado em: 14/11/2023.
10. BRASIL. Ministério da Educação. Diretrizes Curriculares Nacionais do Curso de Graduação em Medicina. Brasília. 2014. Disponível em: http://portal.mec.gov.br/index.php?option=com_docman&view=download&alias=15233-diretrizes-medicina&Itemid=30192. Acessado em:14/11/2023.
11. Tiseo TR, Santos MCL, Smiderle CASL. Estágio em Medicina de Família e Comunidade em unidades com residência médica no município do Rio de Janeiro: qual o seu impacto na formação dos acadêmicos? *Rev Bras Med Fam Comunidade*. 2022;17(44):3101. [https://doi.org/10.5712/rbmfc17\(44\)3101](https://doi.org/10.5712/rbmfc17(44)3101)
12. Almeida SMV de, Barbosa LMV. Curricularização da Extensão Universitária no Ensino Médico: o Encontro das Gerações para Humanização da Formação. *Rev bras educ med [Internet]*. 2019;43(1):672–80. Available from: <https://doi.org/10.1590/1981-5271v43suplemento1-20190013>
13. Gomes AP, Rego S. Transformação da educação médica: é possível formar um novo médico a partir de mudanças no método de ensino-aprendizagem?. *Rev bras educ med [Internet]*. 2011Oct;35(4):557–66. Available from: <https://doi.org/10.1590/S0100-55022011000400016>
14. Marques AC. Do saber ao ser: reflexões sobre a formação do médico de família e comunidade em serviço territorial de base comunitária. *Rev Bras Med Fam Comunidade [Internet]*. 4º de novembro de 2019 [citado 25º de setembro de 2023];14(41):1897. Disponível em: <https://rbmfc.org.br/rbmfc/article/view/1897>