POSTER ABSTRACT

Inter-professional education in primary health care: the "culture circles" experience

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Introduction: The Permanent Education in Primary Health Care (PHC) is a tool of strengthening of Brazilian public health system, in order to stimulate the development of a people-centred health care. It is a policy for qualification of the health work, through the collaborative construction of knowledge that attends the problems from daily practice, which means differentiating it from the traditional capacities that happen decontextualized from everyday life. Whereas the need to create strategies for inter-professional qualification in PHC, the research objective was to develop a health permanent education technology based on the principles of participatory education by Paulo Freire².

Theory/Methods: Intervention research was performed, in a qualitative approach, based on “culture circles” method²,³. Culture circle is a type of workshops, in which participants discuss their ideas freely, about certain theme of common interest. In the process, knowledge is shared and produced collectively. The method was applied to 4 inter-professional PHC health teams from a capital city in the northeast of Brazil. During 6-month period, 62 participants were included (nurses, doctors, dentists, nursing technicians and health community agents). For each health team, 4 culture circles were developed, with the triggering questions: 1) What do I think about permanent education? 2) How do I make it? 3) How do we develop it together? 4) How are we going carry out permanent education from here?

Results: The culture circles were always organized with the participants in a round disposition, with the availability of varied materials in the centre, use of songs, texts, poems and other artistic resources that stimulated the critical perception. The professionals expressed their feelings freely, presenting doubts, anxieties and hopes regarding the daily work. They thought on their own concepts of education and health service, and gave them the opportunity to talk about difficulties encountered in the work environment. Permanent inter-professional education plans were focused on the needs and health problems of the community attended by each health team, highlighting the immunization techniques, sexual health of young people and adolescents, chemical dependence on drugs, and humanization of care for people.

Discussions: The principles of participatory education² method applied in the circles promoted spaces for the exercise of critical, empowerment and autonomy of the professionals to plan inter-professional education actions, relating them to the challenge of a people centred care service. They pointed out as challenges to be overcome: interpersonal conflicts, fragmentation of the work
process, scarce spaces of inter-professional dialogue and insufficient support by public management.

Conclusions: Culture circles method showed potentiality for collaborative practice and education. Professionals gradually became empowered by the process, recognized limitations of their practices, and discussed strategies for qualifying teamwork. Lessons learned: Permanent education is complex and involves multiple social actors in different conditions. New strategies must be tried to encourage inter-professional education in order to qualify people-centred services in PHC.

Limitations: Application of the culture circles was restricted to a few local PHC services.

Suggestions for future research: Development of didactic and virtual educational technologies to stimulate the inter-professional education based on cultural circles.

Keywords: inter-professional education; primary health care; culture circles; critical education