The importance of Paulo Freire ideas for health education in Brazil

Eder Propp Anflor - Generalist Nurse graduated from the Federal University of Rio Grande do Sul (UFRGS), Pedagogy student at UFRGS (fifth period). eder.anflor@hotmail.com

Simone Algeri - Associate Teacher of the Federal University of Rio Grande do Sul, Master in Nursing at UFRGS and PhD in Education from Pontificie Catholic University (PUC/RS)

William Jones Dartora - Generalist Nurse graduated from the Federal University of Rio Grande do Sul (UFRGS). Master's student in epidemiology at the Medical School of the Federal University of Rio Grande do Sul (UFRGS).

Abstract

The theoretical production of Paulo Freire value the popular knowledge and the exchange of knowledge in establishing a relationship of trust between health professionals, patients generally to pregnant / lactating women and family for the actions of health promotion. We can observe the presence of Freire's ideas, most important popular educator from Brazil, fairly present in health education, specifically in humanized care, which is extremely important for the activity of nurses and educators.

While nurses / educators, we must think about the social context in which the patient lives, their limitations, their abilities, difficulties and facilities. It is very important know the reality of patients and family so we can provide nursing care and health education properly, thus establishing effective education conducts both in their treatment in health facilities as the continuity of their treatment at home .

Introduction:

Paulo Reglus Neves Freire, born on September 19, 1921 in Recife, Pernambuco, was an educator who has developed an innovative method of adult literacy in the area of popular education. It is considered one of the greatest thinkers in the history of world pedagogy. It became an inspiration to generations of teachers, especially in Latin America and Africa. Your thoughts outlined a Pedagogy of Liberation, related to the Marxist view of the third world and in the mobilization of the oppressed classes in the sense of the exercise of education as a right of citizenship, and be political and social in building his life story. [1]

Freire sees education as a dialogical relationship between student and educator, where freedom is a fundamental assumption, since it allows the subject to a discussion of its problems and its insertion in the world. So he speaks not only of a word reading, but a reading of the world, for that education assumes that no one educates anyone and that everyone learns in communion, from the world's collective reading. In this way, the author proposes and supports an education from the subject's reality, namely, a critical-dialogical education where the teacher facilitates the construction of questions and no answers ready and finished. That is, the articulation of knowledge critical to the popular, mediated by the experience of the world [2].

Nursing in its growth as a profession, has assumed various roles and positions, and its subject matter the care / caring. Faced with the practical matter of subjectivity experienced by nursing professionals, which sometimes is ahead of many routine activities can be seen in front of a puzzle, having difficulty understanding the multiple facets of this concept. According to this thinking, on the recognition of objectivity / subjectivity of the ways of caring in nursing, there was a study that resulted in 46 forms of care, from admission to discharge / death, showing that the diversity of interactions the individual with the professional, various objective forms can be identified [3].

Objective:

This study aimed to:

- To search the literature how important is the educator Paulo Freire for health education in Brazil.

Methodology

Type of study

This study it is an integrative literature review (IR) research, based on Cooper (1982), defined as a method that brings together the results of research on the same subject, in order to synthesize and analyze this data to develop a more comprehensive explanation of a particular phenomenon.

The integrative review is developed from five stages: problem formulation, data collection, data evaluation, analysis and interpretation of data and presentation of results (Cooper, 1982).

Problem formulation

The formulation of the present study problem was through the guiding question "What is the importance of the educator Paulo Freire ideas for health education in Brazil?".

Data collection

The search for articles was held at Latino database Literature - American and Caribbean Health Sciences (LILACS), the database Scientific Electronic Library Online (Scielo) Medline and Bireme, Web of Science and PubMed.

The descriptors used in the search for articles were: EDUCATION, HEALTH, NURSING, Paulo Freire.

Inclusion criteria

Healthcare articles were included, these areas: Nursing, Education and Health containing the theme of health education related to ideas of Paulo Freire, the language Portuguese, English, or Spanish, the last ten years (2004-2014) resulting from qualitative studies, quantitative, available online in full and free.

Exclusion criteria

Not available full articles were excluded, with previous publication the last ten years, no publications available electronically, free access at no cost, as well as theses, dissertations and completing courses jobs.

Data evaluation

This data evaluation stage, it designed a tool to record information (Appendix A) extracted from articles which was completed after reading the articles.

The fields that were understood to Appendix A: article title, author identification, serial, article publishing year objective of the study, the study methodology, results and conclusion.

Analysis and interpretation of results

This step was carried out the synthesis and comparison of data extracted from articles to be registered in a general summary table (Appendix B), in order to highlight the ideas of each author who answered the guiding question of this study: How important are ideas educator Paulo Freire for health education in Brazil?

Presentation of results

The presentation of the results was made with tables, charts and graphs, with the intention of comparing the ideas of authors who understood the sample of this study on the contributions of Paulo Freire's ideas for health education in Brazil.

Ethical aspects

All the productions used in this work were referenced as the standards of the Brazilian Association of Technical Standards (NBR 6023, 2000). It has respected the authenticity of the authors of the ideas in question constitute the sample of this study.

Results and discussion

At this stage of the study, we characterized the statement of findings of integrative review that data were presented through analysis and discussion of results.

Sample characterization

Initially by crossing the descriptors in health Medicine® (MeSH), it found a total of 176 scientific articles in the databases consulted. After initial selection by the availability of online full-text and year of publication yielded 126 publications. Next, the reading was held the titles and abstracts limiting the sample to 56 publications (10 in MEDLINE, 16 in LILACS and 30 in SciELO). After reading in full of papers, we selected articles 3 (1 in LILACS, MEDLINE and 2 on 2 on Scielo) that formed the database for this job.

Next, the table below presents the list of articles that constituted this study and their respective owners.

Article	Title	author	Year	Objective	Type of study
01	Health education: prospects for a team Health strategy from the perspective of Paulo Freire	Maria Clara Porto Fernandes; Vânia Marli Schubert Backes.	2009	Know their perspectives on health education and problematize them through the dialogical conception of Paulo Freire .	qualitative / bibliografic review
02	Climacteric women: a proposal for clinical nursing care based on freireanas ideas.	Cláudia Rejane Pinheiro Maciel Vidal; Karla Corrêa Lima Miranda; Patrícia Neyva da Costa Pinheiro; Dafne Paiva Rodrigues.	2012	Dialogue between the concepts care and education and propose a strategy of education in health as a possibility for nursing clinical care for women in climaterio based on educational principles of Paulo Freire.	qualitative / bibliografic review

				Reflect on the	qualitative /
03			2014	integration of	
	Theoretical	Francisca Márcia		theoretical constructs	bibliografic review
	constructs of Paulo	Pereira Linhares;		of Paulo Freire,	
	Freire guiding the	Cleide Maria		dialogue, ethics and	
	breastfeeding Pontes;	2014	questioning in		
	promotion strategies	Mônica Maria		breastfeeding	
		Osório.		promotion, involving	
				the social network of	
				women.	

With regard to the language of the articles in this integrative literature review, the three articles selected for the final study were published in the Portuguese language.

The importance of Paulo Freire for health education

The educator Paulo Freire is of paramount importance to the link between education and health, for today working in multi disciplinary team. Teamwork is essential both for health professionals and to educators. Often health professionals become educators, approaching the sick people and developing educational activities with them, providing a better understanding of health care. Importantly, this closeness does not refer only to patients but also to integrated and organized health care team.

In this work the health and education are closely articulated, they are seen as complementary and essential to the progress of the family health strategy. Health and education can not be separated, go together, are organized as social practices [4].

Health education is highlighted within the functions of the professional members of the family health teams, and it is emphasized even more in the nursing work process. The practice of health education requires the health professional, especially nursing, in proximity to this practice, a critical analysis of their performance as well as a reflection of its role as an educator [5]. The very concept of nursing bases called for the nurse's role as an educator, after all there is no care without educating and vice versa.

On the assumption that education is established as a branch intertwined health becomes the responsibility of health pay attention and practice health education as an educational process of building knowledge health professionals aimed at appropriation on the subject by the general population. It is also the industry practices set that contributes to increasing the autonomy of the people in their care and in the debate with professionals and managers in the industry, to achieve health care according to their needs [6].

Over the years, different paradigms of health education are conditioned by different strategies, many reductionist, which requires questioning and implementation of more integral and participatory actions. From this thought, we seek a possibility of education that addresses the other in its complexity, enabling the patient can also be seen in full. In this scenario, we see the principles of Paulo Freire as a framework for guiding this development, for it shows a dialogue-based, supportive education, without arrogance, combining scientific knowledge with popular knowledge, translating his method in a collective work [7].

The development of educational activities grounded in a theoretical framework can guide the inclusion strategies to promote breastfeeding, based on critical reflection of liberating educational practice, centered on knowing dialogical, questioning and being ethical in the context of the reality of all the actors involved the patient and their complexities.

The theoretical constructs of Paulo Freire value the popular knowledge and the exchange of knowledge in establishing a relationship of trust between health professionals, patients in its many complexities, pregnant / lactating women and family for the actions of promotion of breastfeeding [8].

Final considerations:

This article aimed to address the importance of the educator Paulo Freire for the exercise of health education in Brazil. Their practices were extremely important in the past and has remained in this. Today we work with the idea of liberating education in health, autonomous and popular. Thus, know and recognize the work of this important intellectual gives us the necessary support to develop humanized care, as recommended by the agencies that administer health in Brazil.

Health professionals began to take ownership of educational tasks, whether in the hospital, are in other areas of health. There is no health without education, and there is no education without health. Paulo Freire brought us the idea of the pedagogy of autonomy as a practice in which we approach the subject and develop with him a freedom to teach and to learn, where we hear your opinion, where we educate and are educated, where we discussed concepts of health and education, about the society we live in and its complexities, where we hear the difficulties of patients on adherence to their treatment.

It is essential appropriating the reality of each patient, knowing your social life context so we can apply this form of education, where we teach and learn, where it is vital to teamwork and learning literature search, with professionals and also with patients. Only through education we acquired freedom, only through it guarantee an adequate patient care, only through education can provide patients the necessary learning about how to deal with his illness / treatment.

References:

- 1. Souza AI. Paulo Freire: Vida e obra. São Paulo: Expressão Popular; 2001.
- 2. Freire. P. Educação como prática da liberdade. 26. ed. Rio de Janeiro: Paz e Terra; 2002.
- 3. Coelho MJ. Maneiras de cuidar em Enfermagem. Rev Bras Enferm 2006;59(6):745-51.
- 4. Wayhs RI. Ressignificando o sofrimento cotidiano da família da criança e do adolescente com o diagnóstico de câncer a partir de uma prática cuidativa-educativa problematizadora [dissertação]. Florianópolis: Programa de Pós Graduação em Enfermagem, Universidade Federal de Santa Catarina; 2003.
- 5. Oliveira HM, Gonçalves MJF. Educação em saúde: uma experiência transformadora. Rev Bras Enferm 2004; 57(6): 761-1.3
- 6. Ministério da Saúde (BR). Portal eletrônico do Ministério da Saúde. Brasília; 2004. [citado em: 2008 maio 1]. Disponível em:http://dtr2004.saude.gov.br/dab/atencaobasica.php#saudedafamilia.
- 7. Vidal Cláudia Rejane Pinheiro Maciel, Miranda Karla Corrêa Lima, Pinheiro Patrícia Neyva da Costa, Rodrigues Dafne Paiva. Mulher climatérica: uma proposta de cuidado clínico de enfermagem baseada em ideias freireanas. Rev. bras. enferm. [Internet]. 2012 Aug [cited 2015 Aug 27]; 65(4): 680-684. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0034-71672012000400019&lng=en. http://dx.doi.org/10.1590/S0034-71672012000400019.
- 8. Linhares Francisca Márcia Pereira, Pontes Cleide Maria, Osório Mônica Maria. Construtos teóricos de Paulo Freire norteando as estratégias de promoção à amamentação. Rev. Bras. Saude Mater. Infant. [Internet]. 2014 Dec [cited 2015 Aug 27]; 14(4): 433-439. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1519-38292014000400433&lng=en. http://dx.doi.org/10.1590/S1519-38292014000400013.
- 9. ASSOCIAÇÃO BRASILEIRA DE NORMAS TÉCNICAS. **NBR 6023:** informação e documentação: referência elaboração. Rio de Janeiro, 2000.
- 10. COOPER, H. M. The integrative research review. A systematic aproach. Newburg Park, CA: Sage, 1982.