



SUPERVISED TRAINING IN DENTISTRY: EXPERIENCE OF HEALTH PROMOTION AND MULTIDISCIPLINARY INTEGRATION

Estágio Supervisionado na Odontologia: vivência da promoção da saúde e integração multiprofissional

Prácticas en Odontología: vivencia de la promoción de la salud e integración multiprofesional

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ABSTRACT

Objective: To report Dentistry students' experience in supervised training in Public Health. **Data Synthesis:** Experience report of activities carried out in events called "Health Space" (*Espaço Saúde*) by Dentistry students under supervised training. The activities took place in Primary Health Care Centers (*Unidades Básicas de Saúde – UBS*) from 2011 to 2015. The classes were divided into groups and the activities were carried out with children, youth and adults by students under supervision of the faculty of the Department of Dentistry of the State University of Maringá (*Universidade Estadual de Maringá*), located in the state of Paraná, Brazil. The municipality of Maringá develops health promotion activities through the Healthy Maringá Program (*Programa Maringá Saudável*), which includes events called "Health Space" organized by UBS professionals with the aim of interacting with the community. In these events, the Dentistry students diagnose oral diseases, teach oral hygiene, and carry out playful educational activities with children; in addition, they get to know the other services offered in the UBS. This experience provided a new understanding of the role of the health professional by the community, the service, and the university. **Conclusion:** The teaching-service-community integration benefits the local community, strengthens the service, and improves the training of students. It also raises awareness for health promotion and disease prevention, which is necessary to improve the quality of life of the population.

Descriptors: Unified Health System; Clinical Clerkship; Primary Health Care, Dentistry.

RESUMO

Objetivo: Relatar a vivência nos estágios supervisionados em Saúde Coletiva por acadêmicos de Odontologia. **Síntese dos dados:** Relato de experiência a partir da vivência das atividades pelos alunos de estágio supervisionado do curso de Odontologia durante os eventos "Espaço Saúde", realizados no período de 2011 a 2015, que ocorreram nas Unidades Básicas de Saúde (UBS). As turmas eram divididas em grupos na UBS e as atividades educativas, realizadas com as crianças, jovens e adultos, eram desenvolvidas pelos alunos com a supervisão de docentes do Departamento de Odontologia da Universidade Estadual de Maringá, Brasil. O município de Maringá desenvolve atividades de promoção da saúde por meio do Programa Maringá Saudável, incluindo neste programa eventos denominados "Espaço Saúde", organizados pelos profissionais das UBS, com finalidade de interagir com a comunidade. Nesses eventos, os acadêmicos de Odontologia realizam diagnóstico



de doenças bucais, instrução de higiene bucal e atividades lúdico-educativas para crianças, além de conhecer os demais serviços da UBS. A partir dessa experiência, percebeu-se um despertar para um novo olhar sobre o papel do profissional que trabalha com saúde, por parte da comunidade, do serviço e academia. **Conclusão:** A integração ensino-serviço-comunidade beneficia a comunidade local, fortalece o serviço e melhora a formação dos acadêmicos. Desperta também a consciência para promoção da saúde e prevenção das doenças, necessária para a melhoria na qualidade de vida da população.

Descritores: Sistema Único de Saúde; Estágio Clínico; Atenção Primária à Saúde, Odontologia.

RESUMEN

Objetivo: Relatar la vivencia de las prácticas de Salud Colectiva de académicos de Odontología. **Síntesis de los datos:** Relato de experiencia a partir de la vivencia de las actividades de los alumnos de prácticas del curso de Odontología durante los eventos “Espacio Salud” realizados en el periodo entre 2011 y 2015 en las Unidades Básicas de Salud (UBS). Las clases fueron divididas en grupos en la UBS y las actividades educativas realizadas con los niños, jóvenes y adultos fueron desarrolladas por los alumnos bajo la supervisión de los docentes del Departamento de Odontología de la Universidad Estadual de Maringá, Paraná, Brasil. El municipio de Maringá desarrolla actividades de promoción de la salud a través del Programa Maringá Saludable que incluye en este programa eventos denominados “Espacio Salud” que son organizados por los profesionales de las UBS con el objetivo de interactuar con la comunidad. En los eventos los académicos de Odontología realizan el diagnóstico de enfermedades de la boca, promueven la explicación sobre la higiene bucal y actividades lúdico-educativas para niños además de conocer los otros servicios de la UBS. A partir de esa experiencia, hubo un despertar para una nueva mirada sobre el papel del profesional sanitario de parte de la comunidad, del servicio e de la academia. **Conclusión:** La integración enseñanza-servicio-comunidad conlleva beneficio para la comunidad local, fortalece el servicio y mejora la formación de los académicos. Además, despierta la consciencia para la promoción de la salud y la prevención de enfermedades que son necesarias para la mejoría de la calidad de vida de la población.

Descriptores: Sistema Único de Salud; Prácticas Clínicas; Atención Primaria de Salud, Odontología.

INTRODUCTION

Supervised trainings are considered spaces in the undergraduate course that allow students to be integrated into the social and economic context of the region where they work, ranging from health education to the reversal of the damages caused by diseases⁽¹⁾.

Health is a fundamental right of the human being, according to the Federal Constitution of 1988⁽²⁾ but, despite that, supervised trainings in undergraduate courses still give little emphasis to the strategies that enable experiencing the practice of health promotion⁽³⁾. The vast majority of practical activities, within the Dentistry course, still focus mainly on curative treatment⁽⁴⁾.

The national curricular guidelines for Dentistry courses emphasize the importance of contextualized collective actions, in addition to technical training, resulting in the formation of professionals qualified to provide comprehensive and humanized care to the population. They also point out as salutary the teamwork and the development of actions aimed at promoting health and strengthening primary health care⁽⁵⁾.

Many liberal professionals are now seeking the stability of public jobs because they have struggled to establish themselves in the competitive dental work market. However, many limitations are verified in the dental surgeon's training profile. In general, it does not meet the required needs of a public service worker⁽⁶⁻⁸⁾ and, for that reason, the articulation between the Higher Education Institutions (HEI) and the Brazilian Unified Health System (SUS) has been key to allowing the System itself to arrange the formation of human resources in health, and the undergraduate courses to work synergistically in the development of competencies needed to consolidate SUS⁽⁹⁾. These needs have been conceived and implemented by the HEIs, particularly in supervised trainings⁽¹⁾, whose objectives are to foster the teaching-service-community relationship, to broaden the university's relations with society and to put the prospective professional in contact with different realities^(1,10).

Since its creation in 1988, the Dentistry degree course of the State University of Maringá (*Universidade Estadual de Maringá - UEM*), Paraná, Brazil, has sought to train professionals adapted to the needs of the labor market and prepared to work within the current health system in the country. In 1992, it implemented changes in the pedagogical project based on an integrated curriculum, already bearing a traineeship load totaling 20% of the total course, that is, 1,015 hours of extramural activities. These changes were considered innovative and were already in line with the National Curricular Guidelines (DCN) for undergraduate courses in Dentistry, published later in 2002⁽¹¹⁾. In 1994, the program opened a field of learning in the municipal health network in Maringá, which has since represented an important partnership for undergraduates to experience the practice and reality of SUS.

Several proposals and initiatives have been tried and implemented over the last few years, aiming at the formation of undergraduate students from a SUS perspective, particularly driven by intersectoral policies of the Ministry of Health and the

Ministry of Education, such as the National Program for Reorientation of Professional Training in Health (Pro-Health) and the Education through Work in Healthcare (PET-Saúde) Project⁽¹²⁾.

The UEM Department of Dentistry, from Interministerial Ordinance No. 2,101/2005, participated in the first phase of Pro-Health, which made up an important inspiring framework for changes in thinking and practices, and for the strengthening of the teaching/service /community triad as well. Despite the difficulties and great challenges, the development of the program gave an opening to the formation of a critical mass of professors engaged in the movement for a change in the training of health professionals, and actions have since been planned and implemented in a collegiate way⁽¹³⁾. In 2009, through the Interministerial Ordinance No. 3/2009, the UEM Dentistry course began its participation in the PET-Health Project, which works linked to different UBS and various actors, who experience multiprofessional, interdisciplinary and comprehensive healthcare practices, providing a differentiated, interprofessional training through the experience of the SUS reality and the teaching-service-community integration in the construction of a more humanized, resolute and unified system⁽¹⁴⁾.

The curricular supervised trainings in Public Health, in the EMU Dentistry degree course, are conducted in the 2nd year, with 17 hours; in the 3rd year, with 34 hours; in the 4th year, with 204 hours; and in the 5th year, with 760 hours. In 2007, given the need for inclusion of territorialization activities and clinical care for 5th-year students, the “Family Health Program (PSF) Clinic” was created, which was renamed as “Expanded Clinic” in 2009. The Expanded Clinic is inserted within the Supervised Training in Public Health IV and its operationalization follows the assumptions of the National Humanization Policy, which aims at providing comprehensive care to the needs, with the objective of producing health and autonomy for individuals and the community⁽¹⁵⁾. Thus, the Dentistry degree course seeks to diversify practice scenarios and introduce students into experiences of diagnosis and individual and collective planning, health promotion and clinical dental care, all of which are regarded important for the development of skills and competencies for the good professional practice.

In 1974, the concept of health promotion was launched, showing its relevance in the organization of public health services. These precepts were reinforced and understood by Alma-Ata’s Declaration in 1978⁽¹⁶⁾. The first International Conference on Health Promotion, held in Ottawa (1986)⁽¹⁷⁾, gave a broader definition of health, involving education, public policy change, environmentalist approach and community action. The Ottawa Charter⁽¹⁷⁾ defines health promotion as the procedure to increase the ability of individuals and communities to control their health, for their improvement.

In order to achieve a state of complete physical, mental, and social well-being, the individual or group must be prepared to identify and fulfill their claims, match their faults, or modify them, adapting themselves to the environment⁽¹⁷⁾. From Agenda 21, resulting from the United Nations Conference on Environment and Development, held in Rio de Janeiro, in 1992, health promotion was also defined as a planning tool for building more sustainable societies, on different geographic bases, including methods of environmental protection, social justice and economic efficiency. This concept, therefore, joins the World Health Organization’s concept of Healthy City⁽¹⁸⁾.

The curricular supervised training is a compulsory teaching modality in the Dentistry undergraduate course, which has the scope to provide students with a broad and concrete view of their profession. The study is relevant for Public Health, as it focuses on discussing aspects of the training of prospective professionals, and one can emphasize the achievement of a more general view of the health situation of the population, focused on health promotion.

In view of this context, the present study aims to report the experience in the supervised trainings in Public Health by dental students.

DATA SYNTHESIS

This is an experience report, based on the activities developed by undergraduate Dentistry students in the discipline Supervised Training in Public Health, of the State University of Maringá, Paraná, Brazil, from 2011 to 2015. Based on the strengthening of communities through health education, the municipality of Maringá created in 2006 the “Healthy Maringá Program” (*Programa Maringá Saudável*), which follows the guidelines of the “Network of Healthy Municipalities and Communities”, an initiative of the Pan American Health Organization) in association with the World Health Organization⁽¹⁸⁾. In this program, some strategies that have been developed, such as the “Health Space”, can be mentioned, whose objective is to practice health education, preventing diseases and offering autonomy, bringing improvements to the quality of life of community members. Through the years, these activities have established partnerships with non-governmental organizations (NGOs), municipal secretariats, local health councils, neighborhood associations, artisans and local companies⁽¹⁹⁾. The participation of the students occurred under the supervision of the professor at all stages of the development of the experience, which took place at the Basic Health Units (UBS).

The classes of students were divided into groups and the educational activities were carried out with children, young people and adults who were awaiting care at the UBS. It began with an informal invitation to users and their companions to participate in waiting room activities while awaiting care. Then, all presentations were carried out, adopting the proposal of a generative theme, which was sometimes pre-selected by the academics, the health team and others. This generative theme was used to incite reflections and problematizations but, during a number of practices, they were extrapolated, permeating several topics

related to the local social and cultural daily life. In this direction, in order to materialize the proposed moments in the waiting room, a variety of didactic materials were applied to facilitate the exchange of knowledge between users and academics.

For the children, playful activities were carried out, promoting the learning of more comprehensive aspects, such as behavior change and improvement in quality of life⁽²⁰⁾. For this, puppets and an easy-to-understand language were used to approach oral health care and present the dental surgeon as a partner of the child, collaborating in dental health care. Toothbrushing techniques and the use of dental floss were also demonstrated, with the help of macromodels of teeth.

The participation of youngsters and adults was carried out with dialogues, from illustrative panels containing information on the main oral diseases, such as dental caries, periodontitis, pulpitis, oral cancer, as well as on the care required for good oral health, such as adequate techniques of dental brushing, preservation and hygiene of the prostheses, oral self-examination and oral health of the pregnant woman.

The experience was reported in two axes, the first one indicating the contributions of the project to the community through the activities carried out, and the second one regarding the impact of the practice on the Dentistry students' professional training, from observations based on the scientific literature.

Contributions of the project to the community through the activities carried out

The activities performed in the waiting room are an opportune moment of humanization in care, since they enable the dialogue addressing the health promotion. They allow the patient, regardless of their age range, to get in touch with their fears, concerns and demands. Thus, the aim is to replace anguish, when resulting from the fear of the dentist's appointment, by feelings of curiosity and well-being, and by more information from health professionals. Moreover, it is an occasion that allows the participation of family members and companions, so that everyone is involved in the process, having as benefit the reduction in physical and emotional depletion and, likewise, greater performance of the professional work⁽²¹⁾.

In a study⁽²²⁾, during the waiting room moments, the participants, corroborating the study in question, could also have their doubts clarified and discuss a variety of topics, this being an important moment of approximation between popular knowledge and technical/scientific knowledge generated in the undergraduate program. Another relevant point in this study⁽²²⁾ was the organizational aspect and the motivation of the health team, which recalled the relevance of the waiting rooms as a positive strategy in the very care provided to the users, since they could serve to them in a more quiet and organized way, in order to be more careful towards the patients.

Oral health education with children should emphasize the importance of brushing with the help of an adult, by exposing the dental arch of a child, showing the importance of keeping the teeth and adjacent tissues healthy, and how to perform effective brushing and use the dental floss. Attitudes and habits acquired during the first stages of life will be taken to the next stages, when one begins to take responsibility for one's own actions⁽²³⁾. Motivation established through education can have a broad impact on the child's performance. It is in this sense that health education is materialized as a basic strategy in health services, once it seeks to prepare individuals to lead their own lives through education, in which subjects affirm themselves as protagonists of their own history⁽²⁾.

As for the adults, these users' preference, with respect to the dental extractions, are historical constructions, added to the collective cognitive, as a result of oral health-related practices over the years. The users, thus, because of the difficulty in access and/or the difficulty in solving their dental health problems, chose to end their suffering related to that tooth. In this way, creating a bond with the user leads him to discuss the real needs and responsibilities, avoiding the user-centered decision of the therapeutic procedure that it is realized simply by the manifestation of his will⁽²⁴⁾. The bond can be built during health education, and will therefore require interaction with the search for the best caring behavior⁽²⁴⁾.

Impact of the practice on the Dentistry students' professional training

The interest and concern of health education institutions, health professionals, users, managers and technicians of the public services allow the establishment of partnerships that benefit all. An example of this is the present experience report on the participation in the event called "Health Space" (*Espaço Saúde*), which has acted as a facilitator in the construction of partnerships and in teaching-service-community integration.

Although health education strategies tend to show results only in the long term, one can observe, during the event, great interest on the part of the public in the themes addressed. The children participated actively in the playful activities and interacted during the performance of the puppet theater. The adults closely followed the presentation of the panels and questioned them. It was noticed that the community can improve their perception of the dental surgeon's role, understanding that, rather than only intervening in the disease, this professional can and should prioritize prevention and help them to achieve autonomy for the maintenance of their health.

The supervised training, in order to be successful, depends on the correct choices of practice scenarios, operationalization strategies, and teaching-service-community interaction, being always focused on the training of human resources for SUS, with emphasis on prevention, health education, and on the multi- and interdisciplinary vision⁽³⁾. The students' participation in the

activity allowed some objectives proposed in 2002, in the National Curricular Guidelines for the Dentistry degree course, to be achieved⁽²⁵⁾, such as health care, decision making, communication, leadership and permanent education⁽⁹⁾.

Permanent education is an important aspect achieved, since continuous learning is incorporated into the everyday life of the student, who carry this dynamics into the professional life, reflecting on and critically analyzing the work processes in order to more easily identify problems and solutions⁽²⁶⁾.

From this context, the students realized the importance of acquiring skills that will serve as a basis for the process of developing autonomy and discernment in offering comprehensive health care with quality, efficiency and solving capability^(3,10). Among these abilities, it can be stressed the exercise of looking at health care by means of prevention, promotion and protection actions, both individually and collectively⁽¹⁾. There was also interaction learning with other health professionals and with the public⁽⁹⁾.

HEIs should be concerned with curricular reformulations that provide for the formation of a professional rich in knowledge, skills and competencies, able to decide and act safely in health education and prevention, taking the social needs into account⁽²⁷⁾. Such is not a very simple task, as the Dentistry degree courses are still focused on technical training⁽²⁸⁾.

In the practice of supervised trainings, the student becomes familiar with the community and with the service. They are faced with reality and begin to perceive that their multiprofessional performance is not limited to the oral cavity, nor to the dental clinic. They apprehend the complexity in which their patient is inserted through the contact with the actual context of life, family and community, and that, many times, they are deprived of information and conditions for their own care.

These affirmations corroborate the findings of a study⁽¹⁾ conducted with dental students about the supervised training for their professional formation. In this intervention, the student also experienced the practice of public service and came to know their role within the team that comprises oral health technicians and assistants. In a certain way, it was an anticipation of a coexistence that will happen, effectively, from the fourth year on, when that same student will undergo the supervised training inserted at the UBS.

With the participation in "Health Space", the students began making the contact with multiprofessional experiences. Interprofessional education occurs when students of two or more professions learn about the others, with each other, and among themselves, to enable effective collaboration and improve health outcomes⁽²⁹⁾. This opportunity offered the knowledge and the understanding of the reality of other professions, in addition to their own tasks, responsibilities and aptitudes within the health team. The multiprofessional context has been addressed within the Dentistry course in the supervised training, and this has triggered a debate and the approximation of the course for the introduction of an interprofessional education within the curriculum, in order to train the student for teamwork.

In turn, the supervised training benefits the public service in that, by opening space for trainees, it contributes to the training of these prospective professionals, helping to build a profile more suited to the needs of the population and more sensitized to health education. This is very important, since the public service has been the great employer of dental surgeons. Currently, dental surgeons have left the exclusively-private practice to seek the stable bond of wage labor. This can be explained by the high competitiveness of the dental market⁽³⁰⁾.

Despite the exacerbated number of dental surgeons, the situation of oral health in the country is worrying and a cause for concern, since a large part of the population still does not have access to dental services. In view of this situation, it is necessary to boost the different work fronts: health care, system management, training of professionals and social control⁽⁸⁾.

Although the integrated curriculum of the Department of Dentistry of the State University of Maringá has been in force for over 20 years, it is known that the process of change occurs slowly. Many challenges need to be overcome, and modifications must be made, in regard to the practices of both the professors and the student body. A generalized problem in the Dentistry courses of the Institutions of Higher Education of the country is the overvaluation of the specialist to the detriment of the generalist professional⁽³¹⁾.

The training of the specialist, formerly encouraged, is still widespread within the very teaching staff, and this ends up influencing the students' vision⁽³²⁾. Dental education institutions should formulate teaching practices capable of forming a dental surgeon with the knowledge, skills and competencies that enable them to make decisions and act safely on disease prevention and health promotion to meet the social needs⁽³³⁾, instead of a "dental worker", with purely technical practices⁽¹⁰⁾. That is, they should have a broad clinical experience, know how to use sophisticated techniques, whether preventive or curative, with a solid support of the basic sciences. A professional capable of interacting with society, who has communication skills and leadership, critical sense, ethics and social sensitivity⁽³³⁾.

In this respect, the shift from the biomedical paradigm to the holistic, humanist model encompasses contents, attitudes and posture of educators focused on the appreciation of the human being, so that the educator must give meaning to what he teaches, to produce in the student the will for the knowledge, taking actions that allow the dialogue between professor/student, in order to provide subsidies for the understanding of reality and also for the applicability of theories in practice⁽³⁴⁾.

The adequacy of the courses in the health area to the National Curricular Guidelines, along with the supervised training, contributes to the student's professional training, enabling them to work in several environments, such as the labor market, in general, and particularly in the public service.

CONCLUSION

The teaching-service-community integration benefits the local community, strengthens the service and improves the training of the undergraduates. It also raises awareness for health promotion and disease prevention, which is necessary to improve the quality of life of the population.

The participation of the students, not only those in the Dentistry degree course of the State University of Maringá, but also in other health courses, in the event “Health Space” within the Supervised Training, has been of great value to all involved, offering the opportunity to recognize the health service as a whole, have the first contact with the UBS multiprofessional team and a more appropriate perception of reality.

It is worth mentioning that this study is an experience report of activities carried out in the Supervised Training on the integration of teaching, service and community in a health promotion environment. Further longitudinal studies on the multiprofessional experience of undergraduate students in health promotion with more representative samples can contribute to the decision making regarding the best path in the search for professional training of higher quality and in line with the curricular guidelines.

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