

## CONTRIBUIÇÕES DE ATIVIDADES EDUCATIVAS REALIZADAS NA SALA DE ESPERA PARA O ACADÊMICO DE ENFERMAGEM

## CONTRIBUTIONS OF EDUCATIONAL ACTIVITIES CARRIED OUT IN THE WAITING ROOM FOR THE NURSING ACADEMIC

## CONTRIBUCIONES DE ACTIVIDADES EDUCATIVAS REALIZADAS EN LA SALA DE ESPERA PARA EL ACADÉMICO DE ENFERMERÍA

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### RESUMO

**Objetivo:** relatar a experiência de uma acadêmica de enfermagem no desenvolvimento de atividades na sala de espera e as potencialidades e fragilidades desse processo numa estratégia saúde da família. **Método:** relato de experiência crítico e reflexivo realizado durante o Estágio Curricular Supervisionado. **Resultados:** a experiência oportunizou vivenciar algumas fragilidades, sendo elas: dificuldade na elaboração escrita do projeto sobre o tema sugerido, insegurança na abordagem, falta de receptividade de alguns usuários, a intensidade do barulho na sala de espera, que dificultou a comunicação. Além das fragilidades, a acadêmica evidenciou potencialidades, sendo um momento de desenvolver melhor a sua comunicação com o usuário e fortalecer vínculo. **Conclusão:** A experiência, ao realizar a sala de espera no Estágio Curricular Supervisionado, foi relevante para que a acadêmica pudesse desenvolver estratégias em realizar atividades de educação e promoção de saúde.

**Descritores:** Enfermagem; Estratégia da saúde da família; Educação em saúde; Capacitação Profissional

### ABSTRACT

**Objective:** To report the experience of a nursing student in the development of activities in the waiting room and the potentialities and weaknesses of this process in a family health strategy. **Method:** report of a critical and reflective experience during the Supervised Curricular Internship. **Results:** the experience allowed observing some weaknesses: difficulty writing the project about the suggested topic, insecurity in the approach, lack of some users' receptivity, the intensity of the noise in the waiting room that hindered communication. In addition to the weaknesses, the academic showed potentialities, being a moment to develop better her communication with the user and strengthen bond. **Conclusion:** The experience, when performing the waiting room in the Supervised Curricular Internship, was relevant for the academic could develop strategies to carry out activities of health education and promotion.

**Descriptors:** Nursing; Family health strategy; Health education; Professional Training

### RESUMEM

**Objetivo:** Relatar la experiencia de una académica de enfermería en el desarrollo de actividades en la sala de espera y las fortalezas y debilidades de este proceso en una estrategia salud de la familia. **Método:** relato de experiencia crítica y reflexiva que ocurrió durante el período de Prácticas Curriculares Supervisadas. **Resultados:** la experiencia proporcionó una oportunidad de experimentar algunos puntos débiles que son: dificultades en la preparación del proyecto de escritura sobre el tema sugerido, la inseguridad en el enfoque, la falta de receptividad de algunos usuarios, la intensidad del ruido en la sala de espera, que dificultó la comunicación. Además de las debilidades, la académica demostró potencialidades, siendo un tiempo para desarrollar mejor su comunicación con el usuario y para fortalecer los lazos. **Conclusión:** La experiencia de la sala de espera en las Prácticas Curriculares Supervisadas fue relevante para que la académica pudiera desarrollar estrategias en llevar a cabo actividades de educación y promoción de la salud.

**Descritores:** Enfermería; Estrategia de salud familiar; Educación en salud; Capacitación Profesional.

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## INTRODUCTION

The "Primary Health Care" care model has undergone transformations that pervade assistance to acute diseases and processes of acute exacerbations of chronic diseases for actions of promotion, prevention and management of health conditions<sup>(1)</sup>. One of the strategies for this transition is the Health Promotion (HP), which seeks to mitigate iniquity in health process so that the user and the community actively participate in the factors that affect health and quality of life, with the user's empowerment<sup>(2)</sup>.

One of the scenarios where health promotion occurs is the Family Health Strategy (FHS), which proposal is that health professionals do not act only in individual care, but also plan their actions directed to collective care. In this perspective, they perform health promotion and disease prevention by means of educational actions, which are also part of health professionals' work process<sup>(3)</sup>.

In the FHS, the health team can use the waiting room to develop HP actions, aiming at educating users, reducing stress, supporting, guiding about myths, alleviating the emotional and physical wear of waiting for care and detecting health problem. In most health care services, the waiting room is an unpleasant situation where the wait for the service can generate anxiety, tension, anger and negative comments about the health care<sup>(4,5)</sup>.

The waiting room is a welcoming environment, frequented by users of health services. In this room, the health professional can provide the care humanization, as spaces of dialogs and improvement in relations between staff and users, and can also be a support for care quality and approach to integral care to the user, family and community<sup>(5,6)</sup>.

Therefore, the waiting room is a place that has a large turnover of users, with different ages, diseases, culture and social classes. Due to this diversity, the health team should be prepared to host, through dialog, and to assess the conditions of the health-disease process to approach the user, family and community<sup>(7)</sup>.

From this perspective, it is important to be anchored in collaborative educational practices, shared among management, service, college and population, to ensure the dialog among all those involved in the health process, so that there is no overlap of knowledges, but integration<sup>(8)</sup>.

The educational practices in the waiting room are relevant for the relationship between the health team and users, and can provide an approximation between the community and health services. This is a space of dialog and debate that helps strengthening relations, being an important foundation in the humanized care, receptiveness, with the aim of ensuring a holistic look<sup>(5)</sup>.

The waiting room is one of the mandatory activities for students of the Supervised Curricular Internship (SCI) of Basic Care, which occurs in the seventh semester of the nursing course, with the objective of performing health promotion in both individual and collective dimension and still provide for the academic the use of different methodological strategies for health education.

In addition, the idea of developing this experience report arose when the nursing student attended the SCI. Despite the contribution of several students for the activity of the waiting room, this work reports the perception of a student who experienced all stages of this process, also possessing the contribution of professors that supervise the SCI and the activities developed in the waiting room.

Another aspect that prompted the authors to perform the study was that the literature review demonstrated the low volume of publications related to this topic.

Thus, the present investigation aims to report the experience of a nursing student in the development of educational activities in the waiting room and the potentialities and weaknesses of this process in the family health strategy.

## METHOD

Descriptive study, experience report, developed from experiences of a nursing student in the SCI in the FHS. According to the curricular guidelines, the SCI should be performed in the last year of the course, have a professor's supervision and the participation of the nurse from the health service where the internship occurs, being a didactic procedure to better assimilate theory and practice during the course<sup>(9)</sup>.

This study was developed at a FHS, in the western interior of São Paulo, in the first half of 2016. The city has 23 FHS, and the study was conducted at a FHS in the eastern region, where the researcher performed her SCI<sup>(10)</sup>.

The unit physical structure consists of: reception, a screening room, a doctor's office, a dental office, a pharmacy, a vaccine room, a nursing room and a procedure room. A physician, a nurse, three nursing technicians, dentist, dental assistant, eight community health agents, pharmacist, pharmacy technician and a cleaner compose the health team. The FHS also has the support of the Family Health Support Center (FHSC) with the following professionals: nutritionist, psychologist, phonoaudiologist and two resident physiotherapists.

The internship that the student performed in this unit has enabled her to develop the project "Waiting Room". The operationalization of activities in the waiting room happened in five moments: the first moment occurred with the preparation, by nursing students, of a project for the theme that would be addressed in the waiting room, containing introduction, objective, methodology, results and references. After preparing the project, the students sent it to the professors, who have made adjustments necessary for implementing the activities in the waiting room. After correcting the project, it was posted in a program of the educational institution called Learn, available for all students.

The second moment occurred with the organization of the way the activities should happen in the waiting room, with preparation and study of each theme chosen by the students (which would be addressed), and the elaboration of didactic materials: explanatory and illustrative posters and flyers.

The topics covered in the waiting room were discussed and chosen among nurses and professors at the beginning of the semester, in accordance with the national health calendar. A theme was selected for each week, namely:

Preventing cervical cancer and breast cancer; Responsibility toward the environment; Dengue fever; Fighting tuberculosis; Health Promotion: nutrition and physical activity; Cancer prevention; encouraging blood donation; Preventing and combating hypertension; International Workers' Day; Dengue fever prevention: care with the person; Prevention and care: zika and the World No Tobacco Day.

The third moment referred to the approach of the users present in the environment of the waiting room, through the explanation of the available posters, delivery of flyers, development of themes, in addition to clarifying doubts, for everybody's better understanding of the theme. The actions in the waiting room occurred in the period from February to June 2016, in the morning. The proposed timetable for performing the waiting room in the unit was from 07:30 to 08:30 AM.

In the fourth time, the students should launch the activities carried out in the waiting room as a production for the unit in the e-SUS system. The fifth moment was the realization of the description of the results of the project "Waiting Room" by the student, discussed with the nurse and filed in a folder in the unit.

Since this study was an experience report, it was not submitted to evaluation of the Ethics Committee. However, during its development, the ethical precepts of Resolution 466/12 were considered.

**RESULTS AND DISCUSSION**

During the SCI period, various themes in the waiting room were developed, with different forms of approaches, with the participation of 129 members of the unit, as shown in Figure 1.

Figure 1- Characteristics of the waiting room according to theme, objectives, approaches and number of participants. Presidente Prudente, SP. 2016.

Waiting Room Themes	Objectives	Approaches	Number of participants
Preventing cervical cancer and breast cancer.	Guide on cancer prevention methods.	Explanation of the poster with guidelines on cancer prevention.	15
Prevention of several types of cancer	Guide users on good health practices for preventing risk factors for developing cancer.	Delivery of pink and blue knots, symbolizing breast cancer and prostate cancer, respectively. Use of flyers and posters encouraging habit changes such as: physical exercise, good nutrition, reducing tobacco, the HPV vaccine, avoiding exposure to the sun, among others.	30
World No	Guide users on the	Guidelines for reducing tobacco use with	7

Tobacco Day	risks that tobacco causes in the body.	support of folders, posters.	
Health Promotion: Nutrition and Physical Activity.	Guide on healthy foods and physical activity.	Delivery of foods made with healthy ingredients, e.g., a seed of chia.	23
Preventing and combating Hypertension.	Encourage users to change some habits, e.g., decrease the salt intake.	Guidance on hypertension, blood pressure and recording the results on a sheet for control.	10
Responsibility toward the environment: Dengue fever.	Guide users on the dengue fever prevention.	Delivery of flyers and guidance about signs and symptoms of the dengue fever, fighting the mosquito <i>Aedes Aegypti</i> .	25
Encouraging the Blood Donation.	Explain how it occurs and encourage users to donate blood.	Delivery of flyers and explanation of how it works and the criteria for blood donation.	26

Source: Data compiled by authors.

The theme of prevention of cervical cancer and breast cancer occurred on the day of the Papanicolaou Campaign. In addition to collecting biological material for the exam, guidelines for cancer prevention were carried out. Guiding women in the waiting room is essential, because cervical cancer is the third most frequent in women, and the breast is the most common in women from Brazil and around the world, with a higher incidence after 50 years. Several factors increase the risk of developing the disease such as age, heredity and genetics, lifestyle habits, reproductive history and endocrine factors<sup>(11)</sup>.

The theme "Cancer prevention" was discussed with "The importance of healthy life habits" and "The implementation of routine exams". Some types of cancer are not solely hereditary; many cases of the disease relate to life style<sup>(11)</sup>. It is essential to work this issue given the Brazilian mortality profile, where neoplasms are the second leading cause of death in the country<sup>(12)</sup>.

The "Tobacco" was approached in the waiting room in order to sensitize the user about its harms to health, also being a risk factor for developing lung and mouth cancer. According to the World Health Organization, smoking is the leading cause of preventable death in the world. It is responsible for death from chronic lung diseases such as bronchitis and emphysema, lung, esophagus, larynx, mouth, pharynx, kidney, pancreas, stomach, liver, bladder and cervical cancers, and from coronary disease, angina and myocardial infarction, and cerebrovascular accident<sup>(13)</sup>.

The theme "Health promotion: Nutrition and physical activity", users were alerted about the benefits of physical activity and proper

nutrition. In fact, the change in life style reduces risk factors for cardiovascular diseases, which is the first cause of death in Brazil, accounting for approximately 20% of all deaths in the population above 30 years<sup>(14)</sup>.

Another theme discussed in the waiting room was the "Preventing and combating Hypertension". Among cardiovascular diseases, Arterial Hypertension (AH) is considered a serious problem of public health. The risk of developing it increases with age, common in elderly people, representing the most frequent chronic disease in the elderly people who seek health services<sup>(13)</sup>.

Given the prevalence of AH in primary care, the guidelines on the proper control of the systemic arterial pressure, changes in life style and adherence to drug treatment should be often discussed, so that the health professional can remedy users' doubts<sup>(13)</sup>.

"Responsibility toward the environment: Dengue fever" was presented in the waiting room when Brazil was facing a dengue epidemic. The dialog and approach with the user allowed observing a deficiency of knowledge about the signs and symptoms and the locations where the larvae proliferation was more likely to occur, since, in recent years, dengue fever has become a public health problem, due to the high number of cases of the disease, and that the community has a very important role in order to eliminate the mosquito. Faced with this situation, the government has invested in more health actions such as promotion and prevention<sup>(14,15)</sup>.

"Encouraging blood donation" should be a theme more addressed to users at health units, in order to educate the population about this important gesture to save a life. The blood banks

cannot maintain a large amount of blood, thus donors are always necessary.

Blood donation is a worldwide problem. Blood banks have difficulties to maintain a stock that meets users with emergency, thus putting at risk health and life. In Brazil, annually, less than 2% of individuals donate blood<sup>(16,17)</sup>.

To carry out the activities in the waiting room, the nursing student, who participated in the operationalization of the whole process, found some weaknesses for their development, such as difficulty preparing the written project, insecurity in the approach to users and the intensity of noise in the location where the activities in the waiting room occurred.

In relation to the difficulty to elaborate the written project about the themes suggested to the waiting room, the nursing student identified the following reasons: deficiency in scientific technique, search in databases, text formatting in accordance with the standards of the Brazilian Association of Technical Standards (ABNT), the literal reproduction of excerpts from authors and incoherent paragraphs.

A high number of students has difficulties to write and produce texts. A survey conducted with students from the Languages course of the Federal University of Ceará showed that 89% of the students had difficulties to produce a text, unable to convey clear information for the readers. This concern generates anxiety and other psychological factors for the students during college<sup>(18)</sup>.

Another important aspect is that, in Higher Education Institutions, there is a dichotomy between theory and practice, teaching and research, which reflects in reproduction and not in knowledge production. Many students experience scientific writing only in the end of graduation by the compulsory Course Completion Work (CCW). To suppress this deficiency, some institutions foster research through scientific initiation, where the student can research, acquire new knowledge and have the first contact with the drafting of texts with technical language<sup>(19)</sup>.

"Insecurity in the approach and lack of receptivity of some users" was also a difficulty encountered by the nursing student, because they hindered the development of communication during the execution of the project, mainly in the process of communicating with the user.

Developing skills is very important for the student, such as communication. The presence of the supervising professor is essential to provide support in the interaction between the student and users and with the healthcare team, because there is a resistance in the bond establishment, in the student's introduction in the health team, and lack of security to talk to users. This difficulty is part of the professional development<sup>(20)</sup>.

Another aspect that interfere in the communication were "noises present in the unit physical environment", where the waiting room occurred. The literature describes the waiting room as an inappropriate site, due to lack of space, and a large number of people, as well as the phone ringing, which causes noise in communication<sup>(21)</sup>. This intensity of noise affected the implementation of the project of the waiting room, because the noise did not allow communicating effectively, since it can prevent the receiver from understating the sent message, hindering communication. In this way, the dialog between professionals and users must be clear, because the message to the user may have no meaning, or it can be understood wrongly, without knowledge exchange<sup>(22)</sup>.

Many times, the student could not develop the activities proposed in the waiting room due to other demands of the unit, such as the preventive collection that occurred by spontaneous demand and, for this reason, she had to stop the activity to make the woman's health consultation.

In this perspective, educational activities in the waiting room are not performed due to the team's work overload. A study with 20 nurses from a FHS of Paraná demonstrated the same perception, in which the nurses reported not being able to attend educational activities for reasons of great demand of users in the unit, lack of personnel in the team, unit management, bureaucratic work and meetings, since these activities occupy an enormous time, generating service overload<sup>(23)</sup>.

In the nursing student's vision, the waiting room favors communication with the user. This ability is important for the academic formation and preparation for professional life. It also provides an exchange of knowledge that can improve insecurity and serves as a support for the student to identify the best strategies to communicate with the user in a clear and understandable way.

The communication is essential to achieve the process of health promotion that requires

skill, competence and attitudes, because communication allows creating a bond with the user, confidence, and collecting information on his/her health condition to be able to provide appropriate assistance. Bond formation among team, community and family relates to listening, humility and solidarity between each one, with respect to the subject and with the development of the dialog<sup>(24)</sup>.

Therefore, nurses should realize their place in communication, its importance for ensuring the care quality, representing the receiver and the transmitter, transmitting message in a way so that the user understands, being clear and direct in the subject, to be properly understood, without confusion or generating doubts. Communication allows promoting a better quality of life for the population<sup>(25)</sup>.

## CONCLUSION

The implementation of activities in the waiting room should provide health education actions that contribute to an interaction between the nursing student and FHS users, as well as favors the exchange of knowledge for both. These activities, in addition to providing the exchange of experiences, also contribute to the academic training.

In relation to the addressed topics, a community awareness may have occurred, because spaces like these allow users to express themselves, advise, inform and reflect on the proposed themes, while waiting for the attendance. They also enabled the team's awareness about the importance of such actions for health promotion and prevention.

The experience acquired by the student identified some weaknesses that have occurred in the development of activities in the waiting room, such as difficulty preparing the written project of waiting room, approach insecurity, lack of responsiveness of users and intensity of noise where the activities in the waiting room occurred.

Performing educational activities in the waiting room provided the student a moment to improve her communication with the user, understand the need for health promotion and prevention of health aggravations and put into practice public policies. In this perspective, this activity has helped in the development for a professional preparation for the future.

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