52 - PERCEPTIONS ON A FAMILY HEALTH TEAM CONCERNING A TAI CHI CHUAN PROGRAM FOR ELDERLY IN A FAMILY HEALTH UNIT

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INTRODUCTION

The program "Saúde da Família" (Family Health) was created in 1994 by the Health Ministry with the main purpose of reorganize attention towards health in new bases and also replace the traditional model in order to make it an issue more intimate to families, improving quality of life for Brazilians. The program strategy involves preventative actions, promoting and recovering people's health fully and continuously.

Due to a great number of sedentary people and the consequent damages to health providing physical activities became an important attitude concerning health promotion. Such relevance may be ratified by a World Health Organization decree encouraging regular physical activities and disseminate the consequent benefits to people, even to those in special conditions or bearing heart diseases, mental illness or dependent elderly. A way to promote a healthier lifestyle consists in practice physical activities in groups once social sharing is encouraging and can be easily provided by "Saúde da Família" program (RAMOS, 2004). It is relevant to point out that health matters are not only related to medical assistance and medicines; promoting "healthy lifestyles" is faced by the health system as strategic attitude (BRASIL, 2006).

Tai chi chuan (VERHAGEN et al., 2004) consists in individual movements synchronized in a soft and continuous way and can be conducted as a group practice. The movements are integrated through deep breathing and mental concentration; the practitioner can achieve harmony between body and mind. Tai chi chuan has been proved as equivalent to a moderate intensity exercise or to walk 6 km/h (LEE, LEE & WOO, 2007).

It is equally relevant to highlight that implicitly or explicitly the adoption of a regular physical activity practice, physical exercises or sports as a component in health promotion has been stressed since the opening of the International Conference on primary health care (Alma-Ata Declaration, ONU, 1978) and subsequently being ratified in the 1st International Conference on health promotion carried out in Canada (ONU, 1986), also known as Ottawa Charter.

The aim was to describe and analyze perceptions from a team taking part in "Saúde da Família" program (doctors, nurses and community health workers) concerning the conduction of a six-month tai chi chuan program for elderly in Family Health Group.

METHODOLOGY

A qualitative approach study with a focus group as an instrument to evaluate perceptions from a team of "Saúde da Família" program concerning the insertion of a six-month tai chi chuan program in the Family Health Unit. The focus group technique is a qualitative non-directive technique with results aiming to control groups of people discussions. The groups are formed by participants with common characteristics and are encouraged by the facilitator to establish a conversation and share experiences interacting about their own ideas, feelings, values and difficulties.

Vaughn, Schumm & Sinagub (1996) justify the focus groups strategy emphasizing four important aspects: 1) to enable the comprehension existent in the relationship between an stimulus and an effect; 2) to provide information in order to help interpret data which could any other way be considered conjectures and 4) to offer alternative interpretations of results which may not be obtained using traditional quantitative methods.

The interview script (BOARD 1) was pre-conceived and composed of fundamental matters.

Board 1: Focus group interview script

Date: ____/____/_____	Beginning:	End:
How can the team evaluate the introduction of this research Project concerning the Saúde da Família Unit?		
Users (TCC elderly) start to use more services offered by the unit?		
Users start to follow medical recommendations (diets and physical activities)?		
What is this work importance to Family Health Strategy?		
Make other remarks if you consider them to be relevant.		

After conducting the focus group due to the nature of the phenomena we investigated we used a content analysis to treat data as proposed by Bardin (1977,. 38), that defines it as a group of techniques to analyze communication using systematical procedures and message content descriptions objectives.

The technique to analyze the content was composed of three stages, definied by Bardin (1977): 1st) the pre-analysis, 2nd) material exploration and, 3rd) results results and comprehension. Regarding analysis we conducted a fluctuating reading in order to widely approach the meaning reported by those interviewed. Concerning material exploration we tried to identify meaning issues using codification through categorization technique, that is the classification of elements in categories building what was reported in focus groups. And finally in order to comprehend results we gathered convergent and divergent contents establishing thus a comparison between tendencies detected in testimonials.

The interview in form of focus group was conducted at the health unit with a doctor, one nurse and three health community agents lasting 53 minutes. One of those professionals did not manifest during interview. The regionalisms marked in speech were respected.

RESULTS AND DISCUSSION

1st category: Tai Chi Chuan and the evaluation of Family Health Unit

Through points observed by the team we verified several questionings especially concerning the demand of activities offered by the health unit; the proposed study appeared as extension activity of Open University of Third Age. One of the people

interviewed was worried about the demand created after a scientifical research and the lack of researches to collect data and to bring their knowledge into the improvement of health units.

> [...] to the units or the study showed a demand and with that created an actual demand,...you notice peoples' satisfaction, you see that currently with this Project,...people who usually did not come to these units before, people who now come to go through...so it started after the Project...these very same people who come here and did not used to come before or who would hardly imagine themselves here certainly changed their mind, yes…the routine in a way that users with a series of problems and not attending tai chi…so, routine is changed, we see people sharing. I think it is nice. (Interviewed 1)
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> [...] Yes, it promote human beings, it came to add activities into what we did not have in this area, you see, so, such instrument came to add something into this promoting area. [...] I think it is nice, people have a differential activity, right? If you depend on them (people) there would not be conditions, there would not be the access something like that, right? I also think it is very important for us to have conditions to offer these things to people. (Interviewed 2)
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> [...] It is a Project which came to really agregate to what we already have...then, after the Project was over activities continued, right...it became an extension of Third Age university ok...if it did not reach such status the Project I guess would be very unlikely to nowadays have the difficulty to hire an extension of the Project here, I guess this is one of the things I Always repeat, right, even as example...when some researcher conducts a study for a research project I say that such project is not over when the project is over, right, ...the collection officially ends, right, offer something, people enjoy it, the collection ends as mastering ends. There must be a new beginning then right, for people who enjoyed it, right [...] It was very nice. My evaluation for the project is that only few projects become actual activities, you give something and people enjoy it [...] (Interviewed 3)

2nd category: Tai Chi Chan elderly and the use of health units services

A part of the professionals did not notice a greater use of health services provided by units for elderly taking part in the Project. Such other services units offer are: gynaecology, mental health, hypertensives groups, food reeducation, oral health, women health, healthy lifestyle. But there was a perception that once taking part in proposed physical activities elderly made other people interested in the very same practice going through such activity and became better treated by community health agents.

> [...] to a service like that I do not know. Not necessarily for appointments, right? It created a demand for services here. People who came to the units to practice physical activities started to…they start telling their mothers and aunts…start coming here to practice tai chi [...] so…to watch who attend, who is there, is interesting. So, then it begins some boundings: “hey, you attend that group? So, let's go, it will be nice!” and then one takes the other [...] of course that the change after taking part in the project is very noticeable. But for sure, I mean...isn't there a couple attending? That sir...he is in the group. He came to the appointments and so but there was not the practice of physical activity, there wasn't any. But a kind of bound was created. (Interviewed 1)
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> [...] but what calls attention to the service is attendance. Because, there are like in my area who attend, most of them are happy about the activity. Some people you see quality of life after...even communication, they started acting more spontaneously, right? Some couples have issues and they started coming here. You see how people adhere to the program? They treat you better when you come to the visits, talk about lifestyle which improved, social sharing, right? It improves bounds, both at units and outside them because of the group, you know? (Interviewed 2)

3rd category: elderly and medical recommendation (diet and physical activity)

Such category was formulated grounded in frequent diet and physical activities indications in prescriptions while medical records information analysis was conducted. What we are able to record is that tai chi chuan was consisted of more than one activity proposed by the units and through information given by teams it was not possible to conclude a greater adhesion from elderly to medical recommendations on diets and physical activities.

> [...] that I can't tell you. Orientation and tai chi they started. I got say that: what I can say is that it is one more day of physical activity...you have a whole range of opitions…of course that when we…, the thing is good, I recall that up to January/February we attend all sessions and every time I did it was to see those taking tai chi at PIC (Community integration program offered by the city). What I see is that, like, sometimes PIC is known, people go, but it is not everyone who enjoys lifting weight, sometimes they are afraid of, afraid of taking the exercise and hurt themselves or they have some limitations to move themselves and sometimes can be damaged [...] And tai chi due to softer movements and theoretically not presenting overcharge I guess is an attractive aspect. But then I can't state that after tai chi users practice more physical activities. (Interviewed 1)
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> [...] I guess tai chi is importante, it is. Because if it were simple anyone would be able to take it, but it is just one group. And tai chi is so differential, there isn't overcharge. And sometimes users are a little chubby or have osteoporosis and then say: “oh, I can't take it”. People believe all sorts of things, right? About physical activities. And tai chi does not present weight lifting, everything is soft so “I can take it because I won't fall”. It is safe, right? (Interviewed 4)

4th category: Tai Chi Chuan and Family health strategy

To answer such matter the health team was in silence for quite some minutes. In perceptions brought by family health teams we noticed that the focus of primary care is still towards diseases partially due to great demands to serve people. Heath professionals see themselves swallowed by services and often cannot priorize health prevention, promotion and recovering actions, a basis of Family health strategies which seeks to reorganize the practice of health care replacing the traditional model bringing health closer to families and thus improve Brazilians quality of life.

> [...] the fact you are presente here in the unit was good. The presence of a physical education professional twice more a week, physical activity with users not having to move from long distances to go through orientation with a teacher is such a privilege! We can offer physical activities such as tai chi chuan, it is almost a dream. It is such a privilege to be able to have someone to offer our users something like that, it improve the user/unit relationship aspects (not doctor/patient), improves self-steem, people are better because they are taking physical activities, and also other benefits: balance, memory. It would be good if we had tai chi chuan in

> public, open to everyone. [...] When you work with health promotion in order to improve quality of life…maybe for some units, where there are other issues tai chi does not play a role so...you see that, for instance, if I had to choose a health professional to include into Family health strategies I would choose a psychologist, a nutriotionist, a physical education teacher, a phonoaudiologist; who would I wish here? It depends on services needs. (Interviewed 1)
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> [...] tai chi removes the focus on the disease, right? And what we see in health professionals is that they will pay attention to what is related to diseases, right? You can see, physiotherapists will pay more attention to promotion matters? Isn't the first thing: he will pay attention to recovering matters, rehabilitation and so on, right? And then I guess it is really useful (tai chi chuan) because we have this purpose of family health to work with things which enlarge all of this, you know? We can offer further things; not only focus on the disease. We can be also working at the unit, centered in the unit other than only visits, it ends up to be focused on the disease after all. So I guess tai chi changes it a little bit, right? Because then you not only promote but also prevents [...] as there is a great demand for sick people, I noticed it wears us out, we cannot stop treating diseases to promote health. [...] if we are not careful we are swallowed by visiting, we do not prevent (users), we can't do anything elese. (Interviewed 3)
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> [...] there is a couple in my area, and the lady was very introvert and then she started to take part in tai chi group and I noticed that she speaks more now, she's reaching an autonomy that up to then she didn't own, she depended on her husband for everything, you know? So it is not only promotion. It ends up preventing from later problems, she used to suffer from domestic violence, and now she knows how to face it, you know? It improves self-steem, right? (Interviewed 2)

5th category: Additional comments

Such category aimed to approach other issues that were not considered when the interview script was built. Were brought up some questioning on possibilities to implemment a preventive program at adult age for physical activities. Other thought brought up a discussion on other professionals ' participation apart from the matrix team to be integrated into Family health team.

> [...] only one question: there are our clientes here, so easy, right? Now, I think: don't you think about a near future investing in such activity for other adults who in five years, ten years will be elderly? To be already working with something preventive, not promoting? [...] Adults from 40 to 50? (Interviewed 2)
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> [...] I do not think it is not integrated once every matter discussed in the Project while taking the extension course counted with the presence of Joab discussing. What I am saying is about salary once a study was conducted, you stay during that period, you will leave it will be over and we will not have that anymore [...] So, maybe if it were a part of a matrix based study, that is, you provide a secondary service...a team of, for instance, five units with an activity like this every day. Maybe to me it would be important, not only the physiotherapist, not only Physical Education teachers, but having an appointment with doctors from different branches. [...] (Interviewed 1)

FINAL REMARKS

This study revealed that the insertion of tai chi chuan may be a viable and pleasant alternative and also relevant to the range of activities developed in Family health strategies. Another point to be stressed is the homologation of Ordinance 154, January, 24, 2008 creating units to support Family health (NASF) constituted by professionals from different knowledge areas in order to act as partners for professionals in Family health (ESF), sharing practices in areas under ESF charge and bringing many opportunities for professionals in Physical Education as well as other professionals acting in health promotion and prevention.

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PERCEPTIONS ON A FAMILY HEALTH TEAM CONCERNING A TAI CHI CHUAN PROGRAM FOR ELDERLY IN A FAMILY HEALTH UNIT

ABSTRACT

Quality study using an interview with a focus groups as tool. The aim was to describe and analyze perceptions of a family health team regarding the insertion of a six-month tai chi chuan program for elderly in family health units.T ai chi chuan is a traditional Chinese exercise practiced for centuries and part of Chinese traditional medicine consisting of a set of movements carried out in a slow and continuous way where mind and body are in constant interaction; has moderate intension and is often conducted as a collective exercising training. After conducting interviews we used content analysis as a method to treat data. In perceptions from family health team we noticed that the focus of basic care is still centered on the disease partially due to the great demand for services to communities. This study allowed the conclusion that tai chi chan may be a viable and pleasant alternative to maintain a healthy life style when providing care for people at aging processes and also that the practice may be important to the range of activities developed in strategies for family health and to Physical Education professionals in a multi-professional health team.

KEY WORDS: elderly; tai chi chuan; family health program

PERCEPTIONS D'UNE EQUIPE DE SANTÉ DE LA FAMILLE LIÉS A LA RÉALISATION D'UN PROGRAMME DE TAI CHI CHUAN POUR LES PERSONNES AGÉES DANS LES NOYAUX DE SANTÉ FAMILIALE

RÉSUMÉ

Ètude d'approche qualitative en utilisant comme outil un entretien de groupe focal. L'objectif a été faire une description and analyser les percéptions d'une equipe de santé familiale qui se refére à insertion d'un programme de tai chi chuan, pour six mois, dans les noyaux du santé familiale. Le tai chi chuan est un traditionnel exercice chinois, qu'est pratiqué pendant des siècles, partie intégrante de la médecine traditionnelle chinoise et se compose d'une série de mouvements qui sont effectués en mode lent et continu, où l'esprit et le corps sont en interaction constante, l'intensité possède modérée et est souvent fait comme un programme d'exercice collectif. Aprés la réalisation de l'entretien, a été utilisé l'analyse de contenu comme une méthode pour traiter les données. Dans les perceptions soulévees par l'equipe de santé familiale a été perçue que l'objet da l'Atention Primaire est encore centré sur la maladie due, en partie, par les grands exigences pour des soins dans la population. Cette recherche a conclu que le tai-chi peut être une solution viable et agréable pour le maintien d'un mode de vie sain dans la prestation de soins à les personnes agées ainsi, qui peut être important pour la liste des activités qui sont developées dans la portée de la Stratégie de Santé Familiale, qui demontre être un outil important pour la pratique professionnelle de l'éducation physique dans une équipe de santé multidisciplinaire.

MÓTS-CLÉS: personne agée, tai chi chuan, programme santé familiale

PERCEPCIONES DE UN EQUIPO DE SALUD DE FAMILIA EM LA IMPLEMENTACIÓN DE UN PROGRAMA DE TAI CHI CHUAN PARA ANCIANOS EN EL NÚCLEO DE SALUD DE LA FAMILIA.

RESUMEN

Estudio de un abordaje qualitativo utilizando como instrumento la entrevista en grupo focal. El objetivo fue describir y analizar las percepciones de un equipo del Programa Salud de la Familia referente a la inserción de un programa de tai chi chuan durante seis meses para ancianos en el Núcleo de Salud de la Familia. Tai chi chuan es un ejercicio tradicional chino, practicado hace siglos, es parte integrante de la medicina china tradicional e consiste en una serie de movimientos que son realizados de manera lenta e continua, donde mente y cuerpo estan en constante interacción; posee intensidad moderada y es frecuentemente realizado como un programa de ejercicios colectivos. Después de realizadas las entrevistas, utilizamos el análisis del contenido como método para tratar los datos. En las percepciones levantadas por el equipo de Salud de la Familia percibimos que el foco de atención primaria todavia se centra en la enfermedad debido en parte a las grandes demandas de atención en la población. Este estudio permitió concluir que el tai chi chuan puede ser una alternativa viable, y agradable para mantener un estilo de vida saludable, proveer de cuidados a la población en proceso de envejecimiento y que puede, a su vez ser importante para el conjunto de actividades desarrolladas en el ámbito de la Estratégia de Salud de la Familia y a su vez, que da oportunidades a los profesionales del área de Educación Física en el equipo multidisciplinario.

PALABRAS-CLAVES: anciano; tai chi chuan; programa de salud de la familia.

PERCEPÇÕES DE UMA EQUIPE DE SAÚDE DA FAMÍLIA REFERENTE À REALIZAÇÃO DE UM PROGRAMA DE TAI CHI CHUAN PARA IDOSOS EM NÚCLEO DE SAÚDE DA FAMÍLIA

RESUMO

Estudo de abordagem qualitativa utilizando como instrumento a entrevista em grupo focal. O objetivo foi descrever e analisar as percepções de uma equipe do Programa Saúde da Família referente à inserção de um programa de seis meses de tai chi chuan para idosos em Núcleo de Saúde da Família. O tai chi chuan é um exercício tradicional chinês, praticado há séculos, parte integrante da medicina tradicional chinesa e consiste de uma série de movimentos que são realizados de modo lento e contínuo, onde mente e corpo estão em constante interação; possui intensidade moderada e é frequentemente realizado como um programa de exercícios coletivos. Depois de realizadas as entrevistas, utilizamos a análise de conteúdo como método para tratar os dados. Nas percepções levantadas pela equipe de Saúde da Família percebemos que o foco da Atenção Primária ainda é centrado na doença devido, em parte, pelas grandes demandas por atendimento na população. Esta pesquisa permitiu concluir que o tai chi chuan pode ser uma alternativa viável e agradável para a manutenção de um estilo de vida saudável na provisão de cuidado em populações em processo de envelhecimento e também, que pode ser importante para o rol de atividades desenvolvidas no âmbito da Estratégia Saúde da Família, demonstrando ser uma ferramenta importante para a atuação do profissional de Educação Física em uma equipe multiprofissional de saúde.

PALAVRAS-CHAVE: idoso; tai chi chuan; programa saúde da família.