12 - THE PARTICIPATION OF PROFESSIONAL PHYSICAL EDUCATION IN A CORE OF SUPPORT TO FAMILY HEALTH: PROFESSIONAL ROLE BEYOND THE IMPLEMENTATION OF PHYSICAL ACTIVITY

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INTRODUCTION

Scholars contend that since the creation of the first Physical education course in Brazil in 1931 noted a tendency to training in the area of health (GUARDA; MARIZ; SILVA, 2009), with the inclusion of the course in this area in the year 2000 (HALLAL et al., 2007) and with implementation of the National Policy of Health Promotion in 2006 (BRAZIL, 2006), which advocates among his specific actions the promotion of bodily practices/physical activities as an action of population-level health promotion within the Sistema Único de Saúde (SUS), the area of public health has become a fertile field of professional performance for physical educators.

In this sense, the Núcleos de Apoio a Saúde da Família (NASF) is a field of expertise of these professionals. The NASF were created by Ordinance GM No. 154 of 2008 with the goal of supporting, enlarge, improve attention and health management in the basic attention, contributing to the integration of the Estratégia Saúde da Família (ESF) on the network of primary health care services within the SUS. These cores are constituted by multiprofessional teams composed of a minimum of five university-educated professionals - NASF 1 – and by at least three professionals – NASF 2-can compose these teams: psychologist, social worker, pharmacist, physiotherapist, speech therapist, gynecologist, physical education professional, homeopath, acupuncturist, nutritionist, medical pediatrician, psychiatrist and occupational therapist. (BRASIL, 2009).

However, public health issues still cause certain estrangement among some academic degrees in physical education. Study conducted by Jerônimo; Rech and Domingues (2013), showed that the perception of undergraduate students, both in the course of degree, when Bachelor, about professional performance spaces is still somewhat limited, especially with regard to NASF, although the literature demonstrates that the health theme is present in the curricula of the graduations. Study conducted in 12 courses of the physical education in the State of Paraná demonstrated that even in the course of Degree curriculum components that address the health theme, taking in the titles of the subjects the word health or health promotion (BRUGNEROTTO; SIMÕES, 2009).

However, the formation of these professionals, regarding public health theme is still debatable. In this context, the multiprofessional residency in health configure itself as important training spaces. Accordingly, the College of education, College of nursing and the Institute of psychology of the Universidade Federal do Rio Grande do Sul, through the Núcleo de Educação, Avaliação e Produção Pedagógica em Saúde (EducaSaúde), since 2005 coordinates the Residência Integrada Multiprofissional em Saúde Mental Coletiva, which has among its practical scenarios a NASF (CECCIM, 2006).

The purpose of this article is to present the perceptions of a professional of physical education about their participation, through Residência Integrada Multiprofissional em Saúde Mental Coletiva coordinated by the EducaSaúde of Universidade Federal do Rio Grande do Sul, in a Núcleo de Apoio a Saúde de Família of Porto Alegre, Rio Grande do Sul, Brazil.

METHOD

Qualitative study with methodological approach of action research, in which through participant observation were collected the researcher is perception about their participation/intervention as a resident of the EducaSaúde at the Universidade Federal do Rio Grande do Sul in the Núcleo de Apoio à Saúde da Família - Cruzeiro, in the municipality of Porto Alegre, Rio Grande do Sul, Brazil. The participation in this practical scenario occurred from April to November 2014, two days a week in full-time and the experiences were recorded in a field journal for further analysis.

RESULTS AND DISCUSSION

The NASF Cruzeiro began in 2011 and his current team is composed of six professionals: a social worker, a nutritionist, two physiotherapists, a psychiatrist, a doctor gynecologist, which cover the five ESF units totaling nine teams.

As a resident could intervention on two fronts of action: as a professional and as a professional/resident/student. Externality that the residence offers from a hybrid figure worker/student, made a diagnosis of both the staff of NASF and the territory in which the team performs the matrix support. From this panoramic vision team/territory, I observed two types of demands: an external to the NASF concerning matrix support guidelines, territorialization and insertion of ESF units in the health network and other internal demand, which in turn splits into two lines of action: one concerning the planning of actions on the territory (intraequipe demand) and referring to the team's relationship with management/manager of the health district.

After the diagnosis, the works were in these two lines of action: in the community with accompaniment of different actors of the multidisciplinary team of the NASF within the logic of evaluative support placed by Campos and Domitti (2007), seeking to expand the clinic, improvement in interaction between matriciadas teams, overcoming the biomedical vision centred on individual consultation and the excessive medicalization, through interdisciplinary work and "co-management systems" addressing topics such as greeting, territorialization, empowerment of individuals served by the network of health services and of the employees of the network.

The team of the NASF Cruzeiro develops different actions on the territory of their service area: shared queries; home visits; participation in the meetings of the team of matriciadas units, discussing cases, wheels of communitarian therapy; In addition to developing actions along the District manages such as planning and implementation of training of community health Agents, monitoring of subjects served by health network and the main demands in health in the district, through participation in monitoring/surveillance teams in health.

This whole process puts the NASF Cruise, still in formation, in a situation of stresses between the demands and the demands required by management of the district, generating such a situation of two kinds of demands: one external, the territory (role of the NASF) and another intern on the hierarchical relationship placed by the management of the district. This scenario of tension is also demonstrated by Silva et al. (2012), to list the different work situations experienced by professionals in the basic attention of São Paulo and their perspectives in relation to the work of NASF and that in fact I observed in the processes of team work of the NASF Cruise, namely, working to enhance the completeness of the care, acting directly on biomedical culture of referrals and unnecessary medicalization.

However, I could also observe and intervene more directly in the relationship between NASF Cruzeiro team and district management, in the sense of trying to empower the team to stimulate critical reflection along the management about quantitative evaluative processes that do not reflect the effectiveness nor the quality of actions developed by the team, difficulty is also reported by Silva et al. (2012).

The difficulty in identifying role, Constitution, functioning, relationship with the ESF teams and interdisciplinarity (SILVA et al., 2012), experienced by the team of NASF Cruise undermines the notion of matrix support leading to lack of time to implement broad actions in the territory, since a lot of staff time is devoted to actions by the District manages demands in some kind of recovery by a production which in my view does not match the guidelines of NASF (BRASIL, 2009), which puts the team in a sort of bureaucratic production line approaching the public health service to private capital logic of the minimal cost and maximum production – "minimax"-what can even compromise the mental health of these workers (BERNARDO et al., 2011, p. 9).

In relation to the work of physical Educator in NASF, the literature demonstrates that its action is concentrated on specific actions within its core professional groups of physical activity with stretching exercises, muscle strength, hiking, motor coordination and playful activities. The professionals claim that there is little information about public health as an undergraduate, but teamwork allows collective actions in the community with the involvement of a large number of participants, in some cases, more than ninety subjects. On the other hand, the authors claim that there is a need to increase the coverage from new directions (SOUZA; LOCH, 2011). Maybe actions outside the core professional training?

In this sense, as stresses Scabar; Pelicioni and Pelicioni (2012), the current configuration of the SUS requires professionals with profile, among these the Physical Education, including overcoming the perspective of individualized and fragmented action that puts the subject, health network users in a passive situation (patients) the expected of the individual consultation and medication. The authors resaltam this profile is proposed by the Cirriculares National Guidelines, however such a policy is still being implemented in Physical Education courses, as well as being scarce in the literature studies that demonstrate the physical educator is participation in SUS.

In this way, membership in NASF Cruise through Multidisciplinary Integrated Residence in Collective Mental health of EducaSaúde, as a worker/student hybrid figure allowed the extrapolation of the professional core of the Physical Education with the implementation of actions within the team of NASF through discussions on wheels of conversation about inter/transdisciplinary approach, field and core knowledges, questioning circulation spaces of the subject (the city) served by health network, "its artifacts of production of senses and cultures" and listen and greeting of the singularities. Inherent in any discussion of health professional regardless of core training (CECCIM, 2006, p. 2).

In this sense, Campos (2000), with a lot of property lifts themes for discussion addressing the relationship between field of work and vocational training of core public health, presenting a dialectic proposal the author suggests going beyond the structure that is placed, extrapolate the core training and assume a position of transcendence and transversality and from the expanded clinic observe the subjects and the processes of health/disease beyond biological bias, but also as a construction sociohistórica in a health promotion perspective as a potentiator of life stories based in the territory, in the community.

CONCLUSION

Participation in the Núcleo de Apoio a Saúde da Família - Cruzeiro - through Residência Integrada Multiprofissional em Saúde Mental Coletiva of EducaSaúde in fact enabled an act beyond the specific core physical education, which is consistent with the National Policy of Health Promotion, which puts the body practices and physical activities such as health promotion factors that meets the guidelines to the NASF and the National Curriculum Guidelines.

Therefore, considering the prospects of development of the health system and the profile expected of professionals such participation had major reverberations, both for the researcher/worker/resident/student as for the team, which can observe and experience the experience of a physical educator who can and should be in addition to its core professional training, seeking integrality of subjects served by health network through expanded clinic, of overcoming the bias, individualized consultation biomedical, “farmacologização”, medicalization and inter/transdisciplinary approach. In this sense, the NASF can be considered as spaces for professional leadership, beyond the specific core Physical Education professional training.

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ABSTRACT

With the implementation of the national policy of Health promotion public health area has become an excellent professional performance for the physical educator. An important space for this are the nuclei of support to family health (NASF), comprising multiprofessional teams service working in matrix support logic and interdisciplinarity seeking integrality of attention to health from the territorialisation of attention. The aim of this article was to present the perceptions of a professional of Physical Education about their participation, through Residência Integrada Multiprofissional em Saúde Mental Coletiva coordinated by EducaSaúde da Universidade Federal do Rio Grande do Sul, in a Núcleos de Apoio a Saúde da Família (NASF), in the municipality of Porto Alegre, Rio Grande do Sul, Brazil. Qualitative study with methodological approach of action research with participant observation, were collected the researcher's perception about their participation/intervention as a resident of EducaSaúde in the NASF - Cruzeiro, in the period from April to November 2014, the experiences were recorded in a field journal for further analysis. We observed two types of demands: an external to the NASF concerning matrix support guidelines and other internal demand, referring to action planning in the territory and the relationship with the management team/manager of the health district.In a hybrid position/resident/student worker was unable to participate in ongoing actions and intervene in the hierarchical relationship manager/team, discussing listening and reception of singularities, expansion of the clinic, interdisciplinarity and social construction of the processes of health/disease, from the notion of transcendence of the professional core of training towards the field of practices and knowledge on public health. In this sense, the NASF can be considered as spaces for professional leadership for physical education.

KEYWORDS: Motor Activity. Health Services. Collective Health.

LA PARTICIPATION DE PROFESSIONNELS DE L'ÉDUCATION PHYSIQUE DANS UNE BASE DE SOUTIEN POUR LA SANTÉ FAMILIALE : RÔLE PROFESSIONNEL AU-DELÀ DE LA MISE EN ŒUVRE DE L'ACTIVITÉ PHYSIQUE

RÉSUMÉ

Avec la mise en œuvre de la politique nationale de promotion de la santé publique santé région est devenue une excellente performance professionnelle pour l'éducateur physique. Un espace important pour cela sont les Núcleos de Apoio a Saúde da Família (NASF), comprenant le service multiprofessionnelle équipes travaillant dans la logique de prise en charge de matrice et interdisciplinarité cherchant l'intégralité de l'attention à la santé de la territorialisation de l'attention. Le but de cet article était de présenter les perceptions d'un professionnel de l'éducation physique sur leur participation, la résidence intégrée multidisciplinaire en santé mentale Collective coordonnée par EducaSaúde da Universidade Federal do Rio Grande do Sul, un NASF dans la municipalité de Porto Alegre, Rio Grande do Sul, Brésil. Étude qualitative avec une approche méthodologique de la recherche-action avec l'observation des participants, ont été recueillis de perception du chercheur sur leur participation/intervention en tant que résident de EducaSaúde dans le NASF - Cruzeiro, dans la période d'avril à novembre 2014, les expériences ont été enregistrés dans un journal de terrain pour une analyse ultérieure. Nous avons observé deux types de demandes : externe à la NASF concernant les lignes directrices de la matrice alimentaires et autre demande intérieure, en se référant à l'action de la planification du territoire et de la relation avec le gestionnaire/équipe de gestion du district de santé. Chez un hybride position/résident/étudiant travailleur n'a pas pu participer à des actions en cours et à intervenir dans l'équipe/gestionnaire de relation hiérarchique, discutant de l'écoute et la réception des singularités, l'expansion de la clinique, l'interdisciplinarité et la sociohistórica construction des processus de santé/maladie, de la notion de transcendance du noyau professionnel de formation vers le champ des pratiques et des connaissances sur la santé publique. En ce sens, le NASF peut être considéré comme des espaces de leadership professionnel pour l'éducation physique.

MOTS-CLÉS: Activité Motrice. Services de Santé. Santé Collective.

LA PARTICIPACIÓN DE PROFESIONALES DE EDUCACIÓN FÍSICA EN UN NÚCLEO DE APOYO A LA SALUD DE LA FAMILIA: PAPEL PROFESIONAL MÁS ALLÁ DE LA EJECUCIÓN DE LA ACTIVIDAD FÍSICA

RESUMEN

Con la implementación de la política nacional de promoción de la salud pública salud zona se ha convertido en un excelente desempeño profesional para el educador físico. Un espacio importante para esto son los Núcleos de Apoio a Saúde da Família (NASF), que comprende servicios de equipos multiprofesionales en matriz apoyo lógica y la interdisciplinariedad busca la integralidad de la atención a la salud de la territorialización de la atención. El objetivo de este artículo fue presentar las percepciones de un profesional de la educación física acerca de su participación, a través de Residência Integrada Multiprofissional em Saúde Mental Coletiva coordinada por EducaSaúde da Universidade Federal de Rio Grande do Sul, en un NASF en el municipio de Porto Alegre, Rio Grande do Sul, Brasil. Estudio cualitativo con enfoque metodológico de investigación-acción con observación participante, fueron recogidos de la percepción de los investigadores acerca de su participación e intervención como un residente de EducaSaúde en NASF-Cruzeiro, en el período comprendido entre abril y noviembre de 2014, se registraron las experiencias en un diario de campo para su posterior análisis. Observamos dos tipos de exigencias: un en el exterior de la NASF sobre matriz soporte directrices y otra demanda interna, refiriéndose a la acción de planificación en el territorio y la relación con el jefe de administración del distrito de salud. En un híbrido de posición/residente/estudiante trabajador fue incapaz de participar en las acciones en curso e intervenir en el relación jerárquica Gerente/equipo, discutiendo escuchando y recepción de singularidades, la expansión de la clínica, la interdisciplinariedad y sociohistórica la construcción de los procesos de salud/enfermedad, de la noción de trascendencia del núcleo profesional de formación hacia el campo de prácticas y conocimientos sobre la salud pública. En este sentido, la NASF puede considerarse como espacios para el liderazgo profesional de la educación física.

PALABRAS CLAVE: Actividad Motora. Servicios de Salud. Salud Colectiva.

A PARTICIPAÇÃO DO PROFISSIONAL DE EDUCAÇÃO FÍSICA EM UM NÚCLEO DE APOIO A SAÚDE DA FAMÍLIA: PROTAGONISMO PROFISSIONAL ALÉM DA APLICAÇÃO DE ATIVIDADE FÍSICA

RESUMO

Com a implementação da Política Nacional de Promoção da Saúde a área da saúde pública vem se tornando um excelente de atuação profissional para o educador físico. Um espaço importante para isso são os Núcleos de Apoio a Saúde da Família (NASF), serviço composto por equipes multiprofissionais que trabalham na lógica do apoio matricial e da interdisciplinaridade buscando a integralidade da atenção à saúde a partir da territorialização da atenção. O objetivo deste artigo foi apresentar as percepções de um profissional de Educação Física, acerca de sua participação, através da Residência Integrada Multiprofissional em Saúde Mental Coletiva coordenada pelo EducaSaúde da Universidade Federal do Rio Grande do Sul, em um NASF no município de Porto Alegre, Rio Grande do Sul, Brasil. Estudo qualitativo com abordagem metodológica da pesquisa ação com observação participante, foram coletadas as percepção do pesquisador sobre sua participação/intervenção como residente do EducaSaúde no NASF - Cruzeiro, no período de abril a novembro de 2014, as vivências foram registradas em um diário de campo para posterior análise. Observou-se dois tipos de demandas: uma externa ao NASF relativa às diretrizes do apoio matricial e outra demanda interna, referente ao planejamento das ações no território e à relação da equipe com a gerência/gestor do distrito de saúde. Em uma posição híbrida trabalhador/residente/estudante foi possível participar das ações em andamento e intervir na relação hierárquica equipe/gestor, discutindo escuta e acolhimento das singularidades, ampliação da clínica, interdisciplinariedade e construção sociohistórica dos processos de saúde/doença, a partir da noção de transcendência do núcleo de formação profissional em direção ao campo de práticas e saberes em saúde coletiva. Nesse sentido, os NASF podem ser considerados como espaços de protagonismo profissional para a Educação Física.

PALAVRAS-CHAVES: Atividade Motora. Serviços de Saúde. Saúde Coletiva.