

**PERMANENT EDUCATION ACTIONS IN BRAZILIAN PUBLIC HEALTH: AN INTEGRATIVE REVIEW****AÇÕES DE EDUCAÇÃO PERMANENTE NA SAÚDE PÚBLICA BRASILEIRA: UMA REVISÃO INTEGRATIVA****ACCIONES DE EDUCACIÓN PERMANENTE EN LA SALUD PÚBLICA BRASILEÑA: UNA REVISIÓN INTEGRATIVA**

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The aim of this study was to analyze the actions of permanent education conducted in the area of public health in Brazil. This was an exploratory-descriptive research, of the kind integrative review, conducted in October 2013, no time cutting and oriented from the following question: which actions of permanent education has been conducted in the area of public health in Brazil? The study population was made up of the theme related permanent education in to public health consulted the databases SciELO, LILACS and CAPES Journal Portal scientific data production. The sample consisted of 16 articles. If on one hand, the articles showed changes in the context of health and professional education, on the other, it has been found that there are still challenges to be overcome. It is for forming agents establish an educational process that allows the work health think for them, face the contradictions of society and use new technologies to understand it and transform it.

**Descriptors:** Human Resources Training in Health; Education; Public health.

O objetivo do presente estudo foi analisar as ações de educação permanente realizadas na área da saúde pública no Brasil. Tratou-se de uma pesquisa exploratório-descritiva, do tipo revisão integrativa, realizada em outubro de 2013, sem recorte temporal e orientada a partir da seguinte questão: quais ações de educação permanente têm sido realizadas na área da saúde pública brasileira? A população do estudo foi constituída pela produção científica, relacionada ao tema educação permanente em saúde pública, consultada nas bases de dados SciELO, LILACS e Portal Periódico CAPES. A amostra foi composta por 16 artigos. Se por um lado os artigos apontaram mudanças no contexto da saúde e educação profissional, por outro foi encontrado que ainda há desafios a serem vencidos. Cabe aos agentes formadores estabelecerem um processo educativo que possibilite aos trabalhadores de saúde pensar por si mesmos, enfrentar as contradições da sociedade e utilizar novas tecnologias para compreendê-la e transformá-la.

**Descritores:** Capacitação de recursos humanos em saúde; Educação; Saúde pública.

El objetivo de este estudio fue analizar las acciones de educación permanente que se realizan en el ámbito de la salud pública en Brasil. Esta fue una investigación exploratoria y descriptiva, del tipo revisión integradora, realizada en octubre de 2013, sin corte orientada al tiempo, teniendo la siguiente pregunta: cuales acciones de educación permanentes se han llevado a cabo en el área de la salud pública en Brasil? La población de estudio estuvo compuesta por las producciones científicas, relacionadas con el tema de la educación permanente en salud pública, que se encuentra en las bases de datos SciELO, LILACS y Portal CAPES. La muestra consistió en 16 artículos. Por un lado los elementos indican cambios en el contexto de la salud y la educación, y por otro que hay retos que superar. Los agentes formadores deben establecer un proceso educativo que permita a los trabajadores de salud pensar por sí mismos, enfrentaren a las contradicciones de la sociedad y el uso de nuevas tecnologías para comprender y transformarla.

**Descritores:** Formación de recursos humanos em salud; Educación; Salud pública.

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## INTRODUCTION

Health is not characterized as the opposite of disease, but as the search for the balance of the human being, needing to break the narrow limits of assistance care. Regarding to this concept, intense transformations are happening on the health model adopted, changing from a hospital-centered model, curative and rehabilitative to a healthcare model promoting health, preventive, with popular participation and interdisciplinarity of different health professionals<sup>1</sup>.

In this model, there is the educational practice in health context, encompassing education activities intended to expand individual skills for self-care and permanent education activities, aimed at further training of health professionals<sup>2</sup>.

In permanent education, there is the world of training and work, where learning and teaching are incorporated into the daily life of organizations. It is based on meaningful learning and develops from daily problems that occur in professional acting places, considering the knowledge and pre-existing experience of the staff<sup>3</sup>.

According to the quadrilateral training created by Ceccim<sup>4</sup>, there is an interaction between segments of training, attention, management and social control in health, highlighting local characteristics and the critical capacity, as well as establishing meaningful learning, self-analysis and self-management<sup>4</sup>.

In this way, it is necessary to know which permanent education activities have been carried out in the public health area in Brazil, since despite the mobilization of health institutions in implementing educational activities at work, the results are very encouraging for production of quality of health services<sup>5</sup>.

From this context, the aim of this study was to analyze the permanent

education actions taken in public health in Brazil.

## METHOD

This was an exploratory-descriptive type, integrative review. The integrative review is a specific methodology of health research that synthesizes knowledge about certain topics of interest for greater comprehension and understanding of an issue, allowing a broad review of the literature. This method was developed in accordance with the practice of evidence-based purposes and presupposes a rigorous process of synthesis of the researched reality<sup>6</sup>.

Although methods for the integrative review vary, there are patterns to be followed. In the operationalization of this review, the following steps were used: selection of thematic issues, establishing the criteria for the selection of the sample, representing the characteristics of the original research, data analysis, interpretation of results and presentation of the review<sup>6</sup>.

The research was guided from the question: What permanent education actions have been conducted in the public health area in Brazil? The study population was constituted by the scientific production related to the theme permanent education in public health.

For the selection of answers on the subject a search was conducted in October 2013, without time cutting, from the relevant databases to the production of health knowledge: *Scientific Electronic Library Online* (SciELO), "by words", "basic form" using the term "permanent health education" [Keywords]; Latin American and Caribbean Health Sciences (LILACS), "advanced form", using the term "professional education in public health" [Subject keywords]; and CAPES Journal Portal, "advanced search", "on the subject" used the term "permanent health education" [Subject] (Table 1).

**Table 1.** Production about the Permanent Health Education (PHE). October, 2013.

Source	Search strategy	Population	Sample
SciELO	"permanent health education" [Keyword]	68	12
LILACS	"professional education in public health"	97	2
CAPES Journal Portal	"permanent education" [Subject]	29	2
<b>Total</b>		<b>194</b>	<b>16</b>

It is important to highlight that the term permanent education is not included as a keyword in the Health Sciences Virtual Health Library (DeCS-BVS). Initially there was the reading of the titles and abstracts of articles found during searching, considering the inclusion and exclusion criteria. Subsequently, the selected articles were obtained in full and examined according to inclusion and exclusion criteria established (Figure 1).

The sample was 16 articles that met the following inclusion criteria: studies of public health using permanent education; held in Brazil; written in Portuguese, available online in full text and answered the question: What permanent education activities have been conducted in the public health area in Brazil? The exclusion criteria was necessary to consider the non-adherence to the study objective; productions published in more than one journal; abstracts and advertising promotional material, completion of course work, dissertations and theses.

The variables selected for analysis of the publications part of this study were related to the authors: profession and institution; characteristics of publications:

journal title, year, *qualis*; and study characteristics: evidence level <sup>7</sup>, population/territory studied, permanent education actions taken in public health in Brazil and results.

Evidence levels were based on Stettler et al<sup>7</sup> classified in I, II, III, IV, as shown in Table 4.

A tool to facilitate the process of collecting and interpreting the data that answered the questions posed in the study was developed. After reading and critical analysis of scientific publications of the sample of this study, information that answered the study variables were identified. Data were added to the data collection tool and then analyzed and added to the integrative review.

## RESULTS

As shown in Table 2, the articles were published in journals belonging to the Interdisciplinary and Nursing areas of CAPES. Most of the published articles found in national circulation journals (*Qualis*: B1, B2, B4, B5), being the journal Interface: Communication, Health, Education, with more publications on this topic.

Figure 1: Flowchart of the process of inclusion of the articles used. October de 2013.

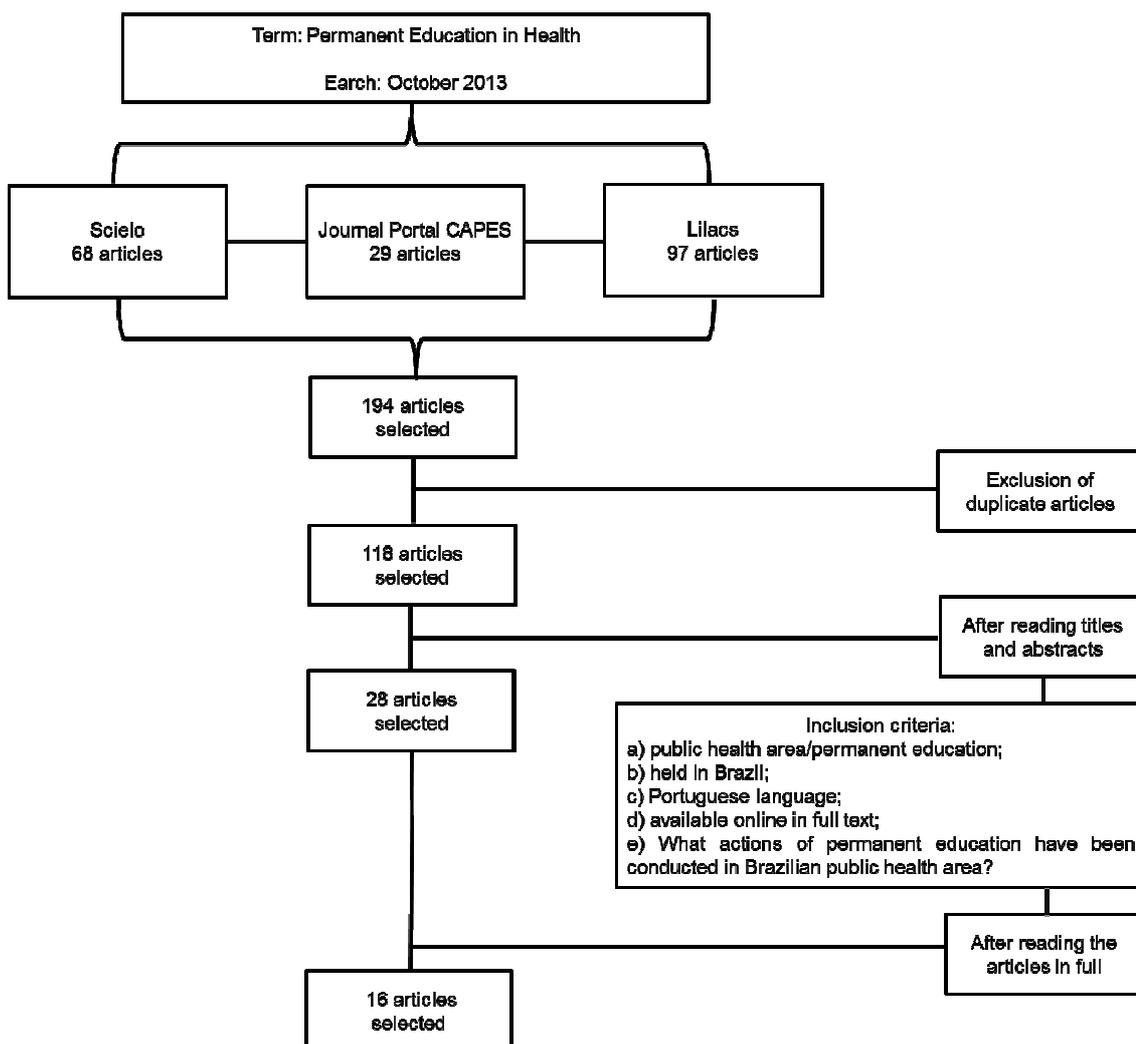


Table 2. Publications according to journal title, area and qualis in CAPES. October de 2013.

Journals	Number of Publications	Area of CAPES	Qualis CAPES
Interface: Communication, Health, Education	5	Interdisciplinary	B2
Health and Society Magazine	3	Nursing	B1
Medical Education Brazilian Magazine	2	Nursing	B2
Work, Educations and Health	2	Nursing	B2
Science & Public Health	1	Nursing	B1
Emancipating	1	Interdisciplinary	B2
Journal of Family and Community Medicine	1	Nursing	B4
Public Health Magazine	1	Nursing	B5

The Table 3 shows the characterization of the articles. Out of the 16 articles analyzed, six had public institutional link, one had private link and nine had public

and private link. It was found that the authors were involved in areas related to public health, preventive medicine and nursing, most of them installed in public

universities, seven in the Southeast, seven in the South, one in the Midwest and one in Northeast region.

The professions of the authors were related to medicine, nursing, psychology and dentistry. However, authors with other professions such as speech therapy, social

work, physiotherapy and pharmacy appeared in just one article. Authors related to administrative and/or management in the Municipal or State Health and in the Ministry of Health areas also appeared. It is worth noting that in two articles, it was not possible to identify the profession of the authors.

**Table 3.** Characterization of analyzed articles about Permanent Health Education, according to authors, year of publication, title, profession and author's institution. October, 2013.

N	Author	Title	Author's profession	Author's institution
1	Elleryet al. <sup>8</sup>	Integrating education, research and health services: background, strategies and initiatives.	1. Ph.D. in Public Health. Clinical Psychologist and Facilitator of Clinical Management Course at the SUS, by the Sírío Libanês Hospital 2. Ph.D. in Public Health 3. Ph.D. in Psychopedagogy	1. Sírío Libanês Hospital 2. Federal University of Ceará 3. Université de Montreal, Canadá
2	Ezequiel et al. <sup>9</sup>	Students and users assess permanent education tool in health - SIEPS.	Not presented	1. School Arthur Sá EARP Neto 2. Medicine School of Petrópolis
3	Lobato et al. <sup>10</sup>	The political dimension in the training of health professionals	1. Institutional supporter of Care Management General Coordination of the Basic Department of Primary Care of the Ministry of Health. 2. Associate Professor, Department of Public Health 3. Adjunct Professor of the Public Health Department	1. Ministry of Health 2,3. State University of Londrina.
4	Batista e Gonçalves <sup>11</sup>	Training of health professionals for the SUS: meaning and care.	1. Master degree in Preventive Medicine. Medical Sanitarian of the School Health Center Barra Funda School of Medicine of Santa Casa de São Paulo. 2. Public Health Educator.	1. Medicine School of Santa Casa de São Paulo. 2. Center for Human Resources Training for SUS of the State Health Secretariy of São Paulo
5	Carvalho et al. <sup>12</sup>	Medical' perception of the course EPS facilitators.	Not presented	1. State University of Londrina
6	Dias et al. <sup>13</sup>	Occupational health in primary care: analysis from a municipal experience.	1. Professor, Department of Public Health, Medicine School. Ph.D. in Social Psychology. 2. Professor of the Nursing School at the University of São Francisco 3. Ph.D. in Public Health by the State University of Campinas	1. Paulista State University Unesp-Botucatu; 2. University São Francisco, Bragança Paulista 3. Municipal secretary of Health in Diadema

7	Mendonça e Nunes <sup>14</sup>	Needs and difficulties of tutors and facilitators to implement the EPS policy in a large city in the state of Paraná, Brazil.	1. Nursing Course, Nursing Department, 2. Public Health Department.	1. Integrated School of Campo Mourão. 2. State University of Londrina
8	Carotta et al. <sup>15</sup>	Permanent health education: a management strategy to think, reflect and build educational practices and work processes.	1. Speech therapist. Master in Communication Disorders 2. Specialization in Management of Labor and Education in Health by the National School of Public Health 3. Graduate student in Human Resources	1. Catholic University of São Paulo 2. Municipal Secretary of Health in Embu, SP
9	Nicoletto et al. <sup>16</sup>	Permanent education centers in health: an analysis of the experience of social authors in the north of Paraná.	1. Nurse 2. Nurse 3. Dental Surgeon* 4. Social Worker 5. Physiotherapist* 6. Dental Surgeon 7. Pharmaceutics 8. Pharmaceutics	1,4. State Health Secretary of Paraná 2. Integrated School of Campo Mourão 6,7. Municipal Secretary of Health de Londrina 8. State University of Londrina * Without information of the institution
10	Peduzziet al. <sup>17</sup>	Educational activities of primary healthcare workers: permanent education conceptions and Permanent education in health present in the Basic Health Units of daily life in São Paulo	1. Department of Vocational Guidance, Nursing School 2. Nurse	1. University of São Paulo 2. Family Health Program, Family Health Association, São Paulo
11	Ciconet et al. <sup>18</sup>	In-service education for health professionals of Mobile Emergency Service (SAMU): experience report of the Porto Alegre-RS	1. Nurse. Maste degree, Graduate Program in Nursing 2. Nurse. Ph.D., Graduate Program in Nursing	1,2. Federal University of Rio Grande do Sul
12	Nunes et al. <sup>19</sup>	The proposal of Permanent Health Education in the training of dentists in STD / HIV / AIDS	1. Dental Surgeon . 2. Dental Surgeon . Public Healht Department 3. Dental Surgeon . Graduate Program in Health 4. Dental Surgeon	1. Municipal Health Secretary of Goiânia Federal University of Goiás; 2. University of Brasília; 3. Federal University of Juiz de Fora; 4. Federal University of Goiás.
13	Vieira <sup>20</sup>	Permanent education in health in the Family Health Program in Montes Claros: intentions, realities and possibilities	1. Master degree in Social Development – Applied Social Sciences	1. State University of Montes Claros
14	Blumet al. <sup>21</sup>	Permanent education centers for the evaluation in health of Paraná: between	1. Students of the course Graduate in Formulation and Management of Public Policies	1,2. State University of Ponta Grossa

		policy and practice	2. Professor and Advisor	
15	Ceccim <sup>4</sup>	Permanent Education in Health: decentralization and dissemination of pedagogical capacity in health	1. Graduate Program in Education Theme Group of Health Education	1. Federal University of Rio Grande do Sul
16	Cyrino et al. <sup>22</sup>	The "Caring for Caregivers": permanent education experience in health School Health Center of Botucatu.	1. Sanitary doctor, master and doctoral student in Preventive Medicine 2. Psychiatrist 3, 4, 5. Psychotherapist / Psychologist	1. Medicine School of Unesp 2-5. School Health Center, Faculty of Medicine of Botucatu-Unesp

The Table 4 shows the characterization of articles about the evidence level, population/territory studied, the response to the generating question of discussion of this study and the results of actions. As for the evidence level, most studies (62.5%) were evaluated in III.

## DISCUSSION

The EPS is established by the action and reflection of lived reality, transforming the reality of the health workers service everyday<sup>4,23</sup>. In this sense, it was sought to identify what permanent education activities have been carried out in Brazilian public health, since it is a key strategy to practice transformations leading to a critical performance, reflective, purposeful, and technically competent<sup>4</sup>.

Considering that the permanent education policy was instituted in 2004, it

was found that the evolution of the number of publication over the years did not appear continuously and increasingly. That is, publications on this subject did not follow the need to implement permanent education programs and actions in public health.

According to some studies<sup>4,9,10,12,13,15,16,22</sup>, the permanent education policy has performed unprecedented, placing training and development as a living education, acting on health. There was a coordination and mobilization of actors, managers, health workers, consumers, health care students and those involved in social movements - that bringing to the spaces of the poles, their experiences made this strategy gained significance as a possibility or public construction of knowledge.

**Table 4.** Characterization of the analyzed articles according to design, evidence level, population/territory studied, answer of the question (What actions have been carried out in the public health area of Brazil?) and actions results. October, 2013.

N	Evidence level*	Population/Territory studied	What actions have been carried out in the public health area of Brazil?	Actions results
1	IV	Sobral e Fortaleza (Ceará) Aracaju (Sergipe) Florianópolis (SC)	→Sobral - Creation of the Health System School in Sobral (Turn all health facilities in places of education, research and care) →Aracaju, Sergipe - Residence of implementation of public health area →Fortaleza, Ceará - Creation of the Municipal Health System School/implementation of Family Medicine and Community Residency / Forum creation. →Florianópolis - Implementation of Teaching Care Coordination Program in Florianópolis/ESF implementation in the municipal health network	Improving the training models of permanent education and knowledge management in health, building health systems in school. However, it is necessary to be further investment in order to overcome the crisis of knowledge and health values in the world.
2	III	Members and students of Medicine, Nursing and Nutrition	Clinic Sessions structured (SIEPS) from the ideal of EPS proposed by MH, which aims to transform and qualify of health practices.	Users and students positively realized the SIEPS.
3	IV	Multidisciplinary residency program in health in São Paulo.	Adoption of a constructivist pedagogical approach, based on meaningful learning using summative and regulatory assessments.	It was evident that the residences can be devices for training of health workers in defense of SUS.
4	IV	São Paulo State	Discuss the need to bring the training of health professionals from the real needs of users and the system.	It is necessary to recognize the needs and the creative power of each one, listening each one, and reflect on professional practice. This is our challenge.
5	IV	Doctors who perform the course of lifelong learning facilitators	Create the EPS Facilitators Course, held in education distance mode.	Changes afforded by the course: expansion of the link between professionals, democratization of management, information systems appropriation, expanding the analysis capabilities and practice improvement.
6	V	Health municipal Professionals of Amparo	Implementation of worker's health actions in primary health care in the city of Amparo, in order to contribute in urgent need of SUS implementation of occupational health actions.	By incorporating actions in primary care the implementation of occupational health actions in small and medium-sized cities is feasible.
7	IV	Nine tutors and ten EPS facilitators of Londrina, Parana.	Revelation needs and difficulties during the process of implementation of EPS.	The EPS, while a proposal against hegemonic brings needs and difficulties for health professionals seeking to implement it on a day-to-day work, especially for EPS tutors and facilitators.

8	V	Representatives of the basic units, family health care centers, emergency room, the secretary headquarters and Municipal Health Council. The health department and user representative of the Management Board of the Unit.	Circles for reflection and discussion on the work processes using tools provided by the EPS Facilitators Training Course following three areas: Context Analysis Management and Health Practices, Work and Relationships in Health Care Production and Educational Practices in Everyday Life Labor Health. Training of municipal EPS core.	The EPS proposal was to improve these mechanisms, making them more participatory, respecting the knowledge of professionals and expanding the learning spaces in the workplace.
9	IV	Six state managers, three city managers, three teachers representing the educational institutions for health workers, five health workers representing the health services, and two representatives of social control.	Focus groups and a road map, endorsed by a specialist, with questions that stimulate collective reflection and allow its use in conversation circles.	There was, above all, recognition of the EPS's ability to articulate and mobilize actors - managers, trainers, health workers and those involved in social movements and social control - which, bringing to the spaces of the poles, their experiences, made this strategy gained significance as a possibility or collective construction of knowledge.
10	III	110 key informants, representatives from all professional categories and teams of UBS, on educational activities developed in 2005.	Mapping of the educational activities of the UBS health employees.	It is observed a practice that departs from the concept of permanent education, as demand and the external site cannot express the needs of the service and its employees.
11	IV	Workers at a pre-hospital care mobile service emergency Porto Alegre.	Carrying out activities in accordance with the recommendations according to EPS principles core associated with the demands suggested by the group of professionals from all functional Samu categories.	The performance of Samu professionals is constantly surrounded by challenges requiring the creation of alternatives to the Permanent Education compose employment contracts.
12	V	Dentists professional in public health in the states and municipalities.	Construction of an education process to modify and reorient the hegemonic dental practice, strengthening the processes of care and management and the partnerships, providing sustainability to the actions in the states and municipalities.	Education strategy adoption proved to be right and indicated difficulties, since its understanding, not only as a theoretical framework, but also as a strategy for building cross-sectoral health policies.
13	IV	Two teams of health workers from the Family Health Program in the city of Montes Claros.	Analyze the processes of education and work and these participatory processes, knowledge and experiences related to health practices in daily units.	The EPS proposal was not implemented to its fullest in the teams, although they were present educational activities that reflect its guidelines.
14	IV	22 (twenty-two) Polos of the Paraná State Permanent Education.	Practice context of the evaluation of Permanent Education Policy, through its Polo.	Few Poles are managing to realize the high quality standards in the training of professionals in the municipalities of coverage, making the Poles bureaucratic instances.
15	IV	Centers for Permanent Education in Health.	Organization of 96 regional and inter-institutional articulations congregating around 1,122 entities of society, including representatives of education, management, labor and social participation in health, engaged in offering language and history	Dissemination of Polos and, as a consequence, decentralized teaching ability has generated new actors for SUS, for its policy construction (not programmatically) for the production of health in acts in

			to a decentralization policy and dissemination capacity educational health.	the role of thoughts and desire for SUS.
16	V	1. Health Center of Botucatu School (CSE): Unit of the Medicine School of Botucatu (FMB), Paulista State University (UNESP), education, research and primary health care.	Establish a place to speak of the relationship between the team members, and between them and the institution and its patients.	The consolidation of the "Caring for the Caregiver" gave the characteristic of an EPS of work since, before the daily conflicts, we could clarify them and face them, giving rise to mobilize and circulate values and feelings inside the service.

\* Evidence level were based on Stettler et al<sup>7</sup>.

The implementation of EPS was positive in different aspects: work better as a team, emphasizing interdisciplinarity, reception of patients, bringing the students to the reality of the communities, contextualization and training of teams, motivation, interest and participation.

It was also found that the implementation of homes as a permanent education strategy can be a device for training of health workers in defense of SUS. Pedagogical approaches were grounded in constructivism, based on meaningful learning, with normative and summative assessments.

On the other hand, other studies<sup>8,11,14,17-21</sup> showed that permanent education actions come to effecting slowly. The health professional ideal we want can be achieved, but it is necessary to overcome the crisis of knowledge and health values. There was found in this study the need and difficulties for health professionals who sought to implement it on a day-to-day work, especially for tutors and EPS facilitators.

Needs as adequate infrastructure (creating discussion spaces, material), the professional development and support management were detected. It is necessary to involve managers to assume commitment, creating alternatives to the EPS compose work contracts.

AS difficulties for EPS, there were: professional resistance and the very organization of care guided by the biomedical logic, lack of commitment of some professionals and limited governance. Moreover, the permanent education proposals cannot be implemented in its

entirety, although educational activities were present that reflect its guidelines.

It is believed that the causes of these problems are related to lack of understanding of the concept and EPS tool, the length and operational barriers to the development of proposals and persistent demands for vertical integration capabilities, making the poles fundamentally bureaucratic instances.

It is important to reflect on the growing need of researchers in the area, structure their findings so as to bring contributions and significant innovations so that they can publish in journals of higher scientific concept and international impact<sup>24</sup>.

Therefore, it is important to educate professionals, so all the constituents of a multidisciplinary team should be linked to studies of permanent education, because as it focuses on the performance of each professional category in their specific social functions and technical division of labor, accentuating the fragmentation of care, the teams and the work process<sup>25</sup>.

The EPS is understood as the action of practices that inform and recreate the theory, and consequently recreating its practice<sup>5</sup>, being found different actions in this study. Monitoring and evaluation actions were also cited by the authors, and these should be incorporated into the service as a permanent activity<sup>26</sup>.

On the other hand, difficulties of various orders were also identified as the implementation of permanent education actions, not being overcome only with relative measures<sup>27</sup>.

The PHE is an essential strategy for the recovery of training practices, attention, management, policy formulation and social control in the health sector, establishing regular and official cross-sectoral actions, integrated with the education sector, submitting the processes of change in graduation, residences, graduate school and technical education to the broad permeability of needs/health rights of the population and the universalization and equity of actions and health services<sup>4</sup>. However, there are no steps or recipes ready, when talking about EPS, always dealing with the new, the unknown<sup>28</sup>.

### CONCLUSION

On the one hand, the studies point to changes in the context of health and vocational education, on the other hand, there are still challenges to be overcome. It is up to their forming agents to establish an educational process that enables healthcare jobs think for themselves, face the contradictions of society and use new technologies to understand and transform it.

Permanent education should bring a look of completeness for the actions of assistance/care and contribute to the articulation strategies of the multidisciplinary team in solving patient problems, facilitating the transformation of teaching and learning practices in the production of knowledge.

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#### **CONTRIBUTIONS**

**All authors** worked equally in the different stages of the reseach development and in the article elaboration.