



REVISIONES

Health education in school context: revision study integrative

Educação em saúde no contexto escolar: estudo de revisão integrativa

Educación para la salud en el contexto escolar: estudio de revisión integradora

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ABSTRACT

Health education is considered a very important means to expand the knowledge and practices related to healthy behaviors of individuals. Thus, the study **aims** caracterizar scientific productions and describe the work of nurses in health education practices in school. It is an integrative literature in LILACS and BDEnf bases. Through the inclusion criteria was selected 20 articles who responded to the question: how the nurse acts in health education practices in the school context? The **results** emerged three categories for analysis: "Health education and the issue of public health at school", "Nursing and health education at school 'and' Actions taken in the school environment." From 2010 there was a significant increase in publications, predominantly studies with a qualitative approach. However, he realized the complexity involved in health education practices in the school environment and the existing weakness in scientific publications regarding the inclusion of nurses at school

Keywords: school health; health education; nursing

RESUMO

A educação em saúde é considerada um meio bastante importante para ampliação do conhecimento e práticas relacionadas aos comportamentos saudáveis dos indivíduos. Dessa forma, o estudo tem como **objetivo** aracterizar as produções científicas e descrever a atuação do enfermeiro nas práticas de educação em saúde na escola. Trata-se de uma revisão integrativa da literatura nas bases LILACS e BDEnf. Por meio dos critérios de inclusão selecionou-se 20 artigos, que responderam a seguinte questão: de que forma o enfermeiro atua nas práticas de educação em saúde no contexto escolar? Os

resultados emergiram três categorias para a análise: “Educação em saúde e a problemática da saúde pública na escola”, “Enfermagem e a educação em saúde na escola” e “Ações desenvolvidas no ambiente escolar”. A partir de 2010 houve um aumento significativo nas publicações, com predomínio de estudos com abordagem qualitativa. Contudo, percebeu-se a complexidade que envolve as práticas de educação em saúde em âmbito escolar e a fragilidade existente nas publicações científicas no que tange a inserção do enfermeiro no ambiente escolar.

Palavras chave: saúde escolar; educação em saúde; enfermagem

RESUMEN

Educación para la salud se considera un medio muy importante para ampliar los conocimientos y prácticas relacionadas con conductas saludables de los individuos. Así, el estudio tiene como **objetivo** caracterizar las producciones científicas y describir el trabajo de las enfermeras en las prácticas de educación en salud en la escuela. Es una revisión integradora de la literatura en las bases LILACS y BDNF. A través de los criterios de inclusión se seleccionaron 20 artículos que respondieron a la pregunta: ¿cómo la enfermera actúa en las prácticas de educación para la salud en el contexto escolar? Los **resultados** emergieron tres categorías para el análisis: "Educación para la salud y la cuestión de la salud pública en la escuela", "Enfermería y educación para la salud en la escuela" y "Medidas adoptadas en el ámbito escolar." A partir de 2010 se produjo un aumento significativo de publicaciones, estudios predominantemente con un enfoque cualitativo. Con todo, se percibe la complejidad de las prácticas de educación para la salud en el entorno escolar y la debilidad existente en publicaciones científicas sobre la inclusión de las enfermeras en la escuela.:

Palabras clave: salud escolar; educación para la salud; enfermería.

INTRODUCTION

Health education is an important means to expand knowledge of practices that relate to healthy behaviors of individuals. In this context, health education actions have persuasiveness in their attempt to specify certain behaviors that are relevant to the prevention or mitigation of health problems¹⁻².

The school is a space for socio-educational formation capable of contributing in a significant way in the formation of the subject, the complete, full and healthy way². In this sense, the school environment is essential for the development of shared knowledge and integration with the community. Where is the majority of the population showing an interest in learning, with an information dissemination potential¹⁻³.

The school's relationships with health clubs should be based on the interests of the users being able to meet their health needs. Through participation in schools that articulate actions for health care, it is possible to train citizens with full knowledge about healthy living habits³.

In order to exalt health activities in the school context, the School Health Program (PSE) exists as a strategy for the dissemination of knowledge about healthy practices, which are transmitted to children and adolescents in a space Form, together with the health team⁴⁻⁵.

With regard to the health nursing team, it had a key role, which operates primarily on the potential of the individual to have autonomy with respect to his health. Therefore, health education improves the quality of life, highlighting the importance of developing healthy habits²⁻⁴, with consciousness, therefore, people no longer have a naive conscience and become more critical.

Health professionals are trained to promote health education, envisaging the exchange of information between people, respecting the individuality and the peculiarities of each one, which allows them to promote health through educational

practices. This is the most effective way to promote health and guide healthy living practices, offers opportunities in which knowledge sharing. This process has in the school its main starting point, since it is in the school that they were not the first social groups², taking into account that in this environment it is possible to build emotional and social bonds, essences for the formation of each individual³.

Transmitting these statements, this study aims to characterize the scientific production and describe the role of nurses in health education practices in school.

METHOD

It is an integrative review study, the research was developed in the Virtual Health Library (BVS-BIREME) in electronic databases Caribbean Health Sciences (LILACS) and Latin America and database for nursing (BDEnf) In the second half of 2014. The question of the survey used for the literature was: "so that the nurse acts in health education practices in the context of the school?" For this, we used the descriptors of Health Sciences (DeCS), nursing [and] school health.

The temporal limits of this study were from 2007 to 2014, justified this period because the School Health Program (PSE) have been established by Presidential Decree No. 6286 of December 5, 2007, in order to expand the actions Health specific public education students⁴.

The inclusion criteria were: Article in Portuguese, articles published from 2007 to 2014 articles available in full text free electronic support for access to full text was used the following resource: available link, in addition articles should converge with the proposed objective and address the subject studied.

Therefore, the exclusion criteria were: dissertations, theses, books, book chapters, conference proceedings or conferences, technical reports and scientific and ministerial documents.

The use of the keywords "nurse" and "school health" found 1,150 publications, after performing the search filter in the VHL, using the inclusion criteria were found 238 publications through the previous reading of titles and Abstracts were excluded 218 publications did not respond to the proposed criteria, for a total of 20 articles in the final sample.

For the mapping of scientific production is used a documentary form is composed of the following variables: Code, title of article, year of publication, methodological approach and publication of the region.

From the development of content analysis, it is presented in three stages: pre-analysis, exploration and interpretation of floating material reading material was executed and the book report (documentary form and data extraction plug), which allows Greater comprehensiveness in content analysis. The interpretation of the results related to the literature, the observation of ethical rigor and the intellectual property of the searched texts were carried out⁷.

RESULTS AND DISCUSSION

Among the LILACS and BDEnf databases, the largest number of publications selected was BDEnf with 12 (60%) of the articles.

It was found that 9 (45%) of the articles are qualitative and 10 (50%) quantitative articles, it is observed that only 1 (5%) is quantitative and qualitative.

As for the timeline of the studies, the year 2010 stood out with 9 articles (45%), 2012 with 5 articles (25%), followed by the year 2011 with 4 articles (20%), 2008 and 2009 obtained 1 article (5%) each.

Among the 20 articles analyzed in their entirety, it was found that the regions of the country of origin of most of the productions were Northeast and South each with 7 (35%) of the articles, followed by the Southeast with 5 (25%), Of the articles and Center - to the west with 1 (5%) of the articles.

Table 1, which summarizes the productions, is shown below.

Table 1. Document sheet. Uruguiana, 2014.

Cód.	Article title	Year	Focus	Region	Database
A1	Health education in schools: Nursing strategy in the prevention of child malnutrition	2008	Qualitative	Northeast	LILACS
A2	Educational technologies in the school context: health education strategy in the public school of Fortaleza-CE.	2009	Qualitative	Northeast	BDEnf
A3	The prevalence of smoking among students in Florianópolis, SC, Brazil and nursing contributions.	2010	Quantitative	South	BDEnf
A4	Risk factors associated with obesity and overweight in school-age children.	2010	Quantitative	Southeast	BDEnf
A5	Nurse link: a strategy of network integration.	2010	Quantitative	South	BDEnf
A6	The perception of adolescents about their sexuality.	2010	Qualitative	South	LILACS
A7	Prevention of smoking in adolescence: a challenge for nursing	2010	Quantitative	Southeast	BDEnf
A8	Violence among young people: social dynamics and situations of vulnerability.	2010	Quantitative	South	LILACS

A9	The eating habits of adolescents in private schools: implications for the practice of pediatric nursing.	2010	Quantitative	Northeast	BDEnf
A10	Primary teachers who benefit from sex education through action research.	2010	Quantitative	Central West	BDEnf
A11	Sharp eye: the analysis of visual acuity of children and the use of recreation for nursing care.	2010	Quantitative	Northeast	BDEnf
A12	Identify the needs of children with hearing impairment: a contribution to health professionals and education.	2011	Quantitative	Southeast	LILACS
A13	Prevention of school violence: evaluation of an intervention program.	2011	Quantitative	Southeast	LILACS
A14	Obesity with a focus on health promotion: an integrative review .	2011	Quantitative - Qualitative	South	BDEnf
A15	The health conditions of the school and the nursing intervention: experience report	2011	Qualitative	Northeast	BDEnf
A16	Actions of education for the health of the nurses in the perception of the parents of the school	2012	Qualitative	Northeast	BDEnf
A17	Health and attendance in adolescents' perceptions of contributions to nursing practice	2012	Qualitative	Northeast	LILACS
A18	The insertion of the family health team in the public school environment: the teacher's perspective	2012	Qualitative	South	LILACS
A19	Social representations of school violence in the expression of young students	2012	Qualitative	South	BDEnf
A20	Dynamics of creativity and sensitivity in the alcohol and tobacco approach with adolescents.	2012	Qualitative	Southeast	BDEnf

To guide the extraction of the contents used a data extraction form, listed in Table 2, composed of variables: study objectives and summary of the results, allowing the development of topics in the findings that were significant common elements. With more incidence the material found, the categories were: "education for health and public health problems in school"; "Nursing education and health at school" and "actions taken in the school environment."

Table 2. data extraction sheet. 2014 Uruguiana.

Code	Objectives	Summary of Results
A-1	Identify the perception of children about healthy eating.	Children have amplified their knowledge, showing the need for strategies.
A-2	To approach the use of educational technologies as a strategy of Health Education with adolescents.	The use of education technologies as a health education strategy among adolescents .
A-3	To analyze the prevalence of smoking between primary and secondary smoking.	It was found that 41% of schoolchildren have ever smoked, there is no difference between the sexes.
A-4	To analyze the risk factors associated with obesity and weight in children of both sexes.	In the sample of 38.2% are obese, the associated factors were: lack of physical activity and consumption of soft drinks.
A-5	Identify the demand and performance of nursing opportunities in HC-UFPR.	The nurse is a step to do HC / UFPR integration.
A-6	To know the perceptions of adolescents about their sexual development.	The new establishment of relations in the school allows a greater dialogue, facilitating the deepening of the subject.
A-7	To discuss the role of the nurse in the prevention of smoking in adolescence.	The nurse is committed to the prevention of smoking in adolescence.
A-8	Analyze the social dynamics in the lives of young victims of violence through the (re) construction of daily relationships.	There was weakness in the networks.
A-9	Investigate the eating habits of adolescents in schools.	Seeing inadequate food intake was required for development.

A-10	Describe and analyze the use of action research as a tool in the qualification of teachers for sex education.	The research action has highlighted the need to include sexuality as an issue in the educational policy project of the institution.
A-11	Detect the visual deficit in children and promote visual health through playful activity.	Of the 143 children who participated in the study, 13 had visual impairment.
A-12	Discover the difficulties and needs of families living with children with hearing disabilities.	The main complaint is the lack of family support and infrastructure in the municipality for the diagnosis and rehabilitation of disabilities.
A-13	Characterize the phenomenon of school violence in a group of young people and evaluate the implementation of the program against violence.	It has been found before there was a high level of intimidation, as well as attacks targeting teaching and administrative personnel.
A-14	Synthesizing the contribution of nursing research on obesity.	The largest number of publications was produced in a newspaper for the population of children and adolescents.

Among the categories described above are the highest number publications was "Education for health and public health issue in school", where 9 articles (45%) exerted this problem. The "teaching of nursing and health in school" are articles 8 (40%). The articles that brought the "actions taken in the school environment" totaled 3 articles (15%), according to Table 3.

Table 3. Thematic study categories. Uruguaiana, 2014.

Code	Category	Total
A3-A4-A6-A8-A10-A13-A14 A19-A20	Health education and the issue of public health at school	45%
A1-A5-A7-A9-A11-A15-A16-A17	Nursing and health education at school	40%
A2-A12-A18	Actions developed in the school environment	15%

Health education and the issue of public health at school

Violence is a public health problem highlighted in the articles, the subject covers issues such as drugs, nutritional imbalance and risks related to sexuality⁸. It is noteworthy that violence is increasing, and may arise from family conflicts, lack of affection and lack of limits, becoming a complex social phenomenon that affects the population and can also move into adulthood. When these conflicts do not resolve adequately controlled or in infancy / adolescence, they finally desert into adulthood⁸⁻¹⁰. Approaches worked in school refer mainly to drugs, alcoholism and smoking, exposing

the vulnerability that young people are exposed to, both external and internal factors¹¹⁻¹².

These factors found in the articles correspond to risks related to sexuality and sexually transmitted diseases (STDs), including complaints, due to the alarming incidence of teenage pregnancies and the increase in STD rates among adolescent students¹³⁻¹⁴.

When it comes to food, there are two aspects that should be evaluated, one of them being eating habits, ie food with altered nutritional value, another question, undoubtedly the most worrying is the lack of food, which are a problem Social. The nutritional status of school children and adolescents varies according to context and age, especially malnutrition and obesity¹⁵.

Malnutrition is most evident in children because of the low supply of food or inadequate nutrition, all levels of lead to malnutrition damage to health even the slightest forms of malnutrition can limit the physical and intellectual development of the child, Which corroborates school absenteeism¹⁶. Since obesity is highest in adolescents, their injuries are associated with high blood pressure, heart disease, osteoarthritis, type II diabetes and some types of cancer, along with deterioration of the quality of life¹⁷⁻¹⁸.

Nursing and health education at school

The importance of actions such as the use of playful forms that facilitate the learning of the children and the importance of a healthy diet, seeking an improvement in the nutritional status¹²⁻¹⁹. In this sense, health actions, if prevention or health promotion when carried out through creative activities allow for greater interaction and strengthening of relationships, allowing actions that meet the needs and desires of their clientele. Make parents positive acceptance about actions developed for health education¹⁸.

In the description of the health conditions of the school, it was pointed out that in relation to hygiene only 68% had a regular situation, 51% had pediculosis, 70% dentition committed, vaccines 39% at the end, 38% were in state of degree malnutrition I and 26% of degree II²⁰.

Actions developed in the school environment

The health actions developed in the school environment, the elements to make mention show an association between the Family Health Strategy (ESF) and the school, with a focus on nursing work, from the point of view of prevention, promotion and health care for children, adolescents and young people in public education²¹. The implementation of these measures provides for the coordination of various health practices in schools²¹⁻²². Topics are grouped according to the nature of their actions, assessment of students' health conditions through hearing tests, vision, physical motor skills, nutritional and psychological status²³.

Development strategies take place after the delimitation of priorities, taking into account the context in which the school operates, whose objective is to raise awareness and / or awareness of actions that can prevent the occurrence of health problems²⁴⁻²⁵.

In this sense, one cannot fail to remember how preventive actions are more favorable than curatives actions, both from the economic point of view and the point of view of care. As indicated in nursing articles has a key role in the construction and

CONCLUSION

The school environment should not be limited exclusively to an area of instrumental knowledge processing, it is correct to say that this knowledge is fundamental to build the abilities and capacities of the individuals, however, they are insufficient and limited, when the objective is the Integral promotion of health.

Comprehensiveness in health care should be developed in association with nursing, should develop education and awareness activities in collaboration with teachers.

The lack of publications related to health care is found in the school environment, which refers to the aspects where scientific production is directed, in most cases, the description of public health problems, making clear the problems of Health, rather than increasing knowledge about the importance of health promotion through health education with the articulation of knowledge.

Finally, this study points to the need for scientific productions that expose the effectiveness of health education practices developed for nurses in schools. This indicates the need for a dialogue relationship, emancipatory communication, comprising teachers, nurses, students and their families so that the knowledge that was consolidated in an alliance of knowledge that should reflect in a better health and knowledge of the subject.

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