Advancements and limitations of social networking as communication strategy in SUS: experience report in Family Health Units

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ABSTRACT

Social networks can perform an important role in Unified Health System (SUS) regarding access and dissemination of information. This study aims to report the experiences developed by interns and professors of UFRN's Dentistry course, and by preceptors of USF Panatis and USF Parque das Dunas, at Natal/RN. The activities were planned in a discipline previous to the internship, and the same actors participated in them. Considering the COVID-19 pandemic context, the activities were adapted into virtual format. From Instagram, WhatsApp, and Google Meet, it was possible to disseminate information on the functioning and actions developed at the USF, to create informative posts on oral health, to involve pregnant people in educational actions, to promote closeness with the community, to give automated responses to the most frequent questions, among other activities. Social networks are a powerful tool in communication and dissemination on health care, allowing links to be established as yet another way of accessing information and keeping a permanent dialogue with the population, indicating possible advancements in social control. The prior knowledge that interns and preceptors had on social networking enabled the development of actions which are not part of the traditional context of dental training, so it benefited everyone's learning and allowed advancements in the relationship between the USF and the community. It is crucial for the government to enable the necessary infrastructure and logistics for the inclusion of social networking in the work process of Primary Care teams, incorporating it as element of its policy on health communication.
Descriptors: Social Networking. Unified Health System. Training Support.

1 INTRODUCTION

Social networks mediated by the Internet (Instagram, WhatsApp, Facebook, Twitter, among others), considering their dissemination among the different populational groups, can be an important strategy to safeguard two basic principles of Unified Health System (SUS): people's right to information on their health, and dissemination of information on the potential of health services and its use by the user[1].

Fundamental to the safeguard of this conquest is the challenge of articulating information and communication with the health care field. The role of communication would be to develop spaces, processes, and practices which would amplify the voices of health care workers and of the population, allowing the dissemination of these sectors' points of view and interests[2].

Social networks have shown great potential for contribution with the flow of information and the communication among different levels in SUS[3], as well as for exerting influence on the access to health services, their use and choosing. They can motivate, or not, the individual to voice their demands[4].

Presenting themselves almost as omnipresent, social networks occupy space in the academic environment, in the media, in several kinds of organizations and, moreover, in the common sense.[5] These networks are connected by diverse relationships and social interactions, so they can be motivated by friendship or work relation, which connect different institutions, groups, or individuals that present, among other characteristics, interactivity, cohesion, and sustainability[6,7].

These "new" Information and Communication Technologies (ICT), by occupying a prominent place in contemporary communicational relations, do without continuous reflection upon its use, providing the effective resignification of practices and strategies so to avoid becoming merely customizations of old forms of the communicational process[8].

In SUS perspective, social networks can contribute to the generation of knowledge in networks and enlargement of the communication channels for access to the health services, as well as to the decision-making of managers and administrators[9].

Communication synchronized with SUS can be debated by the mediations which characterize such practices, thereby it must contribute to leave behind a linear and unidirectional model of communication to allow greater visibility to the voices and stories from the population and the health professionals, thus conducing the communication's democratization[8].

In June 2018, Instagram[10], important communication platform which uses images to mediate contents, by itself announced having 1 billion active users in the world[11].

In recent systematic revision, studies were mapped on the use of Instagram in the field of public health, with focus on the operation of governmental entities. The study points out Instagram as a tool for health promotion with ability to involve users, mainly by its imaginal appeal, while it categorizes the operation of public health entities in this network as inefficient.

Few studies indicate the use of social networking in Primary Health Care, especially in access to oral health. Oral health's incorporation in the Family Health Strategy (ESF) was seen as the possibility of breaking up with assistance based on curativism, technicism, and biologicism[13], still hegemonic characteristics in dental training and practice. In order to fulfill this role, the Family Health

Units (USF) develop activities and projects aimed at health promotion, prevention, and awareness, which, due to COVID-19 pandemic, were suspended. Despite the need for social distancing during a pandemic, health promotion strategies must continue and be adapted to maintain activities and practices aimed at the population.

This study seeks to report the educational experiences developed in the mandatory curricular internship of UFRN's Dentistry course, which were based upon the use of social networks in mediating actions with the population.

2 EXPERIENCES REPORT

This study is a report of experiences that took place in the Family Health Units (USF) Panatis and Parque das Dunas, which are bound to the Municipal Health Department, located at the north district (*Zona Norte*) of the city of Natal/RN. These experiences involved preceptors (dentists from both USFs), professors from the field of Collective Oral Health, and interns from the last semester of Federal University of Rio Grande do Norte (UFRN) Dentistry course. This internship seeks to develop activities for health promotion, prevention of diseases, and dental assistance within the principles of the Family Health Strategy, based on interdisciplinary actions, in consonance with the principles of SUS.

Prior to the development of these activities in the USF, preceptors and teachers participated in the curricular component Planning and Evaluation in Collective Oral Health, a requirement to the supervised internship in the following semester. In this curricular component, students and preceptors, articulated by the professors, are intended to resume previous knowledge in Collective Oral Health that can be applied onto a planning proposal of the health actions to take place in the USF. To do so, it is fundamental for everyone to understand the conceptual basis and practical application of the strategic-situational planning, with aims to develop a health planning proposal in local level and strategies for evaluation of actions to be carried out.

One crucial element to enable this proposal is the need for this planning to be structured upon the reality of the Family Health Units involved. Thus, the previous definition of the preceptors, the most knowledgeable of the USF's reality and the oral health problems of the place of the action, was essential. Upon this condition, students were divided in four pairings: two were bound to USF Parque das Dunas, and the other two to USF Panatis. Therefore, in the curricular component Planning and Evaluation in Collective Oral Health each team was composed of four students (2 pairings), one preceptor, and one professor. For the internships' development, the same student pairings were kept in the USF in which they did the planning of actions in the previous semester. Each pairing spent 7 weeks in the internship field, the first being in the period of January 18 to March 12, 2021, and the second one from March 15 to April 30, 2021.

The main problems listed by preceptors encompassed aspects related to the USF structural state, difficulties in using the Citizen Electronic Chart (*PEC*), limitations in the system of reference and counter-reference, as well as problems related to the welcoming and treatment of users in the USF, and lack of epidemiological assessment in oral health.

The experience in each service had its own singularities due to the territory diversity in which the Family Health Strategy is inserted

and their own characteristics, which was much conducive to the understanding of the complexity of the local planning of activities.

The internship began with the welcome of UFRN's Dentistry course students in the service. The arrival and welcoming were articulated with the USF remaining professionals, so to safeguard autonomy in the planning of oral health actions and of other activities in the field of collective health.

Taking into consideration the COVID-19 pandemic, all planned activities were, whenever possible, adapted to be developed in virtual format, respecting the recommendations of health agencies' protocols in force. This happened because some previously planned actions were modified, so that new proposals were incorporated during the internship.

Among these activities, the two USF carried out different activities with the use of social networks of very disparate natures.

The use of social networks as Family Health Team's approach strategy to pregnant people in USF Panatis

The interdisciplinary work in USF Panatis features the "Mother and Baby Project," developed upon the articulation among the nursing team, gynecologist doctor, and the oral health team. In the project all pregnant people who have prenatal medical care are later taken to the oral health team to undergo examination and proceed to schedule dental appointment if needed.

Seeking approximation between these pregnant people and the Family Health Team, USF Panatis arranged to develop a monthly meeting with these pregnant people to carry out educational activities tackling several subjects, such as those related to oral health during pregnancy and newborn care. With that, the intention was to encourage autonomy in the

care of the pregnant person and the baby, besides promoting activities focused on health promotion.

Despite the pregnancy by itself not being responsible for the emergence of certain oral manifestations, such as caries disease and periodontal disease, oral health care of pregnant people is extremely important to prevent deterioration which might interfere in a healthy pregnancy and in the fetus's health.[14]

Considering the pandemic context and the prior planning, interns and preceptors decided to seek out alternatives to social isolation without missing the opportunity to contribute with actions that so far had been developed to great acceptance by the pregnant group. The option was to develop a collective action through virtual means for the pregnant people, which was a challenge to all involved, given that it would be something new, not previously worked with, especially with this target audience. The decision was to carry out meetings on the social networks WhatsApp and Google Meet.

To such end, a list was first made with the data of pregnant people in prenatal medical care. From this data a WhatsApp group was created in the smartphone of the USF's dentist so that the collective communication was facilitated.

Among the limitations for the composition of such group was some old numbers, or numbers that belonged to someone else in the family, not to the pregnant person. Therefore, some people immediately left the group, not allowing the chance for communication about the activity. To circumvent this issue, phone calls were made to some numbers communicating the purpose of the group and reinforcing the invitation. The alternative was to communicate in person with the pregnant people in the prenatal

appointment, and from then on add them to the group.

Through these adjustments the communication with the target audience was facilitated, as well as the identification of demands the group had no previous knowledge of. The basic goal of the group was to promote the subject, date, time, and link to the event, which would take place via Google Meet. However, there were many doubts about plenty of USF sectors, vaccine availability, in person opening hours, among others. With that, it was possible to observe this social network's potential to enhance communication between SUS and the population.

Regarding the event, two meetings took place, with a two-month gap between them. The First Pregnant People Virtual Meeting engaged with oral health care aimed at the pregnant person and the newborn. Questions were selected which most caused controversy and doubt during in person appointments, and from those there were discussions on myths and truths such as "do antibiotics cause caries?"; or "can the pregnant person go to the dentist?". The questions sustained the meeting and initiated a discussion among the pregnant persons themselves and the Oral Health Team professionals. In the occasion, one of USF nurses was also present who benefited from the information on oral health, since during the prenatal medical care many doubts would arise on this subject.

The Second Pregnant People Virtual Meeting dealt with the most common oral diseases which affect children, such as nursing bottle caries, wounds caused by oral candidiasis, among others, besides reinforcing concepts previously touched upon in the first meeting.

In the time between meetings the group was active, acting as a means of interaction among the USF's Family Health Team, interns, and pregnant people, providing information on oral health of pregnant people and children.

Mobile technology became a great ally to health education since it expedites and optimizes dialogue between health professionals and SUS users. This simplifies distances and conveys information, which furthers empowerment, self-care, and the following-up of the health-disease process, and it allows for the subjects' autonomy[15].

Another way of bringing the service closer to the community was through posts on the USF's Instagram account. This account had been deactivated for some time due to obstacles in managing and availability to this function. Posts were eminently informative, alerting the population on precautions to be taken during the pandemic and on the functioning of the unit itself. The biggest difficulty was establishing mechanisms to prevent discontinuation of Instagram feeding, which required teamwork and decentralization of the task.

Engagement and popular participation through social networks were demonstrably not only possible, but also fundamental for the articulation, mainly as in person meetings were still restricted.

The use of social networking as communication strategy by USF Parque das Dunas Family Health Team

USF Parque das Dunas features work as direct conversation with the USF Managing Collegiate, providing permanent pacts with all actors involved in the activities. In its work process routine in Primary Care, it holds projects aimed at health promotion and prevention which were suspended during the COVID-19 pandemic to avoid risk of agglomerations.

From the internship's developing, the

altering of the logic of in person projects to virtual medium was conceptualized with assistance from social networks. The use of social networks as strategy of Communication in Health Care in an UBS was carried out and considered a successful experience in Pernambuco State's hinterlands. It enabled a connection with users in this COVID-19 pandemic period when social distancing measures were required[16].

An assessment was first conducted on which platforms were already in use by the service, whereby Instagram and WhatsApp were found to be used by the USF, each with its own applicability.

However, the newest in use by the USF, Instagram is the platform which has attracted greater interest by a portion of the Unit's workers. Instagram's visual approach has been attractive for Primary Care teams in the city of Natal, where a growing number of USFs have been setting up their own accounts in the platform.

Health Units, by creating their own accounts, use the medium to promote their actions and health information to the population. It is not uncommon for them to tag the accounts of the city's administrators. The presence of the Health Ministry on Instagram was evaluated as a strategy of social and digital marketing because it promotes guidelines on health with aims to change followers' behaviors into adopting healthy practices[17].

Considering this context, the Instagram account was chosen by the managing collegiate as the social network to be the object of interventions for the internship's actions. Interns' previous knowledge in the commercial use of Instagram and in platforms and graphic design websites favored the production of visually attractive materials. The art quality in the published materials was the feature of this approach.

The first results from this internship phase were: assessment of the whole USF team by sector and creation of art for publication; Unit information update in Bio; identification of the monthly thematic actions and creation of art for publication, besides Instagram metrics analysis (publications' outreach, activity, and engagement). To enable this stage, contact with all USF professionals was necessary for photographic registration, image editing, and later publication of a USF workers board.

This activity provided the effective recognition of the internship as a learning opportunity for all involved, promoting connection between professionals and the internship team. This interaction with several Unit workers allowed publication of posts contemplating important basic information, like address, opening hours, available services, scheduling of appointments, as well as posts explaining home visits, SUS card, vaccine, and oral health guidelines. The interns' ability and know-how of the networks, non-academic skills, were decisive to enable intervention where the collegiate saw called for.

To the development of these interventions was added the training of Unit professionals so that they would keep on feeding the social network with more than the aforementioned actions, as well as doing so with the adequate graphic quality, to which the involvement of interns was fundamental.

Progeny of this partnership, USF's account nowadays is fed by one of the Community Health Agents who takes part in the workshop. It is noticeable the posts' aesthetic improvement, the team's engagement in registering its actions in the Unit and the amount of published material. The registering of developed actions through publication of pictures of activities improved the writing of

the action's explanatory text. The production of informative material enjoyed considerable growth with graphic quality superior to that of previous publications, which either had low quality material or replicated material from other sources. Publications with educational material have also been produced and benefited from a more attractive graphic design, with better aesthetics.

Being the USF's social network with the biggest flow of communication between users, WhatsApp is used as a channel for constant dialogue among professionals (transfer of technical reports by management, communication between teams and categories, and smaller groups created by affinity), as well as between the service and the users through text and audio messages. Thus, it corroborates the assessment that it is a platform with good capillarity in the community, bringing close together health professionals and local population, as well as enabling an interesting medium for acquisition of new knowledge[16].

WhatsApp was cemented as a tool that promotes direct contact with the community. Its focus on text and audio messages favors the establishing of a medium of information exchange, of presenting questions, doubts, and suggestions.

By observing the use of WhatsApp and the reports of Unit professionals, repetitive questions among different users were identified. These questions were time-consuming and created workload by repetition for the workers responsible for answering at assigned days.

A proposal arose, upon suggestion articulated by interns, preceptor and USF management, for the creation of automated answers to reply to the most frequent users' questions through the WhatsAuto app[18]. The demand was categorized to enable this proposal, presenting the following configuration: 47% of the questions were about vaccination; 27% were doubts on the scheduling of exams; 20% were questions about medical and dental care, and 6% were other demands. Upon this assessment, WhatsAuto was installed on the Unit's phone, and the menu of questions and answers was elaborated to quicken the users service through this means.

By the interns' initiative, there was an attempt at associating WhatsApp Business[19] to the automated answers app. This app is developed in companies as a solid ally for interacting, engaging, and obtaining customer loyalty, featuring an improvement on WhatsAuto[20].

In the present experience it was not possible to count on these advancements, probably because of the apps' incompatibility or interferences regarding the account in use.

These strategies in Instagram and WhatsApp use enabled a new reality of the work process in USF Primary Care. It allowed for the joining of workers and users through the platforms of social networks, which, nowadays, have an important role in improving health communication.

3 FINAL CONSIDERATIONS

Social networks have shown to be a powerful tool in health communication and promotion, allowing observation of its positive potential in establishing links, equity in the access to information, and in establishing a permanent dialogue with the population.

It is a sign of great advancement in the defense and strengthening of SUS, by proposing communication mechanisms which are more interactive, establishing, beyond information, a way to listen to the wants of the population, coherent with the desire for social

control.

Given the outreach and promotion of access of information through social networks, it is the role of SUS to incorporate this light technology as element of its policy on health communication. To this end, it is crucial enabling the necessary infrastructure and logistics for its incorporation in the work process of Primary Care teams, especially upon production of quality visual materials, avoiding workers' burdening to provide the necessary logistics as observed in the present study.

Internship contribution was fundamental in developing actions which were not part of the traditional context of dental training, by incorporating interns and preceptors' prior knowledge on social networks which was developed in their other daily activities.

The use of social networks as health communication mechanism must be seen as an evolution of the policy on health communication. It allowed this exercise, developed by interns during internship, to qualify them to use and apply these abilities in a future professional performance.

Health promotion actions enabled in the USF upon internship activities supplied the projects suspended during the pandemic, maintaining the flow of information on oral health to the population through social networks.

By being an interprofessional project, it is essential the permanent involvement and commitment of USF workers with communication professionals, considering the specificity required in the adoption of this type of strategy, especially in the training of such professionals in the permanent attentiveness to the social networks.

Despite the success provided by these experiences, it is important to recognize that the polarization observed in Brazilian society, which conflicts defense of social rights with narrow perspectives of market regulation, can interfere negatively, creating a field of narrative disputes not always suitable for advances in the defense of SUS.

It is also relevant to highlight that this study had no interest in doing a quantitative study regarding the number of participating users or measurements on their adhesion to the activities upon the use of social networks, as well as their satisfaction in doing so. It is understood that these aspects can be dealt with in future studies on the subject.

RESUMO

Avanços e limitações das redes sociais como estratégia de comunicação no Sistema Único de Saúde: relato de experiências em Unidades de Saúde da Família

As redes sociais podem representar importante papel na Atenção Básica do Sistema Único de Saúde no acesso e divulgação de informações. É objetivo desse estudo relatar as experiências desenvolvidas por estagiários e professores do curso de Odontologia da UFRN e preceptores das USF Panatis e Parque das Dunas, Natal/RN. As atividades realizadas foram planejadas em disciplina anterior ao estágio e contaram com a participação desses mesmos atores. Considerando o contexto da pandemia da COVID-19, as atividades foram adaptadas para serem desenvolvidas em formato virtual. A partir do Instagram, WhatsApp e Google Meet foi possível divulgar informações sobre o funcionamento e ações desenvolvidas nas USF, criar posts informativos sobre saúde bucal, envolver gestantes em ações educativas, promover maior aproximação com a comunidade, criação de respostas automáticas às perguntas mais frequentes, entre outras atividades. As redes sociais são potente ferramenta na comunicação e divulgação em saúde, permitindo estabelecimento de vínculos, como mais uma via no acesso às informações e relação de diálogo permanente com a população, sinalizando possíveis avanços no controle social.

O conhecimento prévio de estagiários e preceptores sobre as redes sociais viabilizou o desenvolvimento de ações que não fazem parte do contexto tradicional da formação em Odontologia, trazendo benefícios ao aprendizado de todos e avanços na relação das USF com a comunidade. É fundamental que o poder público viabilize infraestrutura e logística necessárias para a inclusão das redes sociais no processo de trabalho das equipes da Atenção Básica, incorporando-as como elemento de sua política de comunicação em saúde.

Descritores: Rede Social. Sistema Único de Saúde. Apoio ao Desenvolvimento de Recursos Humanos.

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