

# Dentistry training beyond the walls of the University: experience report of the internship in the Family Health Strategy

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Received: 06/29/2021. Approved: 11/08/2021.

## ABSTRACT

The requirement for Dentistry professionals able to work in the Brazilian Unified Health System (SUS, as per its Portuguese acronym) brings the need for training aimed at developing skills and abilities. The insertion of the student in Primary Health Care (PHC) through internships has been advocated, since this is an important level of care for the construction of comprehensive care. Accordingly, the objective of this article is to describe and analyze the experience lived by undergraduate Dentistry students with a team of the Family Health Strategy (FHS) in the curricular component Supervised Internship in FHS, in a Primary Health Care Unit (PHCU), located in a city in the countryside, in a neighborhood with great social vulnerability. It is an experience report with a descriptive approach, qualitative character and critical-reflective nature. The data were obtained from the perception of students during the internship activities, using as a basis the reflective critical portfolio (RCP) constructed during ten meetings in the PHCU. Previously, a semester was destined to the acquisition of theoretical knowledge and planning of activities to be developed during the internship. In the PHCU, students were able to experience the functioning and interaction of the health team, perform activities aimed at interprofessional practice, visualize the demands of the community and develop activities with participatory methodologies. Subsequently, the RCP was constructed and the experience shared through an open presentation to the public. Thus, the internship allowed the Dentistry students to develop a more humanized and comprehensive look, with important skills for the professional who is able to work in the SUS.

**Descriptors:** Education, Dental. Curriculum. Preceptorship. Unified Health System. Human Resources.

## 1 INTRODUCTION

The creation and implementation of the Brazilian Unified Health System (SUS, as per its Portuguese acronym) brought to Brazil a health care model guided by comprehensive care and preventive actions according to the demand of users, guiding its actions based on the promotion, protection and recovery of health<sup>1</sup>. In this context, we can observe the growing demand for adequate training of professionals capable of working in this field.

Primary Health Care (PHC) is considered an important axis for the construction of comprehensiveness. Its performance is complex and needs to meet the individual and collective health needs of the population, requiring the implementation of teamwork and collaborative work so that interventions are designed to effectively impact on the determinants and conditioning factors of health present in the reality of each social context<sup>2</sup>.

The university extension programs have a strategic role in the training of competent professionals committed to people's health, providing a differentiated space for the development of teaching-learning processes and allowing the confrontation of theory with reality, based on their inclusion in the health service<sup>3</sup>. In addition to the extension projects, the new National Curriculum Guidelines (DCN, as per its Portuguese acronym) of the Dentistry course highlight the supervised internship aimed at Primary Care as an important tool for training professionals with a profile adjusted to national health care policies<sup>4</sup>.

The insertion of undergraduate students in PHCU contributes to the formation of professionals able to understand the determinants and relationships of diseases with the context in which users are inserted, provides a broader view of health, in addition

to allowing them to collaborate with activities aimed at humanization, care and qualification of health care<sup>5</sup>.

Moreover, the interprofessional experience during the undergraduate phase is important to provide a broader education, with the engagement of professions and the development of collaborative practices<sup>6,7</sup>. Thus, it is important to have mandatory curricular components that, in addition to allowing the student to interact with the community, propose contact and dialogue with other professionals working in the health service, as well as performing interventions to encourage collaborative work in the health team.

Given this context, the aim of this article is to describe and critically analyze the experience of fourth-period undergraduate students of the Dentistry course with a team from the Family Health Strategy in the curricular component Supervised Internship in FHS of the State University of Paraíba – UEPB (as per its Portuguese acronym) in a neighborhood with great social vulnerability in a municipality in the countryside of the Brazilian Northeast.

## 2 EXPERIENCE REPORT

### **Methodology of Supervised Internship in the Family Health Strategy of UEPB**

The subject Internship in FHS aims to develop activities with an educational, preventive and health promotion focus in the territory of the coverage area of a PHCU. From the interaction of students with the community and with the health team of the service, the aim is to enter the PHC, allowing the experience of the dynamics of a FHS team, realizing existing fragilities and social vulnerabilities in the community. Accordingly, undergraduate

students have the opportunity to follow the work process of the team and plan activities according to the reality found.

It is worth mentioning that, during the semester preceding the internship, theoretical content related to PHC and FHS, health-disease process, social determinants of health, health as a right for all and the history of Health Promotion Conferences held so far are discussed through active methodologies. At this time, with a view to including the undergraduate student as an active subject of the teaching-learning process, students are organized into pairs or trios to construct a previous action plan to be applied during the internship experience in FHS.

Through this proposal, the student is challenged to think of ludic and effective tools to explore the field of practical action in which he/she will later be inserted. It is clear that each action plan must be suitable for the reality of the PHCU, where groups of students, together with the community and the team, will develop the actions. In addition, it is proposed that each student take notes about the expectations with the internship so that, at the end, it is evaluated whether they were achieved.

Before starting the internship, two meetings are held in the classroom, in order to distribute the places and enable the initial contact with the preceptors. Accordingly, students have the opportunity to talk and present the prepared action plan to the preceptor. In order to develop their activities in the PHCU, undergraduates receive guidance from the coordinating teachers of the subject and the preceptor (dental surgeon), in addition to the in-person and remote support of a monitor.

The PHCU in question is located in the neighborhood of Tambor, in the city of Campina Grande - PB, serving about 3,000

users, and is currently performing the re-registration based on the new funding policy, with an estimated reach of more than 4,000 users. The PHCU, which is the gateway to the SUS, plays a fundamental role in most of the health demands of the population. The PHCU health team is composed of a dental surgeon, an oral health assistant, a physician, a nurse, a nursing technician, a social worker, a nutritionist, a pharmacist, a pharmacy technician, five community health workers, a receptionist, a general services assistant and a security guard. The territory covered by Tambor PHCU is urban, has access to running water and an electricity system, but the basic sanitation of the streets is precarious, with many unpaved streets and open sewers. Moreover, as the main vulnerability factors, we should highlight the following: existence of areas with dengue focus, garbage accumulation, prostitution points, drug traffic and consumption.

As this is an experience report, the data described were obtained through the notes of students during the internship activities that took place in the PHCU in question, using the reflective critical portfolio (RCP) constructed during the ten meetings in the PHCU, contained in the 45-hour workload of the curricular component. It is worth noting that, officially, the workload of the curricular component was 15 hours, due to the limitation of the system/semester workload, but the activities were performed in 45 hours, with the agreement of teachers and students, in view of the need for time for the development of the meetings. After curriculum reform, the curriculum component now has 60 hours. Accordingly, the problem situations observed will be presented, discussions developed from the association with scientific articles, movies, songs, poems, among other resources, in order

to deepen the critical analysis constructed by the students during the internship.

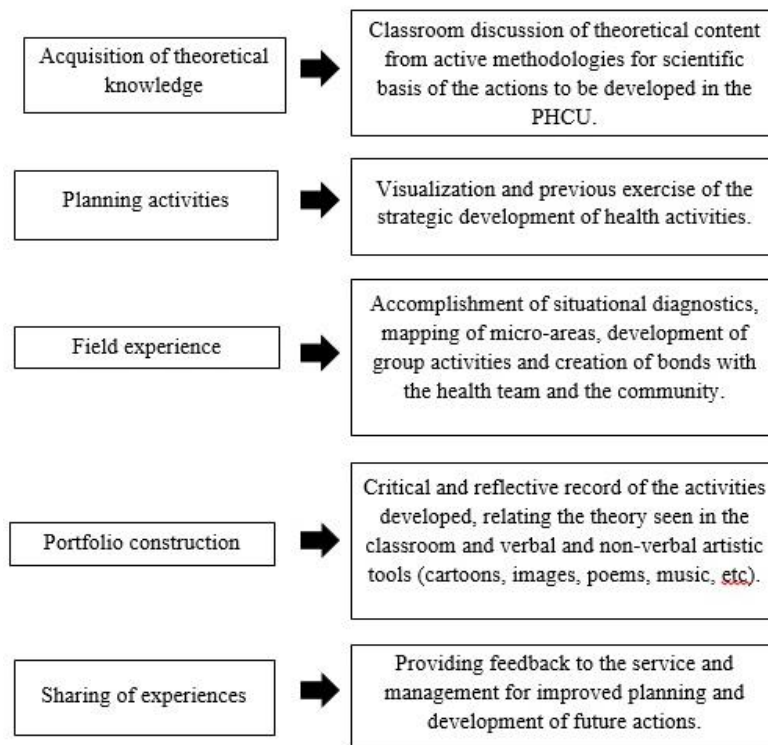


Figure 1. Flowchart of the methodology applied for the development of the subject Supervised Internship in Primary Health Care.

### Experience Description

The internship was developed by three students from the Dentistry course regularly enrolled in the curricular component Supervised Internship in FHS of UEPB. The first day of the internship in the PHCU was intended for the recognition of the routine of the health team at the location. Thus, the students, in addition to following the practice of the preceptor (dental surgeon), had the opportunity to have direct contact with other professionals. Accordingly, it was possible to realize the welcoming that each professional dedicated to the students, the interpersonal relationships among the team members and the existing population demand in the community, in addition to knowing the territory covered by the PHCU, in order to, subsequently, carry out the adjustments to the plan of action according to the weaknesses and

potentialities identified. It is noteworthy that the role of the preceptor is fundamental in the process of teaching-service-community integration, enabling the construction and development of activities with the community and the health team<sup>8</sup>. Thus, it is understood the need for training courses so that professionals become increasingly trained to work with preceptorship in PHC<sup>9-11</sup>.

When checking the availability of professionals in the interaction with students, the good construction of bonds with the community and the harmonious and interactive coexistence among professionals, we noticed the existence of a collaborative work process in progress. During the recognition of the reality experienced by the team, we noticed that there was maintenance of case discussions among the team members, showing that the comprehensive and humanized

care developed was based on the interprofessional practice in the care provided to users.

The interrelationship between user-centered care and interprofessional practice should be considered as an important factor for the development of quality health care, showing that the fragmentation of professional practices is redirected to a shared practice when the attention to user and his/her health needs become the center of the entire work process<sup>12</sup>.

In this sense, the health team carries out actions in order to develop health promotion activities, encouraging social participation, in partnership with social facilities in the neighborhood such as a school, which, despite not being in the coverage area, remains in partnership with the PHCU; residents association; popular gym within the PHCU, with a volunteer physical educator; CRAS (as per its Portuguese acronym), as a specialized reference service; and a radiology clinic as a partner in actions to fight breast cancer.

Regarding the infrastructure of the unit, several difficulties were pointed out, both within the unit (mold, infiltration and lack of space for adequate storage of files and documents), such as lack of basic sanitation and precarious housing in the coverage area. Thus, despite efforts to promote the reorientation of health services to expand access, the reality of the context reaffirms the concept that the provision of effective health care needs to rely on intersectoral work.

The National Health Promotion Policy (PNPS, as per its Portuguese acronym) highlights that intersectoral articulation, considering the factors and conditions of vulnerability and directing the look beyond the physical spaces of the health system, is a necessary strategy for health to be discussed by all public policies, in order to bring about changes in health work<sup>13</sup>. The priority themes of the PNPS reaffirm the

impossibility of the health sector alone to face the determinants and conditions of health, raising the challenge of advancing in intersectoral practice<sup>14</sup>.

In order to assess and meet the health needs of users, there needs to be an understanding of the role of each health professional within a health team<sup>15</sup>. In this sense, in order to provide an understanding of the area of activity of other health professions, the students followed and participated in activities with the health team, such as carrying out the weighing for the *Bolsa Família* program, mapping a micro-area of risk and the construction of a Unique Therapeutic Project (UTP).

During this stage of the internship, the students faced situations of extreme social vulnerability. Among them, there is the one of a user inserted in a family nucleus who experienced problems related to illegal drugs and prostitution, precarious housing, lack of food, compromised basic sanitation, unemployment and unsatisfactory health education. Accordingly, the possibility of accomplishing an UTP was raised to detail the context and reality of this family, also aiming at the involvement of the health team in this process.

In addition to being an interaction tool among the subjects involved, the UTP is a means of consolidating participatory management and encourage the co-responsibility of the user in their health process, based on his/her way of understanding life, its subjectivities and singularities<sup>16</sup>. In relation to professional training, it is presented as an important tool for the construction and exercise of the practice aimed at the generalist profile required by the SUS<sup>17</sup>.

Although the UTP is recognized as a strategic tool in terms of promoting interprofessional collaboration, it is difficult to maintain this activity after the discussion of



cases, weakening when reaching the planning and action stages<sup>18</sup>. Accordingly, the lack of a process that has already been systematized by the team makes explicit the need for professionals to take ownership of this tool so that it can be incorporated into the daily lives of health teams<sup>19</sup>. The experience of students with the UTP contributed to a better understanding of the process of construction and development of the required interprofessional skills.

Thus, from the collection of information through conversations with those involved, with the construction of a genogram to visualize the social interrelations experienced and the list of problems faced and their possible consequences, the students were able to observe, in a practical way, the importance of interprofessional and intersectoral action to face vulnerabilities and achieve goals. In addition, the experiences allowed contact with the population, developing in the students a humanized and comprehensive look, capable of recognizing the existing demands in the community and the complex dynamics of health problems.

The complexity of health care requires the development of collaborative work, in partnership with users, families and the community, as well as with the team and other health services, mainly characterized by effective interprofessional communication<sup>20</sup>. The contact of the Dentistry student with public health services contributes to the teaching-service integration and enables the development of skills described in the DCN<sup>21</sup>.

It is worth noting that, due to the short stay of the students in the internship, only one semester, the continuity of the action to be developed from the UTP was the responsibility of the health team and future trainees. It is emphasized that the students were able to experience in practice the obstacles in accomplishing an UTP described by

Vasconcelos, Jorge, Catrib et al.<sup>22</sup> (2016), involving the existing fragmentation due to professional specializations, interfering with the effectiveness of the actually collaborative action; with little participation from users and family members; and difficulty in expanding actions to other social and assistance-related support devices.

It is pointed out that the impossibility of extending activities in the PHCU due to the determined time of the internship was configured as a limiting factor of the experience, but it did not affect the quality of the activities carried out and the development of students.

From the observation that the activities carried out by the team of the unit with the community are based on health education, user empowerment and co-responsibility, we sought to implement workshops with group dynamics in the actions developed by the students. To this end, the themes worked were chosen from conversations with members of the health team, the community residents and the very routine of the PHCU.

When checking that the community deals with problems related to hypertension and diabetes, the existence of taboos related to the prevention and treatment of cancer and the development of a group of pregnant women in the unit, health education activities were conducted in the waiting room from the topics such as healthy eating, breast cancer, prostate cancer and the oral health of pregnant women and babies. For this purpose, participatory methodologies and the production of materials that could remain in the unit for a long period of time were used.

The creation and handling of waiting room groups serve as a support for reflection, decision-making and, consequently, improvement in the quality of life of the users involved<sup>23</sup>. As for the students, these experiences allow the

construction of early knowledge about the phenomena and obstacles that take place in this process, even favoring reflection and change about the work carried out<sup>24</sup> and, additionally, strengthens the experience of health education, so necessary for professional practice in PHC.

In order to provide a space for sharing experiences about the themes developed and to encourage user participation through dialogue, workshops were planned based on the steps described by Afonso<sup>25</sup> (2010). Thus, demands and motivations for carrying out the workshops were identified, there was the theoretical preparation of the facilitators from readings of scientific materials on the themes and the people who would participate were analyzed, with a view to properly directing the approach and language.

Accordingly, interactive posters were created and dynamics were carried out according to the themes: 1) visualization of the amount of sugar and salt in the food – a poster was made with photos of the most consumed foods by the population, visually showing the amount of salt and sugar with little bags filled with flour; 2) box of myths and truths – a box with sentences containing myths and truths about the theme “prostate cancer” was shared with the users, proposing that whoever was comfortable removed a phrase and said his/her opinion about its veracity, starting the discussion from there; 3) hand flower – a paper flower was passed around to each participant, allowing whoever was holding the flower to share an experience or opinion related to breast cancer.

In order to encourage the development of reflective and critical thinking among students, the construction of a portfolio was proposed for feedback at the end of the internship. This assessment tool allows to reveal the performance of the student during the exercise of the activity, highlighting the skills he/she acquired with the

experiences lived, stimulating the ability to synthesize information through analysis and awakening to the understanding about what was learned or what is considered scarce<sup>26</sup>. In addition, it allows the student to exercise his/her creativity.

The portfolio presentation brought the proposal to share with the public the experiences in the internship fields of each group of students. For this purpose, a collective invitation was held for the participation of those interested in the theme. The moment of presentation was very promising, mainly because it allowed each group of students, as well as their respective preceptors and members of the health teams who were able to participate in the moment, to visualize the challenges of each context experienced by the internship teams and how the critical-reflexive and creative process was for the development of the activities with the health teams and communities. After the presentation, the assessment was very positive, highlighting the importance of teaching-service-community integration for the strengthening of the SUS.

Accordingly, during the four-month internship in the PHCU, all students were able to participate in the activities reported and experience scenarios of teaching-service integration in the SUS when using the PHC space. The importance of this experience for the formation of differentiated dental surgeons should be highlighted, able to be inserted in the territorial reality, identifying vulnerabilities, and able to relate to other areas.

Thus, future curricular changes in the Dentistry course must meet the professional needs of students and population demands, seeking to break the tendency on the part of students to resist and reject the SUS practices<sup>27</sup>. Accordingly, directing training in Dentistry towards the acquisition of skills and abilities that are not only focused on technique has challenges

related to teaching<sup>28</sup>.

Studies show that, during extramural internships, Dentistry students realize the experience as important for their education, considering the ability to work in social realities and interact with other professions<sup>29,30,31,32</sup>. Nevertheless, the extramural internship is still undervalued during the construction of the dentistry curriculum in courses, being considered a parallel activity and less important for training<sup>29</sup>.

The positive experiences of extramural internships for the training of generalist and humanized dental surgeons must be shared so that the benefits are reinforced and the challenges identified. Accordingly, the aim is to show that articulated training in teaching-learning scenarios developed in the SUS has an important role in the profile of newly-trained people in the area of Dentistry, promoting their ability to work in public health services in an integrated, humanized and collaborative way.

### 3 FINAL CONSIDERATIONS

The proposal of the Supervised Internship in FHS allowed the development of a more humanized and comprehensive view of students according to the realities realized. The experiences allowed students to exercise proactivity as they are active subjects of the teaching-learning process in a different setting from the university.

From the proposal to realize the reality of the community and the health team and then define the activity strategies to be developed, it allowed students to develop leadership, autonomy, creativity and criticality, as well as challenged them to deepen their look to assess the exercise of interprofessional practice in the health team. Although the internship proposal does not include the presence of students from other areas of health, it appears that

interprofessional education was worked satisfactorily through the interaction of students with the health team.

### RESUMO

#### **Formação em Odontologia para além dos muros da Universidade: relato de experiência do estágio na Estratégia Saúde da Família**

A exigência de profissionais de Odontologia aptos a trabalhar no Sistema Único de Saúde (SUS) traz a necessidade de uma formação direcionada ao desenvolvimento de competências e habilidades. A inserção do aluno na Atenção Primária à Saúde (APS) por meio dos estágios vem sendo preconizada, por ser um nível de atenção importante para construção da integralidade do cuidado. Assim, o objetivo deste artigo é descrever e analisar a experiência vivenciada por graduandos de Odontologia junto a uma equipe da Estratégia Saúde da Família (ESF) no componente curricular Estágio Supervisionado na ESF, em uma Unidade Básica de Saúde (UBS) de um município do interior, em um bairro com grande vulnerabilidade social. Trata-se de um relato de experiência de abordagem descritiva, caráter qualitativo e cunho crítico-reflexivo. Os dados foram alcançados pela percepção dos alunos durante as atividades do estágio, utilizando como base o portfólio crítico reflexivo (PCR) construído durante dez encontros na UBS. Previamente, um semestre foi destinado à aquisição de conhecimento teórico e planejamento das atividades a serem desenvolvidas durante o estágio. Na UBS, os estudantes tiveram a possibilidade de vivenciar o funcionamento e interação da equipe de saúde, realizar atividades voltadas à prática interprofissional, visualizar as demandas da comunidade e desenvolver atividades com metodologias participativas. Em seguida, foi construído o PCR e partilhada a vivência por meio de apresentação aberta ao público. Dessa forma, o estágio permitiu desenvolver um olhar mais humanizado e integral aos estudantes de Odontologia, com competências importantes para o profissional apto a trabalhar no SUS.

**Descritores:** Educação em Odontologia.



Currículo. Preceptorial. Sistema Único de Saúde. Recursos Humanos.

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