
Active Methodologies and Practice of Teaching in the Community: its importance in the formation of the Speech Language Therapist and Audiologist

Metodologias Ativas e as Práticas de Ensino na Comunidade: sua importância na formação do Fonoaudiólogo

Metodologías Activas y Práctica de la Enseñanza en la Comunidad: su importancia en la formación en Fonoaudiología

*Raphaella Barroso Guedes-Granzott**

*Kelly Silva***

*Rodrigo Dornelas****

*Danielle Ramos Domenis**

Abstract

In recent years there has been an increase in discussions about the need of health professionals, such as the Speech Language Pathologist and Audiologist, more autonomous, critical and with profile in line with the practice of public health in the country. In this context, educational institutions began discussing the inclusion of Active Methodologies of teaching and learning in the pedagogical project

Speech Therapist, Doctor, Professor at Universidade Federal de Sergipe, Brazil; ** Speech Therapist, Master, Professor at Universidade Federal de Sergipe, Brazil; *Speech Therapist, Master, Professor at Universidade Federal de Sergipe, Brazil.*

Conflict of interests: No

Authors' contribution: All authors contributed substantially to the conception and design of scientific work, literature survey, participated in the drafting and critical review of the work, and the final approval of content to be published.

Correspondence address: Raphaella Barroso Guedes-Granzotti

Rua Loudelino Freire, nº 184, 2º andar, sala 01 - Centro. Lagarto-SE, Brasil. CEP: 49400-000.

E-mail address: raphaelabgg@ig.com.br

Received: 09/07/2014 **Accepted:** 29/07/2014



of the courses. With integrative proposal, the Teaching Practices in Community are important modules in this new curriculum that are highlighted by bringing together theory and practice in a real learning scenario. Through the problematization, the methodology used in these practices, the student observes reality and identifies problems, lists the key points, theorizes about the subject, formulates possible solutions and applies them to reality. Thus, the objective of this work is to describe the lived experience in Teaching Practices in Community in a Speech Language Pathology and Audiology course that has as a pedagogical practice of training students by active teaching methodologies, demonstrating that, in this method, the students not only actively construct their knowledge, but are also modifiers of the reality in which they are acting.

Keywords: Health Education; higher education; Speech, Language and Hearing Sciences.

Resumo

Nas últimas décadas houve um crescimento das discussões a respeito da necessidade de se formar profissionais da saúde, dentre eles os fonoaudiólogos, mais autônomos, críticos e alinhados às políticas públicas do país. Neste contexto, as instituições de ensino começaram a discutir a inclusão das Metodologias Ativas de ensino e aprendizagem no projeto pedagógico dos cursos. Com uma proposta integradora, as Práticas de Ensino na Comunidade se tornam módulos importantes nesses novos currículos e se destacam por articular teoria e prática em um cenário real de aprendizagem. Utilizando a metodologia de problematização, o aluno observa a realidade e identifica os problemas, elenca os pontos chaves, teoriza a respeito do assunto, formula hipóteses de solução e aplica à realidade. Sabendo disso, o objetivo deste trabalho é descrever a experiência vivenciada nas Práticas de Ensino na Comunidade em um curso de Fonoaudiologia que tem como prática pedagógica para a formação discente as metodologias ativas de ensino, demonstrando que, dessa forma, o aluno não só constrói ativamente o seu próprio conhecimento, mas também passa a ser um agente modificador da realidade em que está atuando.

Palavras-chave: Educação em Saúde; educação superior; Fonoaudiologia

Resumen

En las últimas décadas se ha producido una creciente discusión acerca de la necesidad de formar a profesionales de la salud, entre ellos los fonoaudiólogos, más autónomos, críticos y alineados con las políticas públicas del país. En este contexto, las instituciones de enseñanza comenzaron a discutir la inclusión de las metodologías Activas de enseñanza y aprendizaje en los en los proyectos pedagógicos de los cursos. Con una propuesta de integración, las Prácticas de Enseñanza en la Comunidad se convierten en módulos importantes de estos nuevos currículos y se destacan por vincular teoría y práctica en un escenario real de aprendizaje. Utilizando la metodología de problematización, el estudiante observa la realidad y identifica los problemas, enumera los puntos clave, teoriza sobre el tema, formula hipótesis de solución y aplica a la realidad. Sabiendo eso, que el objetivo de este trabajo es describir la experiencia vivida en las Prácticas de Enseñanza en la Comunidad en un curso de Fonoaudiología que tiene como práctica pedagógica para los estudiantes en formación las metodologías activas de enseñanza, demostrando de esta manera que el estudiante no sólo construye activamente su propio conocimiento, pero también pasa a ser un agente modificador de la realidad en la que está actuando.

Palabras clave: Educación en salud; educación superior; Fonoaudiología





Introduction

The professional's profile graduated in the health area, as the Speech therapists, dissociated from the real needs of the Brazilian health system has raised several questions in recent decades. Higher education institutions, in an attempt to find alternatives to the health professionals' training contemplating the situation of current public policies, have changed their teaching practices, approaching the social reality, especially the Unified Health System, a practice that values completeness, humanized care and health promotion¹⁻³.

Active teaching methods in this context were seen as an option as a foundation to the student's autonomy and the objective of the formation of social subjects with ethical responsibilities, policies, and techniques and equipped with knowledge, reasoning, critical, responsibility and sensibility to the issues of life and society, enabling them to intervene in contexts of uncertainty and complexity. In this perspective, we work with problems or issues situations (SPs), for the development of teaching-learning processes, valuing learning to learn, in which the teaching strategy is centered in the student, leaving the role of passive receiver and takes the main agent and responsible for their learning. This cause teachers and students to engage differently with knowledge, redirecting responsibilities and providing space for the development of autonomy, making them able to manage their formation^{4,5}.

The debates and discussions on the SPs are triggering the search for explanatory factors and the assumption solutions. Thus, to discuss means being able to respond to the inherent conflict that presents a problem. The contents are constructed by the student, who needs to reorganize information adapting it to its previous cognitive structure; to discover relationships, laws or concepts that need to be assimilated; removing elements of reality that give meaning toward learning⁶⁻⁸.

Within the pedagogical practices in active methodologies, another important concept of training in health, is to "learn by doing" which discusses the traditional sequence theory and practice in the production of knowledge, bringing the idea that the teaching-learning process needs to be bound to practice settings and must be present throughout graduation. This requires professional continuous reflection on their actions and planning based on

reality, it is necessary to stimulate and adjust the educational practices^{9,10}.

However it should not overstate the practical learning rather than the theoretical, but find alternatives that balance these two skills of knowledge. The best way to teach is to achieve integration of the subject to be taught from everyday life, seeking to build in students the habit of seeking bridges and existing mutual influences between theory and practice, between what was experienced and learned, in which the pursuit of knowledge should approach the care practice to the educational one^{11,12}.

In teaching practices, learners actively involve in the real world, and when they experience tension, they start to recognize the differences in performances and care production demands in daily health systems, developing the ability to transform the impasses and impossibilities in work and possible actions; making reflection about the daily practice of the learning process¹³⁻¹⁵.

Knowing that, the objective is to describe an experience in the Teaching Practice module in the Community (PEC), in a course of Speech Language Therapy that has as a pedagogical method for training students active teaching methodologies.

Experience report

The course of Speech Language Therapy from Universidade Federal de Sergipe, Campus Prof. Antonio Garcia Filho started in March 2011 as the first course in Brazil using exclusively on its resume, pedagogical practices in active methodologies (MA) of education.

For curriculum integralization, the student must attend four cycles, each cycle corresponding to a school year and being subdivided into modules, also called subunits, whose contents are integrated. Among the forms of MA that can be used, the course modules use both the Problem-Based Learning (ABP) as the Problemization Methodology (MP); the two learning strategies are the ones which currently stand among the active methodologies. These two proposals have in common the process of knowledge construction by the use of problems, and in the ABP, the problems are developed by a team of experts and cover the basic knowledge required by the course curriculum, while in MP problems are extracted by the student in the real scenery⁴.



The theoretical character modules make use of APB in which there are training tutorial groups with up to twelve students without the teacher, here called the tutor that presents the pre-prepared problem containing the essential content that students are able to exercise. After reading the problem, the students set out the study objectives in Tutorial Session and then they study collectively and individually so that, later, in a new Tutorial Session, they discuss again the studied and learned content.

The practical modules, discussion objective of this project, use the sustained pedagogy questioning in the theoretical-philosophical framework of Paulo Freire in which problems need a real scenario for the knowledge construction occurrence from the significant experiences. For this, the course has in its curriculum, from cycles I to III, the module called Teaching Practice in the Community (PEC); the exception of the fourth cycle is due to the fact that this cycle is exclusively for the professional internships.

The MP can be divided into five stages, and it uses the Arch of Charles Maguerez (ACM), which starts from the name of the teacher, also called as facilitator, on the topic to be studied and the identification by the students of the problems within the social reality, this phase being called the observation of reality. The second step is to identify the key points in which the student starts from prior information to reflect on the causes and determine the essential points of the problem. Later, there is the theory, time for the search of scientific knowledge in order to understand the events and the theoretical principles of the problem. In the fourth phase there is the solution hypothesis formulation and the student analyzes the feasibility of implementing the solutions studied for the identified problem. The last step is the application of reality, in which the student puts into practice the most viable solutions of the study^{3,4}.

The activities of PECs can be developed in different environments, covering the different levels of care to the population, and in the Speech Language Therapy course the performance environments are: Care Units Primary Health Care, Nursery, Parenting, Regional Hospital and Centro de Referência de Saúde do Trabalhador (CEREST), all located in the city of Lagarto-SE. It will be described below the PEC activities developed by the students of the second cycle in the Maternity to exemplify what has been theorized yet.

The Maternity Zacharias Junior is an institution considered of low-risk for receiving only pregnant women not diagnosed with high maternal and fetal risk, the only maternity city treating besides the municipalities, 118 villages and five settlements. This maternity was chosen as one of the practical activities for students of II cycle of the course, whose study axis is childhood and adolescence. The activity described herein was formed by a group of ten students and one teacher, it happened weekly with four hours per meeting, during one semester.

Following the MP and using the Arch of Charles Maguerez in the teaching, learning and performance; in the first stage, the topics to be developed during practice, namely: pregnancy, childbirth, breastfeeding and psychomotor child development were listed by the teacher. Knowing that the students at first carried out an institutional diagnosis, they were acquainted with many areas of the institution, the professional staff and the absence of speech language therapists among them, the protocols used for the routine and care flow, and monitoring in child care until six months old of the baby's life. From this contact with reality, the group was able to identify situations of difficulty in breastfeeding in the first hour of life, delays in neuropsychomotor development, even in low-risk babies, and early weaning.

Following the ACM, from the issues raised, the students, with the intermediation of the teachers, were trying to state the reasons for such a situation, which were designated as key points; for that, it was used prior knowledge of both experiences in the course of his life, as what was already acquired in their university experience, through Sessions Tutorials occurring simultaneously to the activities of the PEC. In the case of this group, noting that it was the first to develop speech-language actions in the institution, the following points were listed in the discussions: the lack of information from mothers about the practice of breastfeeding and child development, in addition to early weaning and its consequences, their young age, lack of family support, presence of the babies' oral amendments, use of bottles and pacifiers, the ignorance about the performance of the speech language therapist, among others.

The key points were identified; the third stage of the ACM is the pursuit of scientific knowledge on the subject, made by the student himself with the teacher's support, through many learning resources





such as journals, textbook and internet. During the discussions, the teacher as a facilitator posture, worked with the proposed content for practice, directing the students to seek within the theory the answers to the problems found in reality.

From the discussions and the studies that took place individually and in small groups, there were proposals for activities that addressed the issues raised, which embodies the fourth stage of the ACM, the formulation of hypotheses and solution viability. It is apparent that the need to solve real situations is exciting for the student, the process encourages him to be the agent of his learning and not just receiving past knowledge by the teacher. Developing this skill and stimulating the student's sensitivity to this is what drives the teacher throughout the PEC.

In the group in question, direct intervention activities with the mother and the baby were proposed, such as the clinical assessment, creation of informational materials to mothers and their families, participation in groups of pregnant women with lectures and conversation circles and interdisciplinary activities with other institution professionals; these proposals were put into practice during the semester, thus closing the ACM, in other words, by applying the solution of chances in the acting scene.

In this method of active teaching, the students' evaluation occurs throughout the learning process described, being, therefore a formative evaluation. For this, the teacher observes all the path developed by the students, as the elaboration of questions, the answers to these questions, the development of oral and written summaries, the idealization of the material used for lectures and guidelines and the use of reflective portfolios. Formative assessment was built on a daily basis so that it could help students improve their communication skills (oral and written), leadership, interpersonal and collaboration; and the students, thus, urged to use their previous knowledge, to generate hypotheses, to analyze, synthesize, discuss and build critical thinking about the technical and scientific information in the area.

It is important to note that the assessment is really formative if, through it, the students become aware of any differences between his present state and the state to be reached and what is needed to reduce, or even eliminate, such differences. Thus, it is not only carrying out at many times of the

learning process once an evaluation may be continuous, and not formative.

Despite the PEC be directed to the Maternity, actions in Primary Care Network have also been developed, such as pregnant women's monitoring in groups of guidelines and babies during the first six months of life, expanding the look of the student on the real needs when he acts at the National Health System. More than speech language therapy concepts about breastfeeding, early childhood and rehabilitation installed diseases, responsibilities were developed on social skills, integrity and health promotion vision, emphasizing the host and humanization of care, essential concepts for professionals working in public health services in Brazil.

Final considerations

The Teaching Practice Module in the Community as part of the pedagogical project of the course, enables, as it can be seen, much more than the theory-practice at the start of training, but allows the student to interpret the reality in which they will work. It enables us to ask how a particular experience can change the understanding, learning, attitudes and the behavior of each member of a group, whether teacher or student. It aims not only the cognitive knowledge domain, but also a critical awareness of the facts. But for it to really happen, it is noteworthy that the use of questioning as a learning methodology requires for the teacher a change of posture on the exercise of a reflective work with the student, requiring availability to research, monitor and collaborate in learning, since the teacher is often faced with unexpected, new and unknown situations. This requires sharing with the students, in fact, the process of knowledge construction.

References

1. Merhy EE, Feuerwerker LCM, Ceccim RB. Educación permanente en salud: una estrategia para intervenir en la micro política del trabajo en salud. *Salud Colectiva*. 2006;2(2):147-60.
2. Marin MJS, Gomes R, Marvulo MML, Primo EM, Barbosa PMK, Druzian. Pós-graduação multiprofissional em saúde: resultados de experiências utilizando metodologias ativas. *Interface (Botucatu)*. 2010; 14(33):331-44.
3. Pereira ALF. As tendências pedagógicas e a prática educativa nas ciências da saúde. *Cad Saúde Pública*. 2003;19(5):1527-34.
4. Berbel NAN. A problematização e a aprendizagem baseada em problemas: diferentes termos ou diferentes caminhos? *Interface Comun Saúde Educ*. 1998;2(2):139-54.





5. Freire P. *Pedagogia da autonomia: saberes necessários à prática educativa*. 33. ed. São Paulo: Paz e Terra; 2006.
6. Garcia Madruga JA. Aprendizagem pela descoberta frente à aprendizagem pela recepção: a teoria da aprendizagem verbal significativa. In: Coll C, Palácios J, Marchesi A (Orgs.). *Desenvolvimento psicológico e educação*. Porto Alegre: Artmed; 1996. 68-78.
7. Zanotto M, Rose T. Problematizar a própria realidade: análise de uma experiência de formação contínua. *Educação e Pesquisa*, 2003;29(1):45-54.
8. Cyrino EG, Toralles-Pereira ML. Trabalhando com estratégias de ensino aprendido por descoberta na área da saúde: a problematização e a aprendizagem baseada em problemas. *Cad Saúde Pública*. 2004;20(3):780-8.
9. Pinhel I, Kurcgant P. Reflexões sobre competência docente no ensino de enfermagem. *RevEscEnfermUSP*. 2007;41(4):711-6.
10. Carvalho VLS, Clementino VQ, Pinho LMO. Educação em saúde nas páginas da REBEn no período de 1995 a 2005. *Ver EscEnferm USP*. 2008;61(2):243-8.
11. Marsden M. *A indissociabilidade entre teoria e prática: experiências de ensino na formação de profissionais de saúde nos níveis superior e médio [dissertação]*. Rio de Janeiro (RJ): Escola Nacional de Saúde Pública Sergio Arouca; 2009.
12. Sobral FR, Campos CJG. Utilização de metodologia ativa no ensino e assistência de enfermagem na produção nacional: revisão integrativa. *Rev EscEnferm USP*. 2012;46(1):208-18.
13. Kolkhorst BB, Yazedjian A. Implementing small-group activities in large lecture classes. *CollegeTeaching*, 2007. [Acesso em: 10 jan. 2008] disponível em: <<http://www.highbeam.com/College+Teaching/publications.aspx?date=200709>>
14. Koh GC, Khoo HE, Wong ML, Koh D. The effects of problem-based learning during medical school on physician competency: a systematic review. *CMAJ*. 2008;178(1):34-41.
15. Bordenave JD, Pereira AM. O que é ensinar. "In": Bordenave JD, Pereira AM (org). *Estratégias de ensino-aprendizagem*. 25a ed. Petrópolis: Vozes; 2000. p.39-57.

