

Social representations of undergraduates about the education through work for health program

Representações sociais de graduandos acerca do programa educação pelo trabalho para saúde
Representaciones sociales de graduados sobre el programa de educación por el trabajo para la salud

Luana dos Santos Costa¹, Gláucia Alexandre Formozo¹

¹Universidade Federal do Rio de Janeiro, Nursing and Obstetric Course. Macaé, Rio de Janeiro, Brazil.

How to mention this article:

Costa LS, Formozo GA. Social representations of undergraduates about the education through work for health program. Rev Bras Enferm [Internet]. 2018;71(2):244-51. DOI: <http://dx.doi.org/10.1590/0034-7167-2015-0168>

Submission: 05-10-2016

Approval: 04-02-2017

ABSTRACT

Objective: analyze the social representation of undergraduates from the health area in which were scholars of PET-Saúde of the UFRJ-Macaé Professor Aloísio Teixeira Campus about this program and its contribution to the respective professional training. **Method:** This is an exploratory, descriptive study, with a qualitative approach. A total of 38 undergraduates participated, and a professional socioeconomic questionnaire and semi-structured interview were used to collect data. To analyze the data, thematic content analysis was used. **Results:** The results showed that PET-Saúde integrates undergraduates, health professionals and community, seeking the interdisciplinarity and the interrelation of those involved, articulating the scientific knowledge with the common sense for the transformation of the health service. **Conclusion:** The program encourages population's empowerment and the critical, reflexive thinking of undergraduates and professionals about the health-disease process and acts as a source of transformations in the training of health professionals in response to the demands of the Unified Health System (SUS).

Descriptors: Health Systems; Health Sciences Students; Primary Health Care; Pet- Saúde; Academic Formation.

RESUMO

Objetivo: analisar a representação social de graduandos da área da saúde que atuaram como bolsistas do PET-Saúde do Campus UFRJ-Macaé Professor Aloísio Teixeira acerca deste programa e de sua contribuição para as respectivas formações profissionais. **Método:** Estudo exploratório-descritivo, com abordagem qualitativa. Participaram 38 graduandos, sendo utilizados na coleta de dados um questionário socioeconômico profissional e a entrevista semiestruturada. Para a análise dos dados, empregou-se a análise de conteúdo temática. **Resultados:** Os resultados mostraram que o PET-Saúde integra graduandos, profissionais de saúde e comunidade, buscando a interdisciplinaridade e a inter-relação dos envolvidos, articulando os saberes científicos com o senso comum para a transformação do serviço de saúde. **Conclusão:** O programa estimula o empoderamento da população e o pensamento crítico-reflexivo de graduandos e profissionais sobre o processo saúde-doença e atua como fonte de transformações na formação de profissionais de saúde diante das demandas do Sistema Único de Saúde.

Descritores: Sistemas de Saúde; Estudantes de Ciências da Saúde; Atenção Primária à Saúde; Pet- Saúde; Formação Acadêmica.

RESUMEN

Objetivo: analizar la representación social de los graduandos del área de la salud que han actuado como becados del PET-Saúde do Campus UFRJ-Macaé Professor Aloísio Teixeira sobre este programa y su contribución a las respectivas formaciones profesionales. **Método:** Estudio exploratorio-descriptivo, con abordaje cualitativo. Participaron 38 graduandos, siendo utilizados en la recolección de datos un cuestionario socioeconómico profesional y la entrevista semiestruturada. Para el análisis de datos, fue utilizada el Análisis de Contenido temático. **Resultados:** Los resultados mostraron que el PET-Saúde integra graduandos, profesionales de la salud y comunidad, en busca de la interdisciplinaridad y la interrelación de los afectados, articulando los saberes científicos con el sentido común para la transformación del servicio de salud. **Conclusión:** El programa estimula el empoderamiento de la población y el pensamiento crítico-reflexivo de graduandos y profesionales acerca del proceso salud-

enfermedad y, además, actúa como fuente de transformaciones en la formación de profesionales de salud ante las demandas del Sistema Único de Salud (Sistema Único de Saúde).

Descripciones: Sistemas de Salud; Estudiantes de Ciencias de la Salud; Atención Primaria a la Salud; Pet- Salud; Formación Académica.

CORRESPONDING AUTHOR

Gláucia Alexandre Formozo

E-mail: glauciaformozo@gmail.com

INTRODUCTION

Throughout the years, the Brazilian health system underwent several reformulations that accompanied the economic, political and sociocultural transformations and culminated in the creation of the Unified Health System (SUS) in 1988. These reformulations brought important changes in health care and, professional practice of those who work in this system.

In 1994, the Family Health Program (FHP), now called the Family Health Strategy (FHS), was introduced, which made it possible to restructure the primary care model, with a view not only to the individual, but also to the family and to the community, having a multi-professional team capable of carrying out health promotion and actions prevention⁽¹⁾.

Parallel to this new scenario in the field of health, changes and advances were observed in the scope of education, being verified that the profile of professionals trained in the country did not meet the demands and needs of the SUS. Thus, it was necessary to introduce a teaching that addresses the concept of health-disease process and encourages the introduction of practices aimed at health promotion, thus opposing the biological and individual model⁽²⁾.

In this sense, a restructuring of the National Curriculum Guidelines occurred in 1996, through the Law of Directives and Bases of National Education (LDBE) originating the National Curriculum Guidelines (DCN) for courses in the health area. Hence, it was hoped that the health professional would be able to develop skills, abilities and contents that are consistent with the needs of users, with quality, efficiency and resolution.

Later in 2009, the Ministry of Health, in partnership with the Ministry of Education, created the Health Work Education Program (PET-Saúde), with the objective of fomenting the formation of learning groups in strategic areas for SUS. It is an instrument for in-service qualification of professionals, as well as initiation to work and experiences addressed to undergraduates, according to SUS needs⁽³⁾.

In this context, the UFRJ-Macaé Professor Aloísio Teixeira *Campus* had the approval of its project in the 2010 Public Notice, and it obtained funding for seven subprojects (each consisting in a tutor / teacher, six preceptors / health network and 12 scholars / undergraduates), valid between 2010 and 2011. In the 2012 Public Notice, the *Campus* mentioned obtained the approval of four subprojects with composition equal to the previous one. It should be noted that they were linked to the project, as scholars, students of undergraduate courses in Nursing and Obstetrics, Pharmacy, Medicine and Nutrition.

Given that social representations consist of "a form of knowledge, socially elaborated and shared, with a practical objective, and that contributes to the construction of a reality common to a social set"⁽⁴⁾, it can be said that the Theory of Social

Representations (TRS) makes it possible to understand the normative dimension and the processes of transformation of knowledge shared by a group about social reality⁽⁵⁾. Thus, in the case of the present study, this theory contributes to the understanding of the images, information and attitudes regarding PET-Saúde.

In view of the above, this study has as its object the social representation of undergraduate scholarship holders of PET-Saúde about this program.

OBJECTIVE

To analyze the social representation of undergraduate students in the health area who worked as scholars of the PET-Saúde of UFRJ-Macaé Professor Aloísio Teixeira *Campus* about this program and its contribution to the respective professional training.

METHOD

Ethical aspects

It should be stressed that all the ethical principles established in Resolution 466/2012 of the National Health Council (NHC) were respected. The project was submitted to the Research Ethics Committee of the Universidade Federal do Rio de Janeiro (UFRJ) - Macaé Professor Aloísio Teixeira *Campus*.

Theoretical-methodological reference and type of study

It is a qualitative, exploratory and descriptive research.

Methodological proceedings

The scenario was the UFRJ Macaé *Campus* Professor Aloísio Teixeira and the undergraduate subjects who have been acting as PET-Saúde scholars for at least four months.

It should be noted that the time spent in the program was considered considering the conditions that affect the emergence of social representations, namely: dispersion of information (availability of information needed to understand the object); (subject interests that parameterize the focus on a given object); and pressure to inference (pressure that influences the nature of social positions)⁽⁶⁾.

Thirty eight undergraduate students were interviewed, ten (26.3%) of the Nursing and Obstetrics course, ten (26.3%) of Medicine, nine (23.7%) of the Pharmacy course and nine (23.7%) of Nutrition. It was not possible to make a total of ten scholars in the courses of Pharmacy and Nutrition, since the students who had participated as scholars had already graduated. In order to guarantee the anonymity of the subjects, they had their lines identified by the letter "E", numbered from 1 to 38, according to the order of the interviews.

The data collection took place from July to November 2014, through a socioeconomic / professional questionnaire

and a semi-structured interview script containing questions regarding information, images and attitudes about PET- Saúde, since they understanding of social representations. The interviews had the recorded audio, upon agreement of the participants, for later transcription and analysis.

We used the thematic-categorial content analysis⁽⁷⁾, considering as a unit of registration (U.R.) the text segment that contained a complete assertion about the object being studied. Subsequently, the U.R. was grouped into subcategories and these, in sequence, grouped into the categories constructed.

RESULTS

The individuals were between 18 and 31 years of age, of which 28 (73.7%) were female and 10 (26.3%) were male. Individuals (100%) prevailed, with monthly incomes lower than a minimum wage (65%) and monthly family income between five and ten minimum wages (29%). Nineteen (50%) had already participated in other research and / or extension projects.

Regarding the themes of the PET-Saúde projects in which the subjects participated, there are: breastfeeding; use of medications; sexually transmitted diseases; mental health; chronic diseases; female mortality due to external causes; cervical cancer; healthy choice of food labels; Nutritional Surveillance System (NSS); critical use of information; and strengthening women's health care.

The following empirical categories were identified in the research: PET-Saúde contributions to the assisted community (204 U.R. = 35.5%); PET-Saúde and its interface with the academic training of undergraduates (181 U.R. = 31.5%); PET-Saúde and its contributions to health professionals (116 U.R. = 20.1%); Information from undergraduate scholarship holders about PET-Saúde and its products (45 U.R. = 7.9%); and PET-Saúde Interfaces with the health system (29 U.R. = 5.0%).

PET-Saúde and its interface with the academic training of undergraduates

This category includes elements related to the practical dimension in relation to the social object in question. This dimension has been one of the aspects that underlie the process of PET-Saúde contribution to the academic training of undergraduates, as well as their contribution to the development of this program.

The results show that PET-Saúde provides the undergraduate with a view of the responsibilities and activities performed by the health professionals inserted in the network, and thus help prepare for the job market.

[...] I attended consultation with the nutritionist, afterwards we consulted. So, you have this notion of practice, really, of what we will do after we leave the course. (E07)

It totally contributes. Through the PET project, we can see how the job market is. Then, we think about how we will be as a health professional. (E02)

Likewise, there are contents regarding the possibility of the graduate sharing experiences with health professionals and teachers. The subjects emphasized the fact of this experience to approach theory and practice learned by other professions.

They bring people who are still in training, huge experiences that they have already lived. And we take experiences they lived related to scientific work. (E18)

We will have a contact with the other professionals in the health area, already begins to develop a team work. (E17)

This category also includes content about the contribution of PET-Saúde in the sense of enabling undergraduates to contact situations / knowledge not yet experienced in their curriculum. In addition, it encourages it to better take ownership of the issues discussed.

Learn some medications, too, because we are in the fifth period, so now that we have drugs. So we do not know some medicines and it is good to learn because in practice it is much better than theory. (E05)

The issue of updating the search for new information, is always being involved in the subject, studying information about it. (E25)

Other representational contents in this category are related to the evaluative dimension, which includes the importance of sharing experiences among scholars and professionals in other health areas. It is about recognizing the possibility of learning in multi-professional work.

We are always in contact with other scholars from other courses, having an exchange of experiences is always very good in that subject. It opens up for both nutrition and nursing, with a broader knowledge. (E03)

[...] seeing as topics that we think have nothing to do with the physiotherapist, in fact, he has to do. He acts on top of that, mainly, this multi-professional performance. (E14)

In the social representation of the scholarship holders, participation in PET-Saúde enables them to know the techniques used to interact with the population, as well as the acquisition of specific knowledge about the themes of the projects and the daily application of theoretical concepts.

The student is not only governed by scientific knowledge within the academy. The student has the opportunity to take the knowledge out of the academy, which would be the community itself. (E28)

There was one thing I learned that I even found nice. As it is little studied, we associated the drugs. Those who are by day, we did not set the time; we drew a sun, at lunch we drew a pot and, at night, a moon. (E05)

In the reports, there are also contents regarding the change of perception of the undergraduate with respect to their profession and professional possibilities not glimpsed before the participation in the activities of PET-Saúde.

[...] knowing that the nurse can prescribe in the units, I think, today, I feel I can explain better. (E23)

[...] that the pharmacist will not only be in the laboratory producing remedy / medicine. That we can, also, act in other areas being able to act in the area of hospitals, giving pharmaceutical assistance. (E12)

The interviewees' discourses present elements related to the evaluative dimension, consistent with their participation in PET-Saúde, as a possibility to insert contents related to humanization in their academic formation, which for them is enriching. They point out that some undergraduate courses - for example, Nursing and Medicine - have already provided humanized interaction with the community since the first academic periods, and therefore have more previous experience of humanized practice when compared to other courses.

In addition, according to the participants, activities related to PET-Saúde allow the undergraduate to establish social interaction with the community.

I think the most striking part is the humanization. I think we have a very technical and little humanized background. (E16)

[...] Nursing and Medicine have, from the beginning, had this access to working with public health. But not the Pharmacy. I think it should be mandatory because, there, it gives me a sense of what practice is. (E11)

Allied to this, they refer to the importance of building a bond between undergraduates and health professionals, in order to better care of those in their care.

But I created a very good bond with my ACS. I think that, because of that, it was that our case went away. (E04)

In addition, the scholars consider that PET-Saúde allows them to plan actions in the role of protagonists of the articulation, including between the user / client and the health network. In this sense, they perceive themselves as active actors in the process of qualification of other undergraduates who are inserted later in the project.

We do this joint, we take patients who are not adhering to the treatment and try to get them to have access to some kind of treatment. (E04)

[...] was the training / qualification of incoming students. The students who were there for the longest time helped and also assisted in the field that was distributed an active student and novice student. (E10)

PET-Saúde and its contributions to health professionals

This category encompasses content of the practical dimension related to PET-Saúde in relation to its contribution to professionals inserted in the health services.

These contents are about the activities of permanent education directed to the professionals mentioned above, carried out by the PET-Saúde groups. Interviewees observe that, during these activities, professionals are more capable when they involve subjects with which, surprisingly, sometimes they did not have access during the academic formation. In addition,

these moments allow them to obtain information from other areas of knowledge, which, in the end, is reflected in higher customer service quality.

We were fortunate to have the nurse who manages our position. She even commented to me that PET made her see things she had not seen before, nor seen in college. (E04)

I think we contributed, mainly, to the other professionals who, as they do not always have a pharmacist in the position, they who have to pass the information. And this is not their training; they are not required to know. But it has contributed with an extra training that they will be able to be acting. (E06)

The representational content also deals with the opportunity given to health care professionals participating in PET-Saúde to return to the academic environment from a new perspective. Among other points, the insertion in the project favors the participation in events and scientific publications and reflections on the care provided.

This has changed a bit in professionals. They started thinking again about diabetes, about hypertension again and what they could do for that community. (E28)

It can return to the university environment. The preceptor, though formed, is far away. Then he is able to participate once again in congresses and scientific journeys in which he has the opportunity to participate by writing summaries and scientific articles. (E03)

In the reports, there are also contents of the practical dimension related to the improvement of the integration among the members of the multi-disciplinary team, through the sharing of knowledge, since the PET-Saúde groups encompass professionals from different areas of knowledge (Nursing, Pharmacy and Dentistry, for example), which favors the performance of multi-professional actions. The subjects perceive that the presence of undergraduates in the health services provides greater integration among the members of the health service team.

There is better integration into the team than it is time to get out of the rut. They say they break the strategy routine when we go. (E15)

My PET has a dentist, a nurse and a pharmacist. So they are very different areas. (E26)

Contributions of PET-Saúde for the assisted community

This category encompasses contents of a practical dimension related to PET-Saúde contributions to the assisted community. Among the contents presented, some relate to the possibility, with the PET-Saúde, of the social actors present in the context of the university to establish a relationship with the social actors of the communities covered. In this context, the academic community plays an important role in helping to achieve improvements by solving community problems.

It brings the academic community closer to the population; it is a bridge between teachings. (E10)

Universities can help them, and we can try to solve their problems, right? (E11)

Another contribution aimed at the community, in the representation of the scholars, involves the activities of health education carried out with a view to improving the quality of life. They emphasize that such activities emphasize the promotion of health and the prevention of diseases, as well as clarify frequent doubts among the population.

[...] try to help, most clearly, because, not always, people understand the way we talk. But we try to get the information in a simple way to have an improvement in their health. (E33)

I end up contributing, taking doubts from them as, for example, of medicines that they take, on examination [...]. (E15)

The interviewees verbalize that, prior to the accomplishment of health education activities, approaches were carried out with the population in order to know their profile and, thus, to identify their needs, since the health demands vary according to each reality. Among the approaches carried out, special mention should be made of participation in therapeutic groups and the conduct of home visits (V.D.). According to them, team professionals also signal for some identified demands.

[...] we spent an afternoon there with the nurse, if we had a group, we would participate in the group, if you had a DV, we would participate in a DV. (E29)

From what the preceptors bring, because they know what their lives are like, our book will be turned to their reality. Why not talk to the guy there in Imbuuro come buy something in the center because even access is difficult. (E14)

Elements of an evaluative dimension are also found in this category, since undergraduates consider the health education activities carried out to be beneficial for both parts, since they allow the sharing of experiences between the community and members of the PET-Saúde groups. In addition, they promote the diffusion of information among their peers, since the subjects act as replicators of the information received.

[...] to bring something positive to society. Being able to be help and also acquiring with them. (E05)

So we do activity for a while. Then, we find people who have already participated in some activity, they come and talk about what she received and she says: Oh, I already told my son. I already told my grandson. You see that information is being passed on. And I believe it was important to the community. (E18)

In addition, PET-Saúde is represented by the interviewees as a program that contributes to the relationship between the community and the health professional, since the actions of the projects allow establishing a link between these social actors.

Beyond that, there are presentations that point to the importance of interdisciplinarity in favor of the user, since the

union of knowledge of the health services professionals and the members of the PET groups, in different areas, translate into direct benefits to the community.

Bring together the knowledge of both to help the community. (E08)

[...] this link of the nurse with Nutrition may be enabling the nurse, by spending more time with the patient, to spend the day to day for the nutritionist. And that the nutritionist can understand that the food that is being passed to that patient is not what the client is needing, and may be suitable for each client. (E09)

PET-Health Interfaces with the Health System

In this category, elements of the practical dimension of the interface between PET-Saúde and the Health System are found. Content emerges about the integration of undergraduates with health units, as well as the relationship between university and health system. The representational contents indicate that, through participation in PET-Saúde, the graduate had the opportunity to know the reality of the health system, with its difficulties and possible divergences with the existing literature.

Because it's one thing to get a book from Epidemio, get a Collective Health book and read it. Another thing is to be there and see that the patient is delayed to make the appointment and that the DV is sometimes not efficient and does not occur. (E04)

The representational contents present the contribution factors of PET-Saúde to strengthen the link between the health unit and the clients. In addition, the university, with the knowledge that it builds, plays a fundamental role in the transformation of the network, since it helps in its organization and improvement.

We went to a joint meeting stage to improve on a tool they already had. Because the intention of the project is to improve this service managed here in the municipality. (E37)

Because the purpose of our project, in short, is to create a pro network that had no network. (E27)

Information from undergraduate scholarship holders about PET-Saúde and its products

In this category, we present the information dimension present in the representational contents seized by undergraduate scholarship holders about PET-Saúde and its products. In this way, they mention that the above-mentioned program differs from a research project, among other reasons, by its social role. They also acknowledge that it brings together projects from various courses and aggregates extension and teaching.

PET is a different project than scientific initiation, which is more research-oriented. PET has more social characteristics [...]. (E24)

The program today, in general, has projects today that talk about STDs, Nutrition, and Pharmacy on the abusive use of medication. (E10)

As PET-Saúde products, undergraduates represented the bibliographical surveys carried out on the themes of the projects in which they were inserted, papers presented at scientific events and published scientific articles.

I participated in the meetings even in the activities in the network. They were also in presentations of work. (E37)

[...] After these exploratory studies, we will do an interview that will be sent to the ethics committee, so we will do this research to make it a scientific article. (E15)

DISCUSSION

Through the social representations about PET-Saúde emerged from the interviewees' discourses, it is possible to identify that they are closely related to the objectives proposed by the mentioned program, since they present contents on: integration between health graduates and professionals inserted in units of health and community through the development of new care practices; early insertion into the labor market; transition from technician to humanized thinking; and discovery of new possibilities offered by the health professions⁽⁸⁾.

It should be emphasized that the representational content that encompasses investing in the social, economic and cultural issues of the community in order to integrate common sense with scientific knowledge and to combine theory with practice also correlate with the objectives established by the program concerned. It is emphasized that the program favors the relations between university and health service, insofar as it articulates care, management and academic training⁽⁸⁾.

The social representations on canvas present contents strongly linked to multi-professionality, with emphasis on the composition of projects by professionals from different health areas, which allows for mutual learning. It can be observed that this composition allows the student to understand the importance of perceiving the client in a holistic way and, consequently, to apprehend the genuine role of a multi-disciplinary team. In this sense, the discussions about the needs arising from the community allow the professional and the student a fruitful reflection⁽⁸⁻⁹⁾. In the same way, they favor the apprehension of the need to apply this practice in the fields of assistance and academic training, which demands cooperation, collaboration and dialogue⁽¹⁰⁾.

In addition, the social representation identified presents contents related to health education activities, focusing on the promotion of health and the prevention of diseases, with a view to improving the quality of life of clients. Such activities help in the construction of knowledge by the population, in order to encourage the exercise of autonomy over their individual or collective care. It can be affirmed that health education promotes reflection and critical awareness about its reality and, in this way, it subsidizes the empowerment of these clients, making them able to understand the importance of care with their health⁽¹¹⁾.

It should be stressed that, in order to carry out these activities, it is necessary to have a professional with critical and reflective thinking that evaluates the reality and specificities of the population, since it is essential to consider the culture,

belief and social conduct of the group⁽¹²⁾. These activities should give the individual empowerment and autonomy about their health. The health educator provides society with its findings and must consider, in its work, the environment in which individuals are inserted⁽¹²⁾.

Likewise, the social representations refer to the permanent education of the professionals of the health services where the projects are developed. In this sense, PET-Saúde provides knowledge updating, an aspect that contributes to the learning of innovations and transformations⁽¹³⁾.

The purpose of permanent education is to promote the integral development of the health professional, through the teaching of content that considers reality and daily work. It aims, therefore, at the transformation of the health sector, providing the continuous renewal of knowledge among the professionals of the network and, thus, making them more confident to deal with the themes addressed in the projects⁽¹⁴⁾.

The research subjects represent PET-Saúde as a program that has a great impact on the health service, as it organizes and restores care, as well as articulates the health system to the university, with a view to the transformation of health services and the training processes⁽⁸⁾. In this way, the program articulates the teaching to the service to act in the integral attention of the users, building a relationship between the professionals and the clients in consonance with the principles of integrality of the Unified Health System (SUS)⁽⁸⁾.

At the same time, the social representations in question are constructed with elements related to the importance of PET-Saúde for the rapprochement between undergraduates and health units, since this program allows visualizing the reality and the difficulties of the health system that compromise the service. The experience in the practical fields also has the objective of enabling the undergraduate to review previous impressions regarding the SUS, which allows him to glimpse, in the midst of the difficulties of the system, alternative ways of complying with the principles of the health system⁽¹⁵⁾.

The teaching-research-extension triad, along with participation in scientific events and article productions, emerges in the social representations of the undergraduate as an opportunity for qualification during training and, later, as a professional. It should be emphasized that research activities involving tutors, undergraduates and preceptors contribute to both students and professionals, as they provide subsidies to make them feel more prepared for teaching and extension activities. For practitioners, it means a practice based on ethical and current scientific knowledge⁽¹³⁾.

In the social representations constructed, university extension appears as a way for the application of theoretical knowledge, since it broadens the view on the health-disease process of the community. It is understood that the integration between teaching and service favors collective and individual work by integrating scholars, tutors and preceptors in favor of the quality of attention and professional training and, therefore, the satisfaction of professionals in the services⁽⁸⁾.

Moreover, the scenarios of practice appear in the representational elements as spaces that promote praxis and integration among students, teachers and professionals. Therefore, the extensionist characteristic of the program assures an impact to

society, but also to the university, by making possible the re-definition of its methods of approach to learning, thus raising the technical-scientific quality in vocational training⁽¹⁶⁾.

FINAL CONSIDERATIONS

Based on the results found, the social representations of undergraduate scholarship holders about PET-Saúde present contents about multi-professional work as a possibility, for example, to participate in practical activities with the population and promote education in health and permanent education.

The social representations showed that PET-Saúde favors the integration between university-community-health system, through the articulation between scientific knowledge, common sense and praxis. Moreover, this model emphasizes a restructuring in the training of health professionals, by making the practice more humanized and establishing changes in the health system.

With the study, it was possible to observe that the contact between undergraduates and professionals from different health areas allows an expanded view on the needs of the

population and exchange of knowledge, since it values the concept of interdisciplinarity since graduation. Thus, professionals capable of working in a multi-disciplinary team with a view to the integrality of the individual are formed.

In the built social representation, PET-Saúde, through its activities, encourages the empowerment of the population and the critical-reflexive thinking of undergraduates and professionals on the health-disease process. The contact between preceptors and scholars allows the professional enrichment for both, who develop strategies for the transformation of the health service, in favor of a service with more quality to the population.

Therefore, in the social representation of undergraduate scholarship holders, PET-Saúde is constituted as a SUS valorization program that enables the knowledge of undergraduates in their praxis. Thus, a transformation mechanism for the training of professionals capable of meeting the needs of the population is revealed.

Finally, it is important to highlight the importance of developing further studies that also address the social representation of preceptors and tutors about PET-Saúde in order to triangulate the results and better understand this program.

REFERENCES

- Moretti-Pires RO. Complexidade em Saúde da Família e formação do futuro profissional de saúde. *Interface*[Internet]. 2009 [cited 2015 Nov 21];13(30):153-66. Available from: <http://www.scielo.br/pdf/icse/v13n30/v13n30a13>
- Silva KL, Sena RR, Grillo MJC, Horta NC, Prado PMC. Promoção da saúde como decisão política para a formação do enfermeiro. *Rev Esc Enferm USP* [Internet]. 2007[cited 2015 Nov 21];41(esp):826-9. Available from: <http://www.scielo.br/pdf/reeusp/v41nsp/v41nsp14.pdf>
- Brasil. Ministério da Saúde. PET-Saúde [Internet]. 2010[cited 2015 Nov 21]. Available from: http://bvsm.sau.gov.br/bvsm/saudelegis/gm/2010/pri0421_03_03_2010.html
- Jodelet D. Representações sociais: um domínio em expansão. In: Jodelet D (Org.). *As representações sociais*. Rio de Janeiro: EdUERJ; 2001. p. 17-44.
- Campos PHF. As representações sociais como forma de resistência ao conhecimento científico. In: Oliveira DC, Campos PHF (Org.). *Representações sociais: uma teoria sem fronteiras*. Rio de Janeiro: Museu da República; 2005.
- Sá CP. *Núcleo Central das Representações Sociais*. Petrópolis (RJ): Vozes; 1996.
- Oliveira DC. Análise de Conteúdo Temático-Categorial: uma proposta de sistematização. *Rev Enferm UERJ* [Internet]. 2008[cited 2015 Nov 21];16(4):569-76. Available from: <http://www.facenf.uerj.br/v16n4/v16n4a19.pdf>
- Freitas PH, Colomé JS, Carpes AD, Backers DS, Beck CLC. Repercussões do PET-Saúde na formação dos estudantes da área de saúde. *Esc Anna Nery Rev Enferm* [Internet]. 2013[cited 2015 Nov 21];17(3):496-504. Available from: <http://www.scielo.br/pdf/ean/v17n3/1414-8145-ean-17-03-0496.pdf>
- Pinto ACM, Oliveira IV, Santos ALS, Silva LE, Izidoro GSL, Mendonça RD, et al. Percepção dos alunos de uma universidade pública sobre o Programa de Educação pelo Trabalho para a Saúde. *Ciênc Saúde Colet* [Internet]. 2013[cited 2015 Nov 21];18(8):2201-10. Available from: <http://www.scielosp.org/pdf/csc/v18n8/04.pdf>
- Oliveira ERA, Fiorin BH, Lopes LJ, Gomes MJ, Coelho SO, Morra JS. Interdisciplinariedade, trabalho em equipe e multiprofissionalismo: concepções de acadêmicos de enfermagem. *Rev Bras Pesq Saúde* [Internet]. 2011[cited 2015 Nov 21];13(4):28-34. Available from: <http://periodicos.ufes.br/RBPS/article/view/2996/2370>
- Ferreira MS, Castiel LD. Which empowerment, wich Health Promotion? conceptual convergences and divergences in preventive health practices. *Cad Saúde Pública* [Internet]. 2009 [cited 2015 Nov 21];25(1):68-76. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/19180288>
- Falkenberg MB, Mendes TPL, Moraes EP, Souza EM. Educação em saúde e educação na saúde: conceitos e implicações para a saúde coletiva. *Ciênc Saúde Colet* [Internet]. 2014[cited 2015 Nov 21];19(3):847-52. Available from: <http://www.scielo.br/pdf/csc/v19n3/1413-8123-csc-19-03-00847.pdf>
- Colomé JS, Oliveira DLLC. Educação em saúde: por quem e para quem? a visão de estudantes de graduação em Enfermagem.

- Texto Contexto Enferm [Internet]. 2012[cited 2015 Nov 21];21(1):177-84. Available from: <http://www.scielo.br/pdf/tce/v21n1/a20v21n1.pdf>
14. Silva GM, Seiffert OMLB. Educação continuada em Enfermagem: uma proposta metodológica. Rev Bras Enferm [Internet]. 2009[cited 2015 Nov 21];62(3):362-6. Available from: <http://www.scielo.br/pdf/reben/v62n3/05.pdf>
 15. Biscarde DGS, Santos MP, Silva LB. Formação em saúde, extensão universitária e Sistema Único de Saúde: conexões necessárias entre conhecimento e intervenção na realidade e repercussões no processo formativo. Interface [Internet]. 2014[cited 2015 Nov 21];18(48):177-86. Available from: <http://www.scielo.br/pdf/icse/v18n48/1807-5762-icse-18-48-0177.pdf>
 16. Santos KT, Ferreira L, Batista RJ, Bitencourt CTF, Araújo RP, Carvalho RB. Percepção discente sobre a influência de estágio extramuro na formação acadêmica odontológica. Rev Odontol UNESP [Internet]. 2013[cited 2015 Nov 21];42(6):420-25. Available from: <http://www.scielo.br/pdf/rounesp/v42n6/v42n6a05.pdf>
-