

The research group as a learning scenario in/on Interprofessional Education:

focus on narratives

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This study aimed to analyse the contribution of groups as a space of study, research and development of competencies in/on Interprofessional Education. It has nuances of the case study and was based on the qualitative approach. Fourteen narratives led to the field of experiences and representations, which is the object of understanding, analysis and interpretation of this research. Three categories emerged from the thematic analysis: motivations, which express search, admission, and permanence movements; the group as a shared learning and collaborative practice space, with intersubjective, personal, and institutional dimensions; and the group as a process of permanent consolidation and reconstruction, with challenges in building knowledge, forming groups, and publicizing. The group is characterized as a privileged locus for knowledge sharing and production, as well as for the construction of learning.

Keywords: Interprofessional education. Collaborative practice. Interprofessional relations. Cooperative behavior.

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Introduction

Under the “groups” perspective, collective work derives from gathering different people with common interests in the same physical or virtual space. When led by guiding principles and based on solid scientific knowledge, the opportunity of co-existence - being, learning, and performing together - and of shared learning, of knowing one another and the interactions and intentions of each member of the group, can be transformed in a space of personal and professional development.

Maximino and Liberman¹ highlight that a group is a privileged learning space and that, in this context, learning means “opening up for collective construction and critical reading of the reality – a group creates an interdependence on sharing tasks and starts learning how to plan and collaborate” (p. 44).

Samea² describes a group as a “space that enhances meetings and contacts with the other, questionings and inquiries, elaboration and exchanges, identifications and confrontations” (p. 86). A space with these characteristics becomes an invitation to teamwork and collaborative practice in the interprofessional education perspective.

Interprofessional education³ is determined as “two or more professions that learn with and about each other to improve collaborative practice and care quality” (p. 5)⁴.

Barr et al.⁵ argue that interprofessional education contributes to health professionals’ education, better preparing them to an integrated teamwork where collaboration and acknowledgement of the interdependence among areas prevail, instead of competition and fragmentation.

In this context, interprofessional teams are comprised of two or more professional categories that share knowledge and experiences on planning and executing projects and activities in their work context⁶.

Reeves and contributors⁷ define interprofessional teamwork as an intervention that involves different health and/or social professions that share a team identity and work together in an integrated and interdependent way to solve issues and provide services.

Interprofessional health education and collaborative interprofessional practices are a great challenge for both higher education institutions and educational spaces. In order to be a good health professional, “it is not enough to be professional. In the current global context, the health professional also needs to be interprofessional” (p. 36)⁴.

In this context, research groups are spaces for the construction of knowledge that contributes to the qualification of health teaching under the interprofessionality point of view. Furthermore, they enable reflection upon the role and importance of interprofessional education to establishing collaborative interprofessional practices in permanent health education.

Collaborative practices occur when “[...] health professionals from different areas provide services based on comprehensive healthcare, involving patients and their families, caregivers and communities in the highest quality healthcare in all levels of the services network”⁴ (p. 13).

Interprofessional education is an important step in the collaborative health workforce prepared to practice, so that it can be ready to act and respond to health demands⁴. For Batista⁸: “interprofessional education is presented as the main strategy to educate professionals capable of working in teams, which is an essential practice for comprehensive healthcare (p. 26).

In studies on the development of interprofessional education, Reeves^{7,9} argues that there is a series of essential empirical and theoretical gaps about interprofessional education and collaborative interprofessional practices that need to be filled out in order to further study these two fields.

In spite of acknowledging and indicating advances in interprofessional education and collaborative interprofessional practices, Reeves⁹ declares the need for new research from essential points: interactive processes experienced by students during interprofessional education activities; interprofessional education activities, collaborative practice and patient care learning; interprofessional education activities and collaborative interprofessional practices, analyzing evidence and possibilities.

In this context, it is necessary to understand how the processes of shared learning, teamwork and collaborative practice are generated by a research group that constitutes a space of study, investigation and production of knowledge based on objects related to the interprofessional education theme.

Building and consolidating research groups have been one of the policy guidelines of higher education institutions. Research groups have become an educational space for knowledge building and, throughout the years, they have been transformed into centers of excellence for both higher education institutions and the society. Activities developed in teams are essential and provide an exchange of experiences among those involved¹⁰.

Farias and Antunes¹¹ highlight that research groups: “[...] essentially focus on bringing different people, divergent thoughts, distinct realities, unique life stories together so that these differences result in growth of the individuals as a group” (p. 5).

According to *Conselho Nacional de Desenvolvimento Científico e Tecnológico* (CNPq – National Council for Scientific and Technological Development)¹², the research group involves researchers, students, and technical support staff organized to conduct research lines following a hierarchical rule based on experience, and on the technical and scientific competence of leaders.

The Interprofessional Health Education Research Group is comprised of researchers, coordinators, educators, undergraduate and postgraduate students, and professionals who are familiar with the area, from eight professions related to the Health and Education binomial.

The objective of this article is to analyze the group’s contributions as a space of study, research, and development of competencies for shared learning, teamwork, and collaborative practice.

Methodological approach

The research conducted was based on the qualitative approach, valuing the field of experiences and perceptions of the participants, and the power of different types of knowledge in dialogue.

In this context, it has nuances of the case study, comprising it as a research design that enables to describe and detail a given social reality. According to Gil¹³, the case study is characterized by the study of one or a few objects, allowing researchers to learn about them widely and in detail. The case in focus covers the Interprofessional Health Education Research Group (IHERG) of a federal public university^(*).

Access to the field of experiences and representations of the participants of this investigation was conducted based on narratives: possibility of considering the human experience as a subject of knowledge, analysis, and interpretation. Narrative research aims at giving voice and opportunities to the participants of the investigation, providing learning, growth, and development based on their personal, professional, and educational experiences¹⁴. This is a strategy that enables the individual to become an agent of their education process through retrospective and reflected appropriation of what was truly educational throughout their life¹⁴⁻¹⁶.

The investigation presented here is part of a research project submitted to the CNPq-2017 Universal Notice and approved by the Research Ethics Committee of UNIFESP (Opinion no. 2179358/2017). It was developed through narratives produced on the experience in the Group as a space of study, research, and development of interprofessionality-related competencies. The study was conducted from July to October 2017.

The empirical material was comprised of 14 narratives produced by IHERG members. Eight professions related to the Health and Education binomial

(*) The IHERG and its objectives, dynamics, and constitution will be described in the “Results” section.

integrate the group but only seven were represented by narratives: Physical Education, Nursing, Physiotherapy, Medicine, Psychology, Social Work, and Occupational Therapy.

The methodological procedures involved developing an e-form with the consent document, data characterizing the participants, instructions for producing the narratives, and an area to insert the created text.

IHERG members were invited to create a narrative based on the following instruction: "Considering the IHERG is comprised of members of eight professions connected to the Health and Education binominal and aims at being a space of study, research, and development of interprofessionality-related competencies/skills (shared learning, teamwork, and collaborative practice), you are being invited to create a narrative (maximum of two pages) on your experience in this space, using the specified dimensions as guidance." A database was automatically built.

The published narratives were analyzed by a researcher to verify the text's contributions and clarity. It was possible to provide feedback for the narrator in order to request complementation and/or further details of unclear aspects.

All 14 productions were organized in a set of non-identified narratives that went through the content analysis technique in the thematic modality. This technique enables to understand what lies behind the manifest content, going beyond the appearances of what is being communicated. In the thematic analysis, the theme is the main sense, which can be represented by a word, a sentence, or a summary^{17,18}.

The narratives were read under the perspective of an understanding of totality, aiming at undertaking a potential selection of which materials would be part of the analysis and identification of the first meanings. No narrative was excluded from the scope after this phase. In the analysis, an in-depth reading of the narratives was conducted, enabling categorization, understanding, and interpretation.

Results and discussion

Interprofessional Health Education Research Group (IHERG): description

This group is comprised of researchers, educators, undergraduate and postgraduate students, and professionals who are familiar with the area, willing to encourage, conduct, and disseminate studies and researches on interprofessional health education. Since 2007, the IHERG has been carrying out studies to assess an innovative pedagogical health project under the interprofessional education perspective. The members underwent a transition period, and in 2008 the group was registered in CNPq's Research Group Directory and certified by the original institution. There is a research line called "Health Assessment, Curriculum, Teaching, and Education" that currently has 11 researchers and 9 students in different education levels, and a partnership with 3 higher education institutions.

The group aims to develop studies and researches in interprofessional health education; encourage scientific production and dissemination; develop educational, pedagogical, cultural, technical, scientific, and interaction activities with the academic community and the society; and foster and establish mutual cooperation with national and international centers based on the principles of ethics and social commitment in all activities.

The group is organized around the execution of theme, matrix, group, and individual projects. The activities are developed in an interdependence and complementarity dynamics, aiming at a high-quality production of knowledge in the area of interprofessional health education and collaborative interprofessional practices.

Among the main activities of this group, we highlight: in-depth studies related to interprofessional education, providing knowledge about the main theories; organization and execution of fieldworks; shared learning from knowledge exchanges achieved through presentation of research results; encouragement of responsibility towards individual and collective research projects; interlocution with other groups of interprofessional education researchers and scholars (national and international);

organization of scientific events; and encouragement to creating and strengthening collaborative networks to advance the interprofessional education's perspective.

Narratives and knowledge: the research group according to its members

The study participants come from seven professions related to the Health and Education binomial: four Occupational Therapists, three Nurses, two Physiotherapists, two Psychologists, one Doctor, one Physical Educator, and one Social Worker. With different backgrounds, they have all studied at a university (7 of them are 23-44 years old, and 7 are 50-60 years old) and studied interprofessional education (6 of them have more than 10 years of research experience, and the others have 2-5 years of experience in interprofessional education research).

With these backgrounds, the participants produced narratives that express knowledge, desires, and questionings: the thematic analysis identified 186 context units, with 253 recording units, divided into 3 categories: Search, admission, and permanence motivations; research group: shared learning and collaborative practice space; and research group: permanent processes of consolidation and reconstruction.

The category "Search, admission, and permanence motivations" expresses the movements that led participants to search, join, and remain in the group. Learning more about interprofessional education was the most mentioned reason for joining.

The search was aimed at quenching my personal concerns regarding interprofessional education. Additionally, teamwork and collaborative practices have always been a challenge to me in my routine as a health professional. (S1)

I approached and joined the group because I was interested in studying and learning more about ways of putting interprofessional education into practice. (S6)

The search for the exchange of knowledge and experiences with other researchers was also captured:

[...] I was part of the very first group, which was not formally a research group about interprofessional education yet, with postgraduate students and different researches going on, just like nowadays. (S2)

I have been part of the group since its origins, having participated in different moments of creation, planning, and execution of numerous study activities, project development, event organization, in-depth reflections upon different demands. (S4)

Some members joined the group aiming at developing researches and producing knowledge in the area, while others consider the group as a postgraduate education activity: "I joined the group because my supervisor invited me to participate in a group whose study object is interprofessional education" (S3).

Improving the development of professional activities, either as teachers or workers in the health services network, was one of the indicated motivations.

In my opinion, this learning is based on the path of constitution of the group itself: the challenging identity construction of a research group born "with" Unifesp's Baixada Santista campus. (S14)

In this category, a combination of motivations and desires is captured, seeming to configure the research group as a space that induces collaborative networks in the knowledge production and scientific communication process¹⁹⁻²¹.

In the IHERG, two unique movements were captured based on motivations: permanent education and postgraduate education. When considering education as a social practice²² and as a dialectical process historically built on intersubjectivity²³, the power of this group as a *locus* of exchange, reflection, and transformation of its own practices in the interaction and construction of interprofessional and interdisciplinary relations is outlined^{24,25}.

The category “Research group: shared learning and collaborative practice space” reveals the importance of this group according to its members. This importance refers to three dimensions. The first one, “intersubjective dimension,” includes the possibility of: (1) sharing experiences, (2) exchanging interprofessional education knowledge, (3) collaborating in collective research projects, (4) learning about teamwork when conducting academic activities, and (5) transforming professional practices.

In the beginning, everything was new, which required abandoning a behavior resulting from a disciplinary education to share and learn, together with different professionals, common and specific knowledge, aiming at a true interprofessional teamwork. (S2)

The study group provides a rich possibility of experiencing collective discussions that are relevant to other professions and sharing successful experiences of professionals, teachers, and researchers who accomplish interprofessional practice in their work processes. (S8)

The group provides us with a space for these exchanges and discussions, drawing a parallel between the theoretical and the practical fields. Because of that, we aim at an interprofessional education focused on the reality and possibilities of making the difference. (S9)

[...] in my opinion, the group has been providing an important researcher education and mutual help among them. [...] I would not have accomplished some steps in my research if it were not for the group members' help. (S3)

This finding demonstrates the relevance of these experiences with regard to the academic activity, both in the undergraduate and postgraduate levels, and to professional practice in different scenarios. Maximino and Liberman¹ state that the group space enables its members to: “[...] express themselves, exchange impressions, consider each other's opinion, and be more well-spoken and argumentative, reflecting upon their own attitudes and dialogical relations” (p. 243).

Learning how to work in a team emerged as an effective possibility for the research group's members. In this sense, it implies acknowledging the professional value, the importance of one's own knowledge, and the place of one's field of activity, and also understanding the importance of self-recognition among professionals in a team in order to comprehend their limits and potentials²⁶.

As indicated by Batista and Batista²⁷: “[...] under the interprofessional education's perspective, we learn how to teach by teaching and reflecting upon our experiences, building collective knowledge, strategies and projects” (p. 203).

The second dimension that comprises this category, the “personal dimension,” includes processes to redetermine one's own path – participation and collaboration in order to expand work knowledge and experiences, further studies and a new view of the interprofessional education's theoretical field, and delineation of unique paths that include professional practices, theories, researches, and publications:

[...] participating in the research group enables me to increasingly develop the necessary skills and competencies for collective and collaborative teamwork [...] provides theoretical support and an opportunity to constantly learn and share with the group colleagues different experiences that give us feedback in the academic life. (S2)

Being with professionals who were part of this education model enabled me to better understand what interprofessional education is [...] based on studies and discussions on different texts related to the subject, I developed my own way of interacting with students and preparing classes, and I became delighted by the research world. (S11)

The interaction space with other group colleagues expanded my view on collective work, and the literature was the background that enabled me to further understand everyone's role in collaborative spaces. (S4)

Maximino and Liberman¹ report on the importance of the members' attitude changes resulting from their engagement in implicit and explicit tasks. They also explain that, in the group logic, the demanded tasks are not limited to the activities themselves or to accomplishing a tangible end product but, above all, they are related to learning and personal growth, which are enabled to the members through their collective work (p. 270).

The teaching and learning experiences in the interprofessional education's perspective indicate this type of education favors changes in the professionals' profile and prepare health professionals to become critical, reflective, proactive, and ready to work in a team and in the professional world^{28,29}.

The "institutional dimension" completes the triad that constitutes this category and signals the overlaps between interprofessional education and the field of institutions and policies:

Through the group, I learned about Centre for the Advancement of Interprofessional Education (CAIPE) and deepened my studies on the development of interprofessionality-related competencies. [...] As a CAIPE representative, I have been reflecting upon organization and loyalty to the suggested schedule. (S1)

Today, we are officially part of the *Rede Brasileira de Educação e Trabalho Interprofissional em Saúde* (ReBETIS – Brazilian Network of Interprofessional Health Education and Work). Three members of the group have specific and important organizational activities in the network, and the group itself is well-known in the country. (S3)

Reading the narratives, we were able to underline during the development of the activities that IHERG's participation in organizing interinstitutional events was a relevant breakthrough under the participants' perspective, which resulted in participations in national and international organizations. This participation strengthened the group in the sense of understanding the studies that are being developed in different parts of Brazil and in Europe.

The importance of this breakthrough is evident in internal discussions related to new views on interprofessional education:

Organizing the 3rd Colloquium was the activity that mobilized the group the most in favor of interprofessionality. Although our role is towards the local organization, such as signups, logistics, infrastructure, publicity, among others, I think it was an essential moment for involving everyone in the subject and making us realize IHERG's relationship with the other groups and field researchers, both nationally and internationally. (S3)

The third analytical category, "Research group: permanent processes of consolidation and reconstruction," refers to the movements and arrangements that comprise the group – devices and analyzers are still being internalized by the participants, focused on research planning and development activities:

We still have a lot to learn to unite as a research group and expand our studies on the chosen subject, thus developing researches that help transform education and health in our country. (S6)

Generally speaking, we are a friendly group with great intentions. However, in my opinion, we lack organization of the roles played by each member and definition of long-term assignments. (S1)

For example, we do not conduct a collective, structured, and sequential study of a theme or theoretical framework. Consequently, there are no group productions, only individual productions of its members. (S3)

When in 2017 we understood (during a related conversation among members) the group needed a more efficient organization, we started discussing about and developing rules, and we noticed we had not been taking full advantage of the group's potential. (S6)

It is important to discuss the perceptions that uncover a complaint/desire: to experience and study interprofessionalism in a more permanent way:

I wish the group studied the theories more and that we published our work together. (S1)

In this sense, I feel the group undertakes a more passive attitude towards discussing interprofessionalism, instead of a more collaborative one. (S3)

The research group is renewed as new members join it, but this change of members requires dynamism and a sensible leadership to observe its movements and intentions so that everybody feels that is learning and growing, in sync as to reflections, knowledge, and participations, being able to speak the same language.

[...] I am optimistic that we can improve so that each meeting is productive to the members and to whoever wants to join the group's activities. (S1)

I have been in the group for a short time, but I see it has an important role to foster researches and discussions on interprofessional education, being an example in health education. (S13)

Acknowledging the limitations of one's field of activity, being respectful, and identifying new learning possibilities in one another are essential aspects in and to teamwork, strengthening professional identity in the interdisciplinary environment³⁰:

In this group, comprised of different professionals with at least one common characteristic (their interest in interprofessional education, research, and practice), there is room for sharing experiences and studies, raising hypotheses, and trying to solve them. (S9)

In some moments, it seemed like we would not be able to advance; but then the group gathered strength and managed to overcome the challenges and find other ways of moving on, setting shared actions and goals. (S14)

The participants identified multiple flows related to the production and publication of researches and practice reports. The narratives evidenced the members were concerned with collective production and publication of the experiences and researches conducted. The researches and publications are individually conducted as a result of the members' educational processes and professional activities. However, the group's collective production is low.

I notice this is the group's greatest demand research-wise, and the one that has been developing the most. However, we can still improve regarding organization and visibility of our researches. (S6)

The publication of CNPq's Universal Notice engaged some group members in writing an umbrella project that would enable collective researches. (S3)

In the last 18 months, I realized our focus had changed. There were several publications related to the subject in this period, and we did not take the time to discuss them. (S1)

The group processes mesh uncovers structuring nuances in interprofessional education and challenges for and in learning, experience, and performance – teamwork and collaborative practice require facing operating modes that still call for individualism, competition, and strict hierarchy:

These experiences brought the challenge of understanding the other and working with respect to the differences of each profession. (S2)

Sometimes there seems to be complementary paths among individuals; other times there seems to be a need for standing out and excelling, which hampers relationships and creates discomfort both individually and to the group. (S4)

We have been experiencing power dispute episodes and situations of low collaborative action that make me question if we have been adopting the most adequate way of working as a group aimed at studying and researching interprofessional education but that does not put it into practice within the group itself. (S6)

Agreli et al.³¹ list categories that suggest common characteristics that could provide elements of a structure that could contribute to the team's collaborative work environment both in the conceptual perspective and in operational terms: interaction and communication among the team members; common objectives around which the collective work is organized; responsibility of providing a high-standard work; and promoting innovation in work practices.

Dialectically, the analysis of the narratives enables to infer that, in spite of being challenging, conducting teamwork with such different professionals is possible^{9,31}. In this sense, the IHERG stands out as a unique experience/evidence: interprofessionality is not an end product; it rather uncovers a procedural side that requires devices, group and institutional arrangements, and group and team operating modes based on exchange, respect, and negotiation of knowledge and action, which are essential to the interprofessional education's experience^{9,32}.

In spite of being a rich experience, working with groups does not mean lack of conflicts nor that the methodological approach described here does not have limitations to the established objectives. For Maximino and Liberman¹, "it would be naive to deny them; [...] the truth is there are limitations" (p. 44).

Final considerations

The analysis of the results enabled to identify the research group's potential as a learning space in/ on interprofessional education that contributes to the discussion of a group space as a useful *locus* for study, research, and development of teamwork and collaborative practice competencies. This space, represented in this study by seven different professions in the Health and Education binomial, revealed three categories: "Search, admission, and permanence motivations"; "the group as a shared learning and collaborative practice space," with intersubjective, personal, and institutional dimensions; and "the group as a permanent process of consolidation and reconstruction," with challenges in building knowledge, in the group process, and in publicization.

The reasons that led members to search for, join, and remain in the group were to deepen their studies on interprofessional education, search for knowledge and experience exchange with other researchers, develop researches, and produce knowledge in the area. They also consider the group as

a postgraduate educational activity and an opportunity to improve the development of professional activities either as teachers or as workers in the health services network.

In the category “the group as a shared learning and collaborative practice space,” the following are highlighted: the impact of learning experiences in the group as transformation triggers of professional practices; the opportunity of understanding and deepening the interprofessional education’s theoretical and conceptual framework, sharing knowledge and actions for advances in the study area; the importance of the interdisciplinary and interprofessional characteristic in the confluence of actions, involving different professions in the collective construction towards the consolidation of teamwork and collective practice; and the possibility of expanding knowledge on the other and on teamwork in developing academic activities, collectively designing research projects, building the team’s work environment, and progressively inserting the group in the national and international interprofessional education scenario.

The category “the group as a permanent process of consolidation and reconstruction” refers to the movements and arrangements that comprise the group: devices and analyzers are still being internalized by the participants, focused on research planning and development activities. The perceptions uncover a complaint/desire to experience and study interprofessionality in a more permanent way, and a renovation as new members join in. This transience requires dynamism so that everybody feels that is learning and growing. The participants recognize themselves in the course of creating/expanding/consolidating the group and have expectations towards collective production and publication of the experiences and researches conducted.

The participants report that the difficulties experienced by interprofessional teams in daily health service provision arise in a similar way within the group. Some of them are hierarchy and obstacles in the process of building interpersonal relationships, lack of opportunities to develop competencies for an effective teamwork and collaborative interprofessional practice in healthcare, and internal organization, planning, and implementation of actions.

The aspects identified as difficulties faced in the research group space are similar to those in other collective co-existence spaces. Interprofessional education can be the main strategy to educate professionals, from undergraduate studies to permanent education, preparing them for teamwork and collaborative practice. The possibilities are plenty, and the group can guide actions towards consolidating principles, objectives, operating modes, and the organizational structure itself by self-assessing them.

The analysis of the narratives uncovered the research group metaphor as an incubator: creation of favorable ambiances to the development of collaborative competencies and to critical and reflective thought, involving the members in a permanent movement of action-reflection-action. The research group as an incubator is characterized as a privileged *locus* for sharing, producing, and building knowledge based on interprofessionality as a trigger of collaborative operating modes, horizontal relationships, and network authoring.

Authors' contributions

Rosana Aparecida Salvador Rossit and Sylvia Helena Souza da Silva Batista participated in the creation of the research project; data analysis, interpretation, and discussion; and writing the article. Carlos Francisco dos Santos Junior and Cristiano Gil Regis had an active role in the analysis and discussion of the results. Nara Maria Holanda de Medeiros and Lucilene Martorelli Ortiz Petin Medeiros had an active role in the discussion of data and writing the article. All of them took part in formatting, reviewing, and approving the manuscript's final version.

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