






Diary of the journals: the everyday of sensitive writing in the shared formation in health


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In this experience report, we pointed out the polyphony produced with the writing of field diaries in the health professional education. Based on the fieldwork of professors and students of the Federal University of São Paulo, at campus Baixada Santista (Unifesp-BS), we highlight the importance of a sensitive writing in the lived experiences elaboration process and the possibilities that it assumes in the formation process. The meetings took place weekly during one semester in the module – Axis: Work in Health, which integrates the campus's pedagogical political project in the interdisciplinary experience. Using the cartographic method and a writing from very hands, the experience report mixes theoretical reflections and excerpts from diaries, creating a map of affections about the experience, giving visibility to points of intensity that unfold in reflections for health, arts and, education.

Keywords: Health. Art. Higher education. Interdisciplinary placement. Diaries.

[...] Every now and again I notice my pen beginning to hurry over the paper as if by itself, with my hurrying along after it. 'Tis towards the truth we hurry, my pen and I, the truth which I am constantly expecting to meet deep in a white page, and which I can reach only when my pen strokes have succeeded in burying all the disgust and dissatisfaction and rancor which I am forced here in seclusion to expiate"¹. (p. 83).

Introduction

Our formation scenario is located on a periphery territory in the city of Santos, Sao Paulo, Brazil in which there is a social vulnerability situation that presents different physical, psychic and social problems. We're with the women group on *Arte no Dique Institute* at Northwestern Zone.

Arte no Dique Institute is an organization of civil society, a non-profit organization, that develops a sociocultural work with the population from Vila *Gilda's Dam*, the region has one of the biggest rates of social vulnerability in the city, with a population of twenty-two thousand inhabitants living in precarious conditions, on stilts in the edge of the mangrove over the *Bugre River*.

The whole *Dique* showed itself as resistance, as a masterpiece that is born far from the hands of councilors and mayors, as a movement of solidification of space from the periphery to the periphery. A young man introduces himself and puts a video to play. It shows the surroundings, the stilts. (...) The social role of *Dique* was clear now: a place for people from the territory feel cared for and take care of their peers. People from the territory work at *Dique*, take care of *Dique*. The kids that were recently playing with Jorge probably divide with him the same address, the same ZIP code, the same experience. I was right: a place built by the periphery for the periphery. (excerpt from a field journal)

The Baixada Santista campus sought to meet the demand of courses that attended the region's interests allying the formation of human resources for research, innovation, and extension. The Institute of Health and Society currently has six undergraduate programs: Physiotherapy, Psychology, Physical Education, Nutrition, Occupational Therapy, and Social Service.

In the scope of education, a series of educational reforms at a global level point to the necessity of integration between knowledge and actions of scientific culture and those from artistic, performing and humanistic cultures, creating an open, creative and plural field, collaborating to the construction of the freedom and the autonomy of the subjects^{2,3}. Bringing the body and the art, through presence exercises of the professional to the discussion of the formation in Health is an important subject in the interdisciplinary debate. The body demands multiple points of view, a diverse sense, and knowledge interaction. To construct and reconstruct its materiality by means of techno-scientific interventions, to display it uninterruptedly and take it as a central issue has become a condition of its very existence⁴.

The body goes through the statements and is crossed by them; lives in continuous transformation by the discourses built upon it, a diversity of certainties that seems to change every day, which has the central concern of building an ideal, virtual, modern body and, above all, a healthy body. This has been the focus of the formation in Health search, which brings as ideal a distant and objectified body. But it is also in the body that we can rescue or activate a territory of preservation of the human because even with the pieces uncovered in anatomy classes, the health professional does not always know, experience and express his own body. This proposal understands that the presence (through the body and art), can enhance the writing the self, the other and the group, with sensitivity.

In this process, it is assumed as sensitive writing that one unleashed of the automatism present in the fulfillment of the bureaucratic task inherent in the vices of the formation processes. Sensitive writing is therefore more open and riskier to every student, as it admits a subjective doing of language, so typical of the mentioned above artistic, performing and humanistic cultures, with a degree of affective-intellectual exposure and “intimacy” still little experienced in the university environment.

In the health scope, we understand the clinic as a space for welcoming, dialogue, sharing of emotions, unexpected situations, listening to stories and the subject as a co-participant in his treatment, not denying the illness, but considering the health issues (situations that increase the risk or the vulnerability of people) as embodied in subjects, in people. The clinic purpose now becomes the health production contributing to the expansion of the subject’s autonomy in dealing with their own social network and sociocultural context⁵.

Seen in these terms, the interdisciplinary formation that seeks the interprofessionality justifies itself as a process whereby conditions are created for the different professionals be displaced from their areas and find themselves in a space of sharing, contamination, decomposition, and reconstruction that only happens from the lived experiences. In this space, the experience is the common object for the flourishing of an approach and reflection proposal that strengthens the dialogue guided by the facets of the plurality of each of the areas involved in the situation experienced⁶⁻⁸.

This experience seeks to break with a vision that fragments, hegemonizes, compartmentalizes and segmentalizes health formation, once it puts its efforts in building learning through living, respecting the particularities of each professional in formation. In this perspective, students are invited to an active posture of questioning the lived and the knowledge during the teaching-learning process⁹.

We seek to conceptually incorporate the principles of interprofessional education, as recommended by the World Health Organization (WHO) in its Framework for action on interprofessional education and collaborative practice⁶, in which interprofessional education occurs when students from two or more professions learn about and with the others but also among themselves enabling collaboration and improving health outcomes⁶⁻⁸.

We deal with the composition between the areas of Health, Education, and Art. In the first, the combination of the set of knowledge derived from the most recent and relevant scientific research, and its practical application in clinical medicine or evidence-based practice, has been predominant and is based on scientific methods

of work. The collective processes that involve the areas of Education and especially of Art are not restricted to exactly the same procedures and rigors in which the so-called evidence is sustained, but to countless others. Although there are moments of tangency, devices, and strategies that may be common, the conceptual objectives of the three areas involved are always confronted with the great complexity present in the formation of groups of students and participants, and in the movements of many aspects to the field. It prevails, therefore, the thought of being able to reflect on the different interfaces that areas allow, rather than favoring one or another way of acting and living⁶⁻⁸.

From these suppositions, every semester, professors and students meet weekly with a group of women from the territory in this space to talk creatively about life, to look at photographs, to produce texts, to experience the body in movement and meditating, among other forms possible to broaden the concept of health.

We seek in this interdisciplinary module to approach the students of their artistic power together with the women, understanding the propositions as a facilitator of aesthetic experiences of expression, care, and self-knowledge³. The professors participating in this formation of health professionals seek to integrate elements of subjectivity and human complexity with affection by understanding that the collective, the encounter between bodies¹⁰ produces marks and events in a lifetime¹¹.

In this collective formation experience, the participation of university students and professors together with women has produced in the field of the body, health and art interface a series of conceptual and procedural challenges that seek visibility through reflection, systematization, and immersion in the experiences. The work invests in the heterogeneity of the students' group from different formations, in the production of difference and in the singularity of each story, desires, and needs of each one of the participants who draw up the action plan together¹².

Each semester our work begins by immersing ourselves in the territory with actions with the women, mapping the geographical, economic, political, architectural and affective environments. In addition to getting to know the space and professionals of *Arte no Dique Institute*, the students carry out home visits, read records and journals produced by students who have previously experienced some related experiences, seeking knowledge and approximation with the population of women who are accompanied¹².

Starting the immersion and beginning the approach to the population attended, the group starts planning the actions together, involving students, professors, participants of the group and institute professionals seeking a collective to think about and organize the actions of the semester. At each encounter, a series of experiments are proposed by a pair of students, accompanied by the professors, in corporal and aesthetic practices elaborated from the encounter of the group, of the desires expressed by the women attended, betting on ways of doing, thinking, feeling and acting less mechanized or with little connection with the body and the environment.

These pair of students take turns, planning the encounters and the snack time when a pause is opened to taste the recipes, the experimentation of new flavors, the sharing of food, juices, and cakes that welcome the movement of the group.

In the moments of encounters, the group stands in a circle, working with several possibilities to look, look at the space, look at the people in the group, look at the other,

look at yourself. Listen to the silences, the voices, the songs, the rhythms of the songs chosen on the day of the encounter. The touch by giving hands, the massages and the search for contact also compose the work with the group. Thematic conversations are also triggered, where women talk about themselves, their sufferings and their overcoming experiences.

Thus, with the students, we try to establish, through experience, states of sensitivity to rethink the concept of health, body, corporal practices, work with communities, production of life, among others⁹. States that access the meanings of the group at the encounter, displacing hegemonic ways of thinking about health care.

What we are going to emphasize in this article/journal charted to many hands is the relation of the registry of the encounters in the form of field journals. In the methodological scope of formation, the act of registering is essential for theoretical-practical articulation. All the students involved in the project record events in field journals, containing what we call descriptive notes (objectively organization and systematization about what was done) and intensive notes (subjective affections and memories caused by events) and this material is read and commented by professors and participants¹²⁻¹⁴.

For the experience report registered here, field journals of three students of the 5th semester were selected; being two undergraduates in Psychology and one in Occupational Therapy, during the year 2017. The interprofessionality emerged - besides work in pairs of different courses - in field journals from reflections about acting and activities proposed by considering the present knowledge and understanding of events from the sharing between students and professors of their writings and impressions, which broadened perspectives and built a space for the exchange of knowledge and information.

In the course of formation in field in the Work in Health module, the production of sensitive writing aims to collectivize the production of encounters of a service-device (*Arte no Dique Institute*) that instigates and shows that it is possible to produce transformations in the process of formation for those who travel this route. Talk about experiences, sharing, giving visibility to the lived.

This interdisciplinary experience, which seeks an interprofessional formation⁶, is aligned with the guiding principles of the political-pedagogical projects of Baixada Santista Campus, which consists of the interlocution between different areas of health, professional practice as the basis of the teaching-learning process, the constant questioning of education based on experience and research and the student's active position towards the construction of knowledge¹⁴.

Aim

We aim at this experience report to amplify the polyphony produced with the writing of field journals in the formation of the health professional from the experience of some students who weave this article together with the professors highlighting the importance of a sensitive writing in the field journals to elaborate their lived experiences and the possibilities that this assumes in the formative process of these future health professionals.

Methods

To reach our goal we used the cartographic method for reading and choosing excerpts from the journals produced by the students during our pedagogical interventions and body experimentations in health with the women's group at *Arte no Dique Institute*.

With a written to very hands, the article combines theoretical reflections, reports, and excerpts from the journals of the students and professors participating in the project to create a map of affections about the lived experience, creating points of intensities that unfold in reflections for the health, arts and education areas.

In academic research, cartography is admitted as a way of monitoring processes: "therefore, cartography approaches ethnographic research and makes use of participant observation. The researcher remains in the field in direct contact with people and their existential territory"¹⁵ (p. 56).

All journals were produced from the methodological orientation proposed on the campus of the Federal University of São Paulo - UNIFESP-BS in the Work in Health Axis (WH Axis), which it should be done after each activity and encounter with the group, as soon as possible, seeking a narrative about the experience that translates the context and experience into texts formats delivered to supervisors¹¹. In our case we created a closed group in a social network in order to all the members of the group have access to the diaries, allowing for conjoined comments and reflections.

As mentioned, students are offered a pedagogical division of the journals into descriptive and intensive notes. The descriptive notes should describe the characteristics of the place, the people and the proposed activities. The intensive ones must reach sensations, feelings, difficulties and thoughts provoked by each encounter, in which one perceives the other and oneself in the experience and, that way, bring quotations of text that can collaborate in the lived experiences¹³.

The field journals include texts, poems, encounters, daily scenes, photographs, songs, images of the affections in circulation, authors in formation in the complex task of thinking with the experiences, giving space so that they can express themselves. The challenge of constructing sensitive writing brings to the analysis the implications in course, the feelings, perceptions, sensations, actions, events, their effects and what is put into operation, what is acquired in what is lived.

Here is our diary of the journals with the intensive notes of the students to illustrate how this has happened in the day by day of the formative process of this group.

Results

In the first semester of 2017, the work carried out in the group of women of the *Arte no Dique Institute* allowed care, transformation, and learning. These three words are read horizontally since the encounters were not based exclusively on knowledge, but on contact, in close relationship: we cared for and were cared for, transformed and were transformed, learned and taught.

In order to understand the dimensions of the group proposal, we seek to articulate through supervision and readings theory, the practice and its crossings. In *Arte no*

Dique Institute, we work with the purpose of taking the focus of the diagnosis, allowing the vision of the person as a whole being and not as a carrier of an illness.

We talked in circles. We spoke name, age, course, star sign. Other ladies appeared: Dona Carmen, restrained, speaks low, looking down - what's inside that look? Dona Nina, the eldest of them, speaks strong and steadfast, demanded presence and care - What ties are missed for her in order that the need of contact is so emerging? Dona Antônia, energetic, vivacious, sagacious, dribbling diabetes with her mood and her expansive way. (excerpt from a field journal)

The relationship with the human, in general, crosses and unleashes feelings, experiences, fears, anxieties, insecurities, and happiness that are part of the formation process. In this work, they were externalized through field journals that allowed us, by exposing our anguishes and joys, to form a network of sharing that affected all who participated in the common encounters.

One of the main effects of sensitive writing is the possibility of elaborating what has been experienced: by expressing what is thought, reflected and felt it is possible to understand from another perspective the implications of experience.

I confess that I could not immediately understand the strength of that encounter, nor its power, but as we returned and could smash this moment and realize that that anxiety had to do with the enjoyment we were looking for in the group, the orgasm of achievement, of completeness, the anxiety to provoke in the other what we wanted to be provoked in us, but before that enjoyment, we must come, be, know, establish ties and bonds. (excerpt from a field journal)

The writing process is an action that starts from an individual consideration to the collective, when it takes the form of a field journal, and then returns to the individual by provoking in the author, as a reader, reflections that provide an extended perspective of the learning experience just as the experience he described had been able to cause on him. The field journal is one of the resources presented in the methodology used in the modules of the Work in Health Axis.

The use of field journal use in health formation has the power not only to compose notes on interviews and observations in order to support the reflections that the described experience produced, as quoted by Weber¹⁶ but also to promote a comprehensive understanding of care.

There were many stories of everyone present, after all, and there we were gathered in the same space causing such aesthetic experience in each other. The aesthetic experience, a concept that among all the aspects would be explained and always recorded to the fact that it is an experience. That simple. A felt experience, and felt because at that moment you feel it is the instant that you are aware of what is happening around you and how it is capable of affecting you. (excerpt from a field journal)

The weekly production of field journals in work in health allowed the identification of process demands, the need for matriciation and dialogues with health equipment - such as Basic Health Units and Psychosocial Care Centers - and offered the power to exchange experiences, points of view and perspectives of the situations experienced and elaborated through the sharing of individual elaborations.

In addition to subjective relieving and sharing, supervisions carried out through the reading of journals by professors allowed essential progress in formation: when we discussed not only the objective but also the intangible, we promote the development of issues that could not possibly arise without the use of writing space. By dividing our extensive experience, we identify the issues that cause us anguish and make it impossible to expand our activities and, based on this identification, we work the difficulties as a group in order to provide objective health care.

I asked Dona Eunice what she liked best. She replied that she liked nothing, and then asked me how to change life. I stopped for a few seconds. I saw myself in Eunice - I didn't know the answer either. I said we could change lives by looking for new skills, and I quoted our little daily achievements in the group, such as the ability to do something together. She listened, cringed, and began to cry. I asked if I could touch her, and she said yes. I caressed her back and hugged her and said that I hope the group would do her good. Time is over - but I hope it has restarted. (excerpt from a field journal)

From the reading and re-reading of the journals, the handling of the professors followed the above-mentioned care, allowing the creation of a space that implied in the care of us, students, to those who are the target of the intervention of the proposal of work in health in question. We were awakened of the importance of sensitive listening and presence in the moment of being with the other.

It overflowed the Dique River, the river that hosted women, children, adults, the elderly, and boys and girls, and men and women, and students and teachers and people. People. The Dique River that was born of the meeting of so many springs. (...) Here was the presence that we speak so much, that we read so much, that we try so hard to understand. There it was. The real 'to be'. (excerpt from a field diary)

In the same way, care was offered in the welcoming offered by them, professors, to us students during unusual situations described in our texts that we would not know how to handle without proper support. This care enabled and sustained by the writing of journals instigates transformations in areas of acquisition of theoretical knowledge but also coexists with the development of knowledge aimed at the practice of health professionals that is born from the experience lived and described by it.

In the proposal inserted by the module Work in Health, students produce field journals that help professors and colleagues to better understand the process they are going through, the issues that emerge in that formative moment, and the seed of the professional who is ready to deal with affect begins to germinate and shows fruitful by the words, inquiries, indignations, resistances, lamentations, insights and catharsis that comes with writing.

The path between the lived experience, the writing of the diary, the reading of the diary by more than one professor, the comments made by professors and colleagues, the re-reading of the journal by the author with another perspective and the return to the field on the following week was always essential. From there, we analyze the lived experience and try to understand how it was uplifting of the formation of the health professionals of psychology, occupational therapy and physical education who were willing to participate in the writing of this article.

In sum, the group of women we accompany carries within itself a strength and potential that cannot be described in two pages: we must live. By listening to each other, by placing their bodies in different activities of daily life, by understanding their own silences, tears and smiles, each of these women promote well-being and health. And we, students, as we participate in these movements of attention, care and work, we form not only professionals with broad and improved visions - but human beings able to see in the other the beauty of being. (excerpt from a field journal)

It is important to point out that this whole teaching-learning process in which the journals are inserted walks in the opposite direction to other obsolete methods, which are based on hierarchical structures and on the inequality of the participants' intelligence: participants, students, and professors. Here, therefore, is the criticism of formative logics which, through the pretentious idea of delaying and multiplying infinite explanations, continually distances the knowledge to be achieved, the eternal monopoly of that professor or master "with more experience" and/or academic title.

In the work in health in question, the encounter does not admit to being split between those who know and the others, who are ignorant. The French philosopher Jacques Ranciere¹⁷ draws attention to the brutish teaching-learning processes in the early nineteenth century.

[...] the logic of the explicative system had to be overturned. Explication is not necessary to remedy an incapacity to understand. On the contrary, that very incapacity provides the structuring fiction of the explicative conception of the world. [...] To explain something to someone is first of all to show him he cannot understand it by himself. Before being the act of the pedagogue, explication is the myth of pedagogy, the parable of a world divided into knowing minds and ignorant ones, ripe minds and immature ones, the capable and the incapable, the intelligent and the stupid¹⁷. (p. 23-4)

According to the emphasized inversion, the experience lived collectively is always the forerunner of all possible reflection. The writing opportunity of the journals reaffirms the viability of monitoring the functioning of the intelligence of each one who writes, on equal terms, in each own unique capacity of thought and perception of reality.

During health formation, reference is made to one of the main movements that the professional - and human - must carry out: listening. The movement of listening and understanding welcomes the possibility that forms links and health monitoring

becomes an activity of promotion, prevention and care. The care described here needs a singular interpretation: close care, affectionate, freed from charities and composed of otherness. A caring that transforms: space, people, relationships, life and health.

A small, humble little house in an alley in the Northwest Zone. Dona Nina was lying down, her eyes flashed when she saw us, I hugged her and said that if she doesn't go to Dique, the Dique goes to her. We took a picture with her and left a little June celebration hat as a small gift of our visit. Her last words to the group were: "You give me great health, my daughters." (excerpt from a field journal)

According to Bondia³, information is not an experience and leaves no room for experience, almost an anti-experience. By focusing on experiencing the group work with women, without being trapped in their medical records, we were able to have access to day-by-day, deep and unique information that we would not have if we did not praise the essential in health work: the human.

Conclusions

The meaning constructed from the weekly production proposal of these field journals in health formation revolves around the contact provoked by the lived experience and relearn it with the same. From the preparation of the journals, the student revisits his experience, recalling the dialogues, situations, and feelings provided by it. This allows us, as students, to regain the opportunity for learning. Briefly, it is like learning again. The contact with the experience causes us a desire for searching academic materials and conversations with the professors that lead us to better understand what has transposed us during the process of activity in the field.

Starting a field journal is repetition. Repetition. Re-pe-ti-tion. Feminine noun. 1. The act or effect of repeating(itself); iteration, recurrence, repetition, repeteco, reoccurrence. 2. Enunciation of the same words or ideas that have already been stated above. Writing, even though it is repetitive, is always a new process. And write about a new process, though another WH (however a new WH always means difference.) (excerpt from a field journal)

Thinking about health formation, the elaboration of field journals produces sensitivity in relation to the other. Sensitivity, a feminine noun, whose meaning is attributed to the quality of being sensitive, able to react immediately to contact with the other, capture what exists in the world and express it creatively, ability to detect what is not said.

This sensitive action is responsible for making the learner capable of actually seeing and hearing whom it is approaching. For the construction of this written work the act of being present is indispensable. It is from what you see and hear that the writing of diaries is based, as well as how certain situations make us feel and how best to elaborate the experiences to coexist with the other in a space where there is care of both parts.

The interference that writing produces in the unwritten world, in the lived world is related to the fact that from it we educate ourselves to write about the

other and about ourselves, becoming more perceptible to what the other says and does, also to the unspoken language and expression of the one with whom we share the experience. Health needs are not necessarily exposed by the other in spoken language, and the identification of this is of great importance to the health professional. Diversification and expansion of communication and languages.

The writing of the field journals produces this sensitivity in us, students, since the first year in the modules of the Work in Health Axis, which prepares us for listening and sensitive point of view in all situations.

The experience reported distances itself from the rule and unanimity among all participating students. Nor has emerged as an exception or chance throw the pedagogical everyday health formation - although keep a certain degree of relation with the life narratives¹⁸, the writing field journals articulates most directly with the process of education in health, then with the professional practice of humanized treatment, with origins in narrative medicine¹⁸.

Both field diaries and life narratives are approached by methods: state of presence, attentive listening, intensive writing, and thus the affirmation of a counterpoint to evidence-based medicine. They distance themselves from the practices of narrative medicine because of their purposes: journals work more with the idea of verisimilitude in relation to the experiences lived by students, admitting that the stories told will always be re-creations, while reliability in relation to the patient's reality is sought by the doctor who listens to his narration with a view to more precise regulation of the best treatment to be performed.

Leaning to write about a past experience, for many people in the formative stage, constitutes no more than the fulfillment of a bureaucratic task, carried out for the teacher, reproducing thoughtlessly an already obsolete model of organization of the teaching-learning process, hierarchical and "explaining", but frequent. At the same time, the act of writing continues to gain new and fast layers of meaning and understanding but certainly losing so many others. To write in field journals some contour of the own thought is a complex undertaking, with which numerous resistances and differences need to be confronted.

We call sensitive writing the one that accepted with some risk and courage the sharing of the fears and achievements common to those involved in the process continuum. Making it more horizontal, dialogued and artisanal, will always be the purpose of the emancipating formation in health, for reasons of coherence. In this case of an interprofessional formation in health, we risk affirming that the method is not different from the content: if it is necessary sensibility from the earliest stages of listening, in its eloquent situations, any other dimension of the work, be the registration, the expression or the health care production will require the same. No restrictions.

Marco Polo describes a bridge, stone by stone.

"But which is the stone that supports the bridge?"- Kublai Khan asks.

"The bridge is not supported by one stone or another,"

Marco answers, "but by the line of the arch that they form."

Kublai Khan remains silent, reflecting. Then he adds:




“Why do you speak to me of the stones? It is only the arch that matters to me.”


Polo answers: “Without stones there is no arch”¹⁹. (p. 79)

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Author's contributions

All authors participated actively in all stages of preparation of the manuscript.

Acknowledgements

We thank all those who participated and participate in the *Arte no Dique Institute* interventions and UNIFESP - Baixada Santista for supporting the activities.

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References

1. Calvino I. O cavaleiro inexistente. 14a ed. São Paulo: Companhia das Letras; 2005.
2. Freire P. Ética, utopia e educação. 10a ed. Rio de Janeiro: Vozes; 2014.
3. Bondía JL. Notas sobre a experiência e o saber de experiência. *Rev Bras Educ.* 2002; 1(19):20-8.
4. Sant'Anna DB. *Corpos de passagem: ensaios sobre a subjetividade contemporânea.* São Paulo: Estação Liberdade; 2001.
5. Campos GWS, Amaral MA. A clínica ampliada e compartilhada, a gestão democrática e redes de atenção como referenciais teórico-operacionais para a reforma do hospital. *Cienc Saude Colet.* 2007; 12(4):849-59.
6. Organização Mundial da Saúde. *Marco para ação em educação interprofissional e prática colaborativa.* Genebra: OMS; 2010.
7. Reeves S, Fletcher S, Barr H, Birch I, Boet S, Davies N, et al. A BEME systematic review of the effects of interprofessional education: BEME Guide No. 39. *Med Teacher.* 2016; 38(7):656-68.
8. Barr H. *Interprofessional education: the genesis of a global movement.* London: Centre for Advancement of Interprofessional Education; 2015.
9. Barin de Azevedo A, Pezzato LM, Mendes R. Formação interdisciplinar em saúde e práticas coletivas. *Saude Debate.* 2017; 41(113):647-57.
10. Liberman F. *Delicadas coreografias: instantâneos de uma terapia ocupacional.* São Paulo: Summus Editorial; 2008.
11. Rolnik S. Pensamento, corpo e devir: uma perspectiva ético/estético/política no trabalho acadêmico. *Cad Subj.* 1993; 1(2):241-51.
12. Liberman F, Lima EMFA. Um corpo de cartógrafo. *Interface (Botucatu).* 2015; 19(52):193-4.
13. Maximino V, Liberman F. Cartografias femininas: a constituição de um grupo de mulheres na zona noroeste de Santos. *Cad Ter Ocup.* 2010; 18:156-68.
14. Capozzolo AA, Casetto SJ, Oliveira Henz A. *Clínica comum: itinerários de uma formação em saúde.* São Paulo: Hucitec; 2013.
15. Alvarez J, Passos E. Cartografar é habitar um território existencial. In: Passos E, Kastrup V, Escóssia L. *Pistas do método da cartografia: pesquisa-intervenção e produção de subjetividade.* Porto Alegre: Sulina; 2009. p. 131-49.
16. Weber F. A entrevista, a pesquisa e o íntimo, ou por que censurar seu diário de campo? *Horiz Antropol.* 2009; 15(32):157-70.
17. Rancière J. *O mestre ignorante: cinco lições sobre a emancipação intelectual.* Belo Horizonte: Autêntica Editora; 2002.
18. Charon R. Testemunhando narrativas. *Oralidades.* 2010; 4(7):205-41.
19. Calvino I. *As cidades invisíveis.* São Paulo: Companhia das Letras; 1990.



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Submitted on 11/7/18.
Approved on 11/18/18.