

EXPERIENCE REPORT

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HEALTH EDUCATION TO PREVENT BREAST AND CERVIX CANCERS IN RURAL WOMEN

EDUCAÇÃO EM SAÚDE PARA PREVENIR CÂNCERES DE MAMA E COLO UTERINO NA MULHER RURAL

EDUCACIÓN EN SALUD PARA PREVENIR CÁNCERES DE MAMA Y CUELLO UTERINO EN MUJERES RURALES

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ABSTRACT

Objective: To report the experience of carrying out health education for rural women on breast and cervical cancer. **Method:** Descriptive study, of the experience report type, carried out in October 2019, with 64 women living in a rural location in the interior of Ceará. Health education lasted 90 minutes, where the prevention of breast and cervical cancer was discussed. **Results:** Initially there was an explanation about the anatomy and physiology of the female body, followed by the main theme. It was noticed the existence of many doubts, which were resolved by the academics and professionals present. The topic of Sexually Transmitted Infections was also addressed, with rapid tests. **Conclusion:** The action provided the opportunity for academics to present scientific knowledge in an accessible way, being an effective strategy to get closer to the community in which they are inserted, favoring the teaching-learning process of the population.

Descriptors: Health Education; Women's Health; Breast Neoplasms; Uterine Cervical Neoplasms; Self Care.

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RESUMO

Objetivo: Relatar a experiência da realização de uma educação em saúde para as mulheres rurais sobre os cânceres de mama e colo uterino. Método: Estudo descritivo, do tipo relato de experiência, realizado em outubro de 2019, com 64 mulheres residentes de uma localidade rural do interior do Ceará. A educação em saúde teve duração de 90 minutos, onde foi discutido sobre a prevenção do câncer de mama e colo uterino. Resultados: Inicialmente ocorreu uma explanação sobre a anatomia e fisiologia do corpo feminino, seguida do tema principal. Foi percebida a existência de muitas dúvidas, as quais foram sanadas pelas acadêmicas e profissionais presentes. O tema Infecções Sexualmente Transmissíveis também foi abordado, com a realização de testes rápidos. Conclusão: A ação oportunizou às acadêmicas apresentar conhecimento científico de forma acessível, sendo uma estratégia efetiva de aproximar-se da comunidade em que estão inseridos, favorecendo o processo de ensino-aprendizagem da população.

Descritores: Educação em Saúde; Saúde da Mulher; Neoplasias da Mama; Neoplasias do Colo do Útero; Autocuidado.

RESUMEN

Objetivo: Relatar la experiencia de realizar educación en salud a mujeres rurales sobre cáncer de mama y cérvix. Método: Estudio descriptivo, del tipo relato de experiencia, realizado en octubre de 2019, con 64 mujeres residentes en una localidad rural del interior de Ceará. La educación en salud tuvo una duración de 90 minutos, donde se habló sobre la prevención del cáncer de mama y de cuello uterino. Resultados: Inicialmente hubo una explicación sobre la anatomía y fisiología del cuerpo femenino, seguida del tema principal. Se notó la existencia de muchas dudas, las cuales fueron resueltas por los académicos y profesionales presentes. También se abordó el tema de Infecciones de Transmisión Sexual, con pruebas rápidas. Conclusión: La acción brindó la oportunidad a los académicos de presentar el conocimiento científico de forma accesible, siendo una estrategia eficaz para acercarse a la comunidad en la que están insertos, favoreciendo el proceso de enseñanza-aprendizaje de la población.

Descriptores: Educación en Salud; Salud de la Mujer; Neoplasias de la Mama; Neoplasias del Cuello Uterino; Autocuidado.

INTRODUCTION

Breast Cancer (BC) is what most affects in developed women underdeveloped countries. also representing the leading cause of female death worldwide. This problem is mainly due to limited access to treatments, due to the unequal income distribution or scarcity of care in public services.² At the same time, with regard to Cervical Cancer (CC), also prevalent in this population, the Cytopathological Examination of the

Uterine Cervix (ECCU) is the main strategy to detect precursor lesions and perform an early diagnosis of the disease. However, CC is still the third most frequent type of cancer and the fourth cause of death among Brazilian women.³

This problem can expand in contexts of social vulnerability, as in the case of women residing in rural areas. These women face greater difficulty in accessing health services, which are sometimes depersonalized and fragmented,

accentuating social inequalities and reducing health gains. health promotion and protection, disease prevention, diagnosis, treatment, rehabilitation and health maintenance in the collective and individual dimensions, to provide better assistance to users who live in unfavorable situations.⁴

Educational actions in health are characterized as a process of popular empowerment, the performance of such actions must consider the socio-political context. It is fundamentally important that popular education actions are developed to make the practice of self-care cultural, since this strategy has the potential to help in the dynamics of the prevention of diseases and injuries, in addition to reducing health costs and promoting improvements in the quality of life of people.5-6 The educational women. activities are based on strategies that allow behavioral changes, exercising care based on a critical and transformative education in order to favor individual and collective well-being.6

Thus, this report aims to provide information about the development of effective and viable actions regarding the promotion of rural women's health, generating the possibility of empowering women, making them capable of detecting early signs and symptoms characteristic of illnesses, of in order to reduce rates of

injuries and deaths caused by these problems. In this context, the present study aims to report the experience of carrying out a health education for rural women about breast and uterine cervix cancers.

METHODS

This is a descriptive study, of the experience report type, about the realization of a health education action for rural women about breast and uterine cervix cancers carried out in October 2019.

Participants were 64 women, aged between 25 and 70 years, residents of the rural area of the municipality of Acarape, Ceará. It was carried out by nursing students from a Federal University, in partnership with health professionals, invited the Municipal Health by Department to contribute to the scientific contribution to the event in reference to Pink October, carried out by the Rural Women's Health Program of the National Rural Learning Service, which served the population on an itinerant basis.

Slides containing textual information, images and videos were used for a better visualization of what was being discussed; distribution of pamphlets, booklets and exhibition of posters. There was the application of games about ECCU and Clinical Breast Examination (ECM), in addition to the use of a model of sponge breasts that allowed the identification of

changes caused by CM. These interactive strategies were aimed at reinforcing the learning provided in the lecture cycle.

The academics adopted an accessible language during health education to favor the efficient sharing of information and, thus, clarify the main doubts of the public and demystify the theme, providing an interactive and educational moment based on dialogue.

The study was carried out following the ethical recommendations of the National Health Council set out in Resolution No. 466 of December 12, 2012, regarding the maintenance of rights, human dignity and the protection of participants.

RESULTS AND DISCUSSION

The event was organized in stations and the participants circulated between them to benefit from the activities offered by the organizers. The lecture belonged to a stage of this circuit, corresponding to the theoretical-scientific part of the event and functioning as a health promotion strategy for the participants. The theoreticalscientific action lasted an average of 90 minutes. The other services provided were rapid tests for the detection of Sexually Transmitted Infections (STIs) gynecological consultation with nurses to perform the ECM and ECCU.

In the content of health education, the anatomy and physiology of the female reproductive and urinary system were addressed, through images and educational videos, aimed at promoting knowledge about the woman's body. The essence of this approach derives from the importance of guiding self-knowledge. Active participation in educational activities that encourage autonomy leads to changes in lifestyle. Knowing your body, health procedures assessment and therapies contribute to better adherence prevention campaigns, as well as conclude the findings of a 2019 study that analyzed the scientific literature on the subject.⁶

The introductory approach to the female body allowed a better involvement of the participants in the next stage of the lecture, when the pathophysiology, signs and symptoms and epidemiology of breast and cervical cancers were discussed, since the basic knowledge of the structures to be addressed allowed better interaction. This be essential for health proves to professionals to seek to increase the autonomy and empowerment of women regarding their bodies.

The STI theme was also addressed, considering the influence that adopted sexual behavior and the absence or inappropriate use of condoms have on women's health, as highlighted by the authors of a study on STI and CC

prevention carried out in Bahia in 2018.⁷ During the discussion It was evidenced by comments and questions asked by women a lack of knowledge about the use of condoms and, even with the desire to use, they are unable to negotiate with the partner. With this, it is observed that it is also necessary that health education actions focused on sexuality are developed more frequently with this public.

The importance, indication and necessary care for performing the ECCU were also discussed. This moment was carried out with the aim of encouraging women to undergo the examination, thus increasing adherence to CC screening, in addition to instructing them to avoid situations that may make the procedure unfeasible or alter the results of the examination. Finally, a game of questions and answers was applied in order to fix the content and signal the knowledge obtained, given that the use of technologies favors the best use of health education, as suggested by the findings of a study on education in health and self-care.6

Then, there was a discussion about the BBE, performed by a nurse or a doctor, and a demonstration of how to perform a Breast Self-Examination (BSE). For training on BSE, a model of sponge breasts made to simulate tactile and visual changes was used, in which it was possible to show the warning signs for women to seek a

health service. At that moment, the academics were able to make women aware of the importance of performing the BSE and ECM periodically for the early detection of changes, in addition to exposing the possibility of self-knowledge and empowerment from the BSE.^{1,8}

The adopted strategy stems from the knowledge that the early detection of CC and BC is essential for a good prognosis and comprises the main secondary prevention strategy. Despite the growing trend in carrying out tests in the target population, coverage is still low for poor women with low education. 9 Given this, it is essential that social determinants are identified and understood and that students and health professionals area of health to develop strategies that aim to reduce this disparity, seeking a more homogeneous access to health.

The moment allowed the academics to know the difficulties encountered when working with a public with limited access to the health service. In addition, information was exposed using appropriate and didactic language, which enabled a relevant and interesting debate, offering fundamentals that could make participants capable of identifying possibly pathological alterations.

At the end of the theoreticalpractical action, the academics were available to guide and clarify doubts from

women who preferred to deal with the subject in a private way. Questions were raised about vaginal discharge, use of contraceptives and the need or not to carry out the preventive examination in women undergoing radical hysterectomy. In addition clarifying doubts, availability of listening also contributed to strengthening the bond between women and health professionals. The importance of this bond stems from the promotion of welcoming, which for the authors of a study on the vulnerability of rural women, this is a fundamental part, as it encourages the use of health services.4

These strategies favor the modification of the current scenario of rural women's health, since inadequate knowledge, financial and residence time conditions. waiting and incompatibility of the opening hours of the service with work or domestic activities, are just some of the difficulties faced by rural women that culminate in the inadequate use of health services, which puts women in a position of social vulnerability. 10

Furthermore, the event enabled the academics to experience the organization of wide-ranging health promotion actions in partnership with the health services of the municipality; knowing the process of choosing resources, implementing actions, and subsequent evaluation of their

effectiveness. In addition to providing a new look at a public health problem, enabling the development of new strategies and improvement of health education approaches.

CONCLUSION

It is concluded that the activity carried out gave the academics the opportunity to participate in a large-scale itinerant event, in which it was possible to bring scientific knowledge in a didactic and accessible way to an audience that may have deficits in accessing information. It also enabled the exchange of experiences and knowledge between students, professionals and professors, the community by bringing the academics closer to the reality of the municipality in which they are inserted.

Τt is noteworthy that the participation of academics in the activity favored the development of skills and technical and social competence related to providing services vulnerable to populations, as well as allowing the identification of the role of nurses in the process of promoting health education for the population, in addition to actively contribute with actions that favor the strengthening of the bond between professional and user.

The limitations of the study are related to the little time for the debate on

the theme, which influenced the development of the action, since there is a need for a structured and lasting dialogue, with a view to contributing to the knowledge of women about breast cancer and cervix.

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