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Experience report

Educational activities about COVID-19 prevention with adolescents: experience report

Ações educativas com adolescentes sobre a prevenção da COVID-19: relato de experiência

Acciones educativas sobre prevención de la COVID-19 con adolescentes: relato de experiencia

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Abstract

Aim: to describe the academic experience on developing educational actions about COVID-19 prevention with adolescents. **Method:** experience report about health education practices developed with 334 adolescents, divided in 15 groups, who study in the public education system in Valparaíso de Goiás. Actions were developed, in March 2020, using the theoretical framework of culture circles, mediated by nursing and physiotherapy students. **Results:** educational actions were developed through Freire's culture circles and the problematization, to assist adolescents to transit from naive conscience to critical conscience, about COVID-19 prevention and care. **Conclusion:** educational actions, with a Freirean culture circle, are essential to strengthen the exchange and construction of knowledge mediated by scientific knowledge that can demystify taboos, alleviate doubts, and generate possibilities for health promotion and care. **Descritores:** Educação em Saúde; Saúde do Adolescente; COVID-19; Serviços de Saúde Escolar; Autocuidado

Descriptors: Health Education; Adolescent Health; COVID-19; School Health Services; Self Care

Resumo

Objetivo: descrever a experiência acadêmica na realização de ações educativas, com adolescentes sobre a prevenção da COVID-19. **Método:** relato de experiência sobre as práticas de educação em saúde realizadas com 334 adolescentes, divididos em 15 turmas, estudantes da rede municipal de ensino no município de Valparaíso de Goiás. As atividades foram desenvolvidas, em março de 2020, utilizando o referencial metodológico do círculo de cultura, mediadas por estudantes de enfermagem e fisioterapia. **Resultados:** as ações educativas tiveram como referencial os círculos de cultura de Paulo Freire e a problematização, a fim de que os adolescentes pudessem transitar da consciência ingênua para a consciência crítica, sobre prevenção e cuidado a respeito da COVID-19. **Conclusão:** ações educativas, com círculo de cultura freireano, são essenciais para fortalecer a troca e construção de



saberes mediados pelos conhecimentos científicos que podem desmistificar tabus, amenizar as dúvidas e gerar possibilidades para a promoção da saúde e cuidado.

Descritores: Educação em Saúde; Saúde do Adolescente; COVID-19; Serviços de Saúde Escolar; Autocuidado

Resumen

Objetivo: describir la experiencia académica en el desarrollo de acciones educativas sobre la prevención de la COVID-19 con adolescentes. **Método**: relato de experiencia sobre prácticas de educación en salud desarrollada con 334 adolescentes, divididos en 15 grupos, que estudian en el sistema de educación pública de Valparaíso de Goiás. Las acciones fueron desarrolladas, en marzo de 2020, utilizando el referencial teórico de los círculos de cultura, mediados por estudiantes de enfermería y fisioterapia. **Resultados:** se desarrollaron acciones educativas a través de los círculos de cultura de Freire y la problematización, para ayudar a los adolescentes a transitar de la conciencia ingenua a la conciencia crítica, sobre la prevención y atención de la COVID-19. Conclusión: las acciones educativas, con círculo de cultura freireana, son fundamentales para fortalecer el intercambio y la construcción de saberes mediados por saberes científicos que puedan desmitificar tabúes, disipar dudas y generar posibilidades de promoción y cuidado de la salud. Descritores: Educação em Saúde; Saúde do Adolescente; COVID-19; Servicios de Salud Escolar; Autocuidado

Descriptores: Educación en Salud; Salud del Adolescente; COVID-19; Servicios de Salud Escolar; Autocuidado

Introduction

On March 11th 2020, World Healh Organization (WHO) announced the world faced COVID-19 pandemic, caused by the SARS-Cov-2 virus.¹ Until April 9th 2022, 2.840 disease cases were registered in Brazil, in the age group between six and 19 years old, related to hospitalized Severe Acute Respiratory Syndrome.² Upon that, it is importante to highlight that oficial data presented in the Epidemiological Report Card do not represent the panorama of COVID-19 infection in adolescents, because mild and moderate cases are not registered and there school age group (6 to 12) is incorporated in the report. However, COVID-19 can appear in all ages.

Studies that relate adolescence to COVID-19 are centered in epidemiological characteristics about adolescents and SARS-Cov-2 infection prevention measures and mental health issues due to social distancing. Researchers have shown that adolescents are more likely to interrupt preventive measures and the maintenance of social activities that involve studies, travel and tourism, which favors the spread of the virus and the emergence of new mutations.³⁻⁶

In addition, the complication rates are still lower when compared to adults, strengthening the thesis that the cases of asymptomatic people are higher in this age group.

As a result, adolescents can compose a group of people with greater potential to infect their family members because they do not present the typical clinical picture of the disease and, consequently, maintain their routine of contact and socialization without proper prevention measures.^{3,6}

It is recognized that the main sources of information about the first outbreak of the COVID-19 pandemic in the world were mediated by television, the electronic press and news websites, social networks had limited acceptance as sources of information on COVID-19, people feel that information about COVID-19 should be provided by official sources and that there has been widespread concern about the phenomenon of fake news regarding the disease.⁷ From this perspective, health education practices are needed that make it possible to sensitize adolescents to self-care measures, their family and social interrelationships, linked to SARS-CoV-2 infection. Self-care considered as caring for oneself when sick or taking actions and adopting positive behaviors for disease prevention.

In view of this emerging epidemiological profile and comprehensive training through actions of promotion, prevention, and health care, recommended in the Health at School Program (PSE).⁸ We aim to describe the academic experience on developing educational actions with adolescents on the prevention of COVID-19.

Method

This is an experience report on educational actions carried out with adolescents between 14 and 17 years old, linked to the municipal education network of Valparaíso de Goiás, Brazil. The activity was carried out on March 16, 2020, publication date of a decree with guidelines for the closing of educational establishments, from the following day.⁹

Educational actions are part of the Extension Project "Health Care at School", coordinated by the first author. Extension proposal aims to: a) develop actions to prevent, promote and monitor the health of children and adolescents enrolled in public schools; b) to disseminate scientific knowledge of health among the children and youth population; and c) offer a teaching and learning space for undergraduate students of the educational institution to which they are linked.

For the purpose of organizing educational activities with school adolescents, Paulo Freire's dialogic pedagogy was used, in which knowledge is built in the group through the

Rev. Enferm. UFSM, v.12, e27, p.1-11, 2022

sharing of experiences. In this perspective, the objective is the reflection and the transition from the naive conscience to the critical conscience, contributing to the emancipation of the student.¹⁰⁻¹³

The school that was the scene of this experience report is located in a region of high social vulnerability, with an average income of the population of two minimum wages, 11.2% of the employed population and a human development index equal to 0.746. This context is relevant for dialogic pedagogy, since the individual's experience takes place in an environment where the learner is influenced but can also influence and promote transformation.¹⁴

Fifteen undergraduates from the Department of Health Sciences of the undergraduate courses in Physiotherapy and Nursing, whose preparation to implement the Freirean approach took place during their participation in the project in the course of one semester, participated as meetings mediators. Training on the topic took place one morning in a meeting mediated by the two activity coordinators. The selection of students took place from the approval in the Pediatrics curricular units of the referred courses, being open to all who were available and motivated to participate in the activity.

Students were mediators of the scientific dialogue about the prevention and care of COVID-19, under the guidance of a Nursing teacher and a Physiotherapy teacher. Students were divided into groups of three people and mediated dialogue with 15 groups of teenagers. Each class consisted of 22 students on average, totaling 334 participants. Conversation circles lasted, on average, 29 minutes each, with the shortest 21 minutes and the longest 37 minutes.

Meetings took place in the classroom and on the last day of face-to-face classes in the municipality. Armed with static visual resources (posters), produced by students and professors, the five trios of undergraduate students mediated an informal conversation with three groups of 21 to 24 adolescents aged 14 to 17 years, following the dialogic logic of culture circles by Paulo Freire and problematization, so that adolescents could transition from naive awareness to critical awareness about prevention and care regarding COVID-19, whose four stages are described in the results.

Results

Educational interventions were carried out in four moments, whose dialogic Freirean

Rev. Enferm. UFSM, v.12, p.1-10, 2022

approach offered mobility and freedom for students to direct the discussion.

At the first moment, there was the presentation of nursing and physiotherapy students as people interested in health and adolescents, who shared their interests and perspectives for the future. This type of language and conversation were chosen to try to establish a bond of trust with the students, given that the time of preparation and execution of the activity was short due to the emerging situational context, of a pandemic.

As it is a continuous extension project, whose activities precede the day of the actions, the adolescents were aware of the college to which they were linked and this added familiarity to the process, established by the extensionists, which favored the establishment of the bond, being a facilitator for the implementation of the activity.

In this sense, students selected for the activity were already in continuous health education meetings and the importance of practice based on evidence/scientific knowledge. As a result, the health education process took place with few visual resources, with the posters being used only to disseminate information in the background from the second moment onwards.

In it, students questioned teenagers about their knowledge about COVID-19. In this stage, staging of knowledge and identifying main points to be discussed in the group took place. The following themes emerged in the group: difference between SARS-CoV-2 and COVID-19, living with people within the COVID-19 risk group and prevention measures that could be taken by adolescents in the context of the time.

In the first theme, some adolescents referred to COVID-19 virus, confusing the disease with the etiological agent. Second theme emerged through the comprehension that people in the risk group were susceptible to the disease. Third theme demonstrated that adolescents comprehended recommendations to pandemic control, such as social distancing, hand hygiene and using alcohol gel. During that time, wearing masks was not popularized as a health prevention information, because it was the first days of the pandemic, when first cases were identified in the southeast of Brazil.

Third moment consisted in discussing the cited points. First approached point was about the difference between virus and disease, comparing the history of the human immunodeficiency virus (HIV) and the acquired immunodeficiency syndrome (AIDS). Using a known example eased adolescents' comprehension about the causing agent and the disease

Rev. Enferm. UFSM, v.12, e27, p.1-11, 2022

itself, because they were already in contact with the subject in biology. Rescuing it made them access latent memory and construct information about today's disease.

To continue themes' discussions, adolescents reported to have knowledge about risk groups for COVID-19 complications and responsibility that they have with their families about not infecting their loved ones. Second and third themes were discussed concomitantly because from this responsabilization, adolescents raised issues about prevention. Adolescents gathered information on social media and press News, reinforcing the importance of social distancing, hand hygiene and wearing masks, and their responsibility in following them to not put their loved ones' lives at risk.

In the fourth moment, group mediators revisited discussed themes, defined/constructed scientific theoretical conceptions for/in the group, reinforcing the importance of this knowledge for its practical application during the pandemic moment that initiated itself and then, the group said their goodbyes. In this step, adolescents verbalized, at the end of educational actions, the importance of knowledge exchange that reinforced autonomy about unknown care during the pandemic.

Even though approached knowledge go beyond preventive measures (hands hygiene, social distancing and wearing masks), incorporating aspects of care and the process of health and disease (difference between virus and disease, signs and symptoms, acting when there is infection, caring for others), we comprehend sharing information had as end knowledge for prevention.

Discussion

Discussing a new context and health risk is necessary, especially the population of adolescents and young people. Studies point out that educational health practices are crucial to respond to public health crises such as the COVID-19 pandemic. The amount of information in the contemporary digital age is often beyond a person's ability to understand it in its entirety. The younger the age, the greater the consumption of news and content via the internet and social networks, and it is in this context that adolescents and children become vulnerable, given the amount of false data circulating on the networks.⁷

In contrast to the flood of digital information, the school and the groups become possibilities for the insertion of face-to-face, effective, and safe educational practices in health

Rev. Enferm. UFSM, v.12, p.1-10, 2022

for students. Usinf groups to promote health education with adolescents is an effective approach that encourages the multiplication of knowledge among peers, through youth protagonism in matters concerning their health. In schools, this type of approach can favor the encounter of Nursing with this public and engage them in health promotion activities.¹⁵⁻¹⁶

Establishing a bond with the adolescent is essential for the effectiveness of the health education action. The presence of known to adolescents, the use of colloquial language with slang and humor, and the method of mediation of information are factors that interfere in the way adolescents connect with health professionals. Building trust in the relationship between these audiences permeates several factors, including the use of media and devices during the meeting. Using books and cell phones during the exchange of information negatively interfere in the stablishment of a bond with health professionals, as it is re-signified as insecurity.¹⁷⁻¹⁹

In this sense, opting for the Freirean approach without mediating educational devices and the adolescents' familiarity with the institution proposing the project contributed to the execution of the workshops. In the Freirean perspective, knowing the reality and the context of the students is essential for them to make sense of reality in order to free themselves. The exchange and sharing of experiences and information between student-educator takes place in a process that enables the construction of knowledge that makes sense to the student. Thus, the latter becomes not only an agent who receives domesticating information, but also someone who constructs liberating information.¹⁷⁻¹⁸

It is recognized that due to sanitary measures, the face-to-face approach was unique for the group of adolescents, however, an international study points out that both shorter, concentrated and targeted interventions, based on facts, and a longer intervention, providing the same facts plus explanation of underlying scientific concepts, improved knowledge related to COVID-19.²⁰

As limitations, we highlight the impossibility of offering direct quotes from the speeches of adolescents, since this action is linked to an extension activity, however, extension proposals bring teaching practices closer to the reality of the population, favoring teaching and possibilities to develop care based on the reality of the participants. In addition, the short period between organization and implementation of the activity and the impossibility of continuing it in other schools is highlighted, since it was developed on the last day of face-to-face teaching activity before the implementation of remote teaching due to the

Rev. Enferm. UFSM, v.12, e27, p.1-11, 2022

COVID pandemic. -19.

Freirean approach, applied with adolescents in schools, for the prevention of COVID-19 and health promotion, assists Nursing to value the role of this population, whose vulnerability is presented by the few meetings in the health services. Starting from the knowledge acquired and built by adolescents favors the teaching-learning process to contribute to the sophistication of conscience that, gradually, can go from naive to critical conscience.

Conclusion

Educational actions with adolescents are essential to strengthen the exchange of knowledge mediated by scientific knowledge that can demystify taboos, alleviate doubts and generate possibilities for the promotion of health and care. In the context of the pandemic, amidst the various information, which is not always feasible, moving from naive and uncertain knowledge about COVID-19 prevention practices to reflected and shared knowledge contributed to empowerment with a view to self-care, whose attitudes culminate, also, in the care of the other. Acquiring health information based on scientific evidence initiates a process of awareness, to change the reality that the subject finds himself. In this sense, working with adolescents from the perspective of preventive care during the pandemic favors the transition from naive awareness to critical awareness regarding COVID-19 infection.

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Rev. Enferm. UFSM, v.12, p.1-10, 2022

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