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RESEARCH

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Um estudo sobre a amizade como estratégia pedagógica: o significado dado por estudantes de medicina

A study on friendship as educational strategy: its meaning by medical students

Un estudio sobre la amistad como estrategia educativa: el significado atribuido por estudiantes de medicina

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ABSTRACT

Objective: To diagnose Friendship as a teaching device. **Methods:** Exploratory and descriptive qualitative study. Main question: What does Friendship mean and a friendly teacher? **Results:** Psychosomatic Medicine classroom, 2015/2nd Semester; 16 white students of 6th, 7th and 8th semesters of medical school; two at 2nd graduation; 12 female/4 male; mean age 25 years; most have two siblings; from Southeast and one from Midwest; three were married; two had children. Friendship as a feature of human essence, a communication of the sensitive body. They think teacher as someone fulfilling their will. **Conclusion:** Educational activities in education, training and health actions should include feeling and will of students. The teachers need to acquire teaching skills of human spirituality.

Descriptors: Friends; Medical Education; Higher Education.

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RESUMO

Objetivo: Diagnosticar a Amizade como estratégia didática. Métodos: Estudo qualitativo exploratório e descritivo. Questão norteadora: o que é Amizade e um professor amigo? Resultados: A sala de aula, Medicina Psicossomática, 2015/2º Semestre; 16 alunos brancos, no 6º, 7º e 8º períodos da medicina; 2, segunda graduação; 12 sexo feminino/4 masculino; idade média +/- 25 anos; a maioria, 2 irmãos; provenientes Sudeste e Centro-Oeste; 3 casados; 2 com filhos. A Amizade, característica da essência humana, comunicação dos significados do corpo sensível. Os alunos pensam o professor, realizador do seu querer. Conclusão: As atividades pedagógicas na educação, formação e ação na saúde precisam incluir o sentir e o querer dos discentes. Os docentes necessitam competências da espiritualidade humana.

Descritores: Amigos; Educação Médica; Ensino Superior.

RESUMEN

Objetivo: Diagnosticar Amistad como estrategia de enseñanza. Métodos: Estudio cualitativo exploratorio y descriptivo. Pregunta principal: ¿Qué es la Amistad y un profesor amigo? Resultados: Clase Medicina Psicosomática, 2015, 2º Semestre; 16 estudiantes blancos del 6º, 7º y 8º períodos de graduación en medicina; 2 en segunda graduación; 12 sexo femenino/4 sexo masculino; edad promedio 25 años, mayoría con 2 hermanos, región sudeste y 1 del centro-oeste; 3 casados; 2 con niños. Revelaron la Amistad como característica de esencia humana, comunicación de significados del cuerpo sensible. Ven al profesor como realizador de su voluntad. Conclusión: Actividades educativas, formación y acción en salud deben incluir sentimiento y aspiración de estudiantes. Docentes necesitan habilidades de espiritualidad humana.

Descriptores: Amigos; Educación Médica; Enseñanza Superior.

INTRODUCTION

The I World Conference on Higher Education has established reform in higher education at the world level to meet the demands of the Knowledge Society.¹

The Bologna Protocol showed that such structure would enable citizens to circulate and opportunities for employment and development. This educational policy would be the matrix of stable, peaceful and democratic societies not only in the European Higher Education Area (EHEA), but also in the Latin American and Caribbean Area of Higher Education (ENLACES).²

The Frenk³ Report demonstrated the need for a new profile in the training of health professionals with a dynamic and differentiated academic background with humanitarian characteristics beyond the techniques.

The Brazilian Curricular Guidelines determined the creation of pedagogical projects with integrated curricula for the construction of graduates with a profile with competences, contents and skills within these perspectives in national and international approaches. hey would have to be able to act resolutively in the Unified Health System (SUS), considering the Brazilian Health Reform. Health graduation students needed to learn to learn, to learn to be, to learn to do, to learn to live together and to learn to meet. These educational determinants of learning originate from global

reform in higher education. The system seeks to guarantee the qualification of graduates with autonomy and discernment for the integrality of the attention, quality and humanization of care provided to individuals, families and communities.⁴

The profiles required of different health professionals are very similar. The doctor must have a generalist, humanistic, critical and reflexive education. He needs to be an agent of social transformation, to communicate with co-workers, patients and family members, to take care of one's own physical and mental health and to pursue one's well-being as a citizen. He must be available for health policy and planning, multiprofessional staff, etc.⁴

This legislation in force requires university institutions to form a collective health manager. The profile of a multicultural character and caregiver of local, regional, national, continental and global communities is expected.

Thus, a paradigm shift in third-level education and with university pedagogical projects of some territories in transition is characterized.

However, this process presents several problems that are experienced in the action plan in the micromolecular space of a classroom (teaching) or in the practical field in research and university extension. The task of alleviating and caring beyond healing requires confronting varied and complex challenges to human pathos.

The teacher who was accustomed to a pedagogy based on inertia with a protocol of transmission of scientific knowledge supported in positivist schools⁵ does not understand a pedagogy of care and relational with the living body and its powers of students and their vicissitudes.⁵

This means self-care and being an agent of the singularities of young adults who need education, training and action, as well as information to be a suitable citizen to play their part in contemporary society.⁶

These binding and dialogical experiences marked by the hierarchy in the teaching process in the health area have imprinted and imprint traces on the expansion and constitution of the personality of a future health professional.⁷ The young adult is in an age group of identity construction in all dimensions expected by the eco biopsychosocial context.

Adulthood, a rite between adolescence and maturity, is characterized by a moment in which the conflict of dependence and independence characteristic of the phase of adolescence of a subject is reestablished. It is a transition marked by the loss of old friendships and the need for new ones for the formation of peers in the professional and private life cycle.⁸

The affections that emanate from the body of these students mainly at the beginning of the basic cycle, the clinician and the boarding school are differentiated. The biomedical curriculum, based on the dead body, disintegrated and without appreciation of the humanities axis, creates the impasse in this new education and health policies.⁹

Thus, there is a need to create environments for these subjects to discover that to reach adulthood they need

to learn to talk and to expose their difficulties without embarrassment and by extension to relieve and help those who care. They feel insecure at the end of the course and call for action other than rationality. The students wish to be heard, welcomed, with therapeutic touches to exchange experiences, to better understand the profession and the challenges that will be presented.¹⁰

In the context of our experiences as educators we envisage the assumption that Friendship can be a didactic strategy and a possible linear pedagogical model, horizontal and with authority that allows a relationship with these students. Friendship in the perspective of learning is the landscape in which the most different methodologies carry out in the transmission of knowledge.¹¹ In this article it was commented that one can classify the available educational methodologies based on types of Friendship in which the pedagogical relationship happens. This author contributed in this reflection the point that the character of the Friendship would be the silence and the solitude of each one in the encounter character - apprentice and the personage professor of each pedagogy so that the relation establishes itself. This gesture, besides representing what the act of learning means, brings in a way of life and pedagogies of their own learned and apprehended in their life trajectories.11

As we begin to construct the doctoral thesis, we decided as a pre-test of our possibilities to ask the students about the desire to have teacher friends. This theme was made explicit by the students in their narratives in the operative dynamics, in the tripod teaching, research and extension. This practice allowed the exploration and hatching of the subjectivities and singularities of these subjects during graduation. Thus this essay aims to present a situational diagnosis about the meaning of Friendship in the teacher-student dyad in the context of university teaching and to imagine this strategy as a new policy in the aesthetics of higher education. The conception of a new space of action defined by the national and global educational legislation in the area of health, on the forms of relationship, can be a way in the construction of the citizen's professional identity with social responsibility of this egress.¹²

The scenario of the optional discipline of Psychosomatic Medicine, included in the curriculum of the current pedagogical project of medicine of a federal institution, configured the continent that made it possible to introduce the guiding question of this article: What is Friendship for them and what is a friend teacher?¹³

The definition of the objectives of this experiment was established to questions that are: To diagnose if Friendship can be a device in medical education.

This study is justified and relevant when thinking about the art and science of the teacher-student relationship in teaching how to care for others in their positive and negative experiences of suffering. The intention is to contribute to the production of data in the investigative orientation of a thesis in development and in the direction of paths to be traced in the search of the theorization on Friendship in the context of university education in biosciences and medical education.

The questioning of Friendship as a relation of affection, help and solidarity can be a theme that raises contradictions in its conceptual understanding, even putting at risk ethical-professional behavior.¹⁵

METHODS

The research was a qualitative exploratory study (participant and transverse observational intervention) and descriptive (correlational) study to reach the proposed objectives. The analysis of content was used with the instrument of communication analysis (inductive questions) and the hermeneutical textual interpretation having as guiding question: What is Friendship for you and what is a friend teacher?

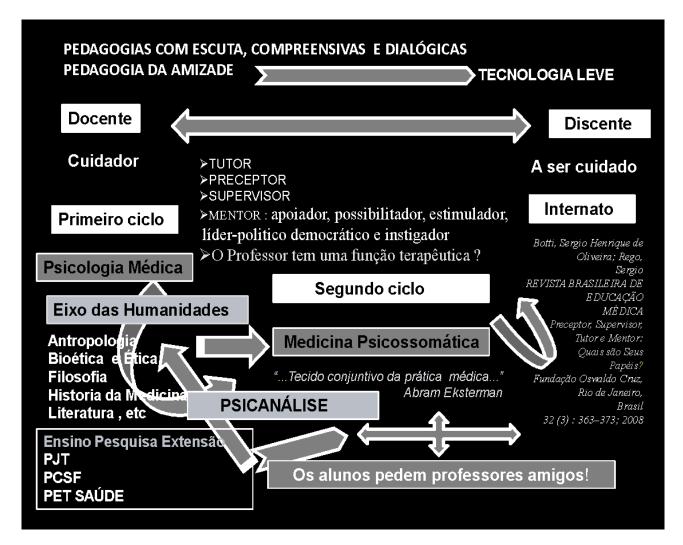
The scenario was the classroom, in the optional discipline of Psychosomatic Medicine of the School of Medicine of a Brazilian Federal Institution, in the city of Rio de Janeiro. The pedagogical project through Ordinance No 550, of March 9, 2011, included this discipline in the Axis of Collective Health and Humanities. The prerequisites for participation in it were to have studied Psychology I and II and Semiology and Medical Clinic I, in the Biological, Practical and Integrator Axis of the course. The elective subjects needed, on that occasion, to be taken until the 8th graduation period.

The lesson plan corresponded to the objectives of the axis where the discipline was inserted: to develop the humanistic capacity and the ethical posture, necessary for the exercise of the medical profession, through the humanistic competences, abilities and attitudes. An operational methodology with groups of reflection and discussion of clinical cases (Balint experience), the presentation of videos and films on the theme of the health/patient team and community relationship, the study of psychodynamics and situational diagnoses in psychiatric interconsultation, concepts of mental disorders in the practice of general practice, health promotion and visits outside the primary care nuclei, family and community health, and extension projects inside and outside the institution, etc.

The sample included the 16 white students enrolled in the discipline in 2015.2S (6th, 7th and 8th graduation periods in medicine); 12F/4M; 2 students attending a second graduation (the first was marketing and physical therapy); mean age +/- 25 years, coming from the Southeast region and 1 from the Midwest; 3 married; 2 with children, they belonged to families of traditional constitution, with an average of 2 siblings. One student had a brother from different parents for widowhood of the parental couple. Everyone wanted to take part in the study.

The project was submitted and approved by the Ethics Committee to comply with Administrative Rule 466 of December 12, 2012 of the CNS/CONEP when the students decided to participate signing the informed knowledge term: CEP-HUGG: Opinion Number e Reporting Date: 888,405 - 10/29/2014.

Figure 1 - The Field of Study of Contemporary Pedagogies



RESULTS

The production of data for the results was carried out through the inductive questions: What is Friendship for you? What is a teacher friend? How did the teacher mark you for good and evil? The organization of the content of the two questions to demonstrate how the students meant the Friendship were worked out separately. We found two meanings in the words that give rise to the FEEL and WANT categories.

The context What is Friendship for you? What is a teacher friend? How did the teacher mark you for good and evil? Revealed:

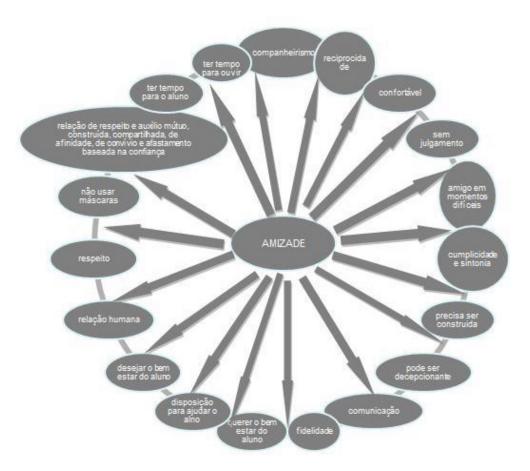
- 1- Friendship as communication of the students' sensitive body (this refers to the affirmations of emotions, feelings and their hopes): FEEL.
- 2- Friendship is when the students in the body to body with the teachers think of their masters as conductors of their will (this refers to the statements that involve the expressions of desire): WANT

The data were organized in two frames as shown in Figures 2 and 3.

Figure 2 - Feeling category diagram: Friendship as a communication of the students' sensitive and powerful body



Figure 3 - Wantings Category: Friendship is the thinking of the teacher as the achiever of the body to body of the students' will



Friendship is a sense of FEELING (the sensitive and powerful body that can do something for someone) and WANTING (something from the body of the other) and then, the category analysis reveals a liberating pedagogy, competence, communication, that is, a dialogical one-to-one relationship.¹⁵

The data produced by the students about what is Friendship is important because it brings significant contributions to a pedagogy of teaching biosciences (medicine), when it is revealed through FEELING and the WANTING, an activity of education, formation and action, which is basic of human spirituality.

Thinking, willing and judging are basic and autonomous spiritual activities. They are not part of the world of appearances, but of the essence of the invisibility of human existence.¹⁶

The desire to be cared for, to listen, to have affection, to be able to count on the other, not to be afraid configure the needs of the sensitive body that comprise emotions and feelings, characteristics of the soul and the constitution of the desire to acquire a craft that demands from this subject different skills from other professions in which good and evil are inserted in their daily life.¹⁷

These meanings of Friendship can be an inducement to what we want to understand as the "touchstone of a sensitive education," a didactic that includes a body with essence, soul, and rationality. This pedagogy can stimulate the student for freedom, the pleasure of learning and exercising his profession with the tranquility of being and acting. This will imply the desire of teachers to Feel and to Want as Pedagogy: A hand to hand with the power of Friendship.

DISCUSSION

The University Teaching includes aspects of Pedagogy and Andragogy in the teaching-learning process, as we are dealing with a becoming adult person (bodies of young adults aspiring bio psychosocial competences of adult life although they present aspects still of the psychosomatic modulation of adolescents).⁸

Friendship was a transgenerational teaching tool used in the Hippocratic era in the transmission of knowledge. It is present in the text of the oath of the medical graduates in the ritual of passage to exercise their profession. This oath is perpetuated to this day.

It is a theme that has been studied in contemporary times as a form of aesthetics and ethics of existence, in the late twentieth and early twenty-first century due to the paradox of a world without borders, connected, without affective interactions, competitive and constant technological advances.¹⁸

The praxis of friendship, a kind of bond, an expression of moral virtue, a device of character and alliance can be a political pedagogical tool to potentialize and reactivate the subjectivities and singularities of collective bodies in postmodern society: the chaos of net anguish.¹⁹

Friendship between students and teachers is an unexplored topic as well as the friendship between health professional/doctor-patient, since the normalizing pedagogical model in which the educator had a culture to be imposed on the unfit individual did not allow a deepening of this issue.⁵

The philosopher Francisco Ortega brings together in three books a reflection of the studies made from 1996 to 2002 on the theme of Friendship. They are: Friendship and Esthetics of Existence in Foucault (1999); Genealogies of Friendship (2002) and For a Politics of Friendship: Arendt, Derrida and Foucault (2009).

The issue is paramount in the area of Education, because AMICUS is a significant relationship for people and a promoter of happiness, health and life satisfaction. Good friends facilitate tolerance of fears and anxieties, help with stressful situations, and enable shared experiences.²⁰

The essence of education is in the figure of the teacher. He is the living mediating body between what already exists of knowledge in society and what is yet to come. Learning to reason is the way to abandon the learning of existing crystallized media concepts and the possibility of the emergence of a new paradigm in pedagogical spaces with innovative didactics, since each human being is a new beginning.

The society of information is not based on the autonomous world of the child, on teaching to think and on "learning by doing", because the programmatic context of technical skills and competences is still the strategy instituted to compete for a place in the labor market.¹⁶

The insertion of interaction and communication skills in the current adult professional training (andragogy) in addition to the specific training skills to perform the job as having a great technological potential, strategic capacity and continuous renewal allows to consider the phenomenon of Friendship as a support of attunement of essences, of affective bonding, of communication of gestures, of time, of meeting of souls, sublimated, of well-being, as desired by the students of the exhibition of this experiment.⁶

The Rites of Initiation and Friendship, the Rituals of Affliction are part of the micro space of coexistence of a culture from the ancient tribes. The notion of death is a striking feature of these rituals. It is presented to the subjects who participate (the novices and the sick) by the evocation of the spirits. Rituals are gestures that reflect the practices of thinking representative of the social macro environment of a collectivity. These rituals include the category of Friendship in the model of society that allows the reception and integration of differences and the foreigner in the democratic political space. They allow the construction of an individual, group and global identity, since they give rise to the possibility of the utopia of the understanding of human existence.²¹

The body of the students of the health area lives rites of agony: the entrance in the first cycle, in the second cycle, in the third, the exit to the labor market, the masters, the doctorate and the continued education. This moment is marked by the pain and pleasure of adultery, the pain of having a source of pleasure at work.

The expression that is widely used today, mentoring, means the relationship of support between a more mature and experienced professional, and another, in training or newcomer to the profession. The two, with different ages, personalities, stages of life and professional status, develop, for a certain period of time, a relationship that will add knowledge and decision-making capacity to the history of both, without the concern of prescribing an evaluation.²²

The friendship between some teachers and students, in the classroom and its extensions as in the courtyard, in the green spaces, stages and other loci allow a more humanized didactics and creates a dialectic and relational that teaches the singular, subjective and intersubjective values, in the construction of subjects for an ethical society.¹⁵

CONCLUSION

The aesthetics of solitude of international POLIS in contemporary technological society envisages in the aesthetics and ethics of Friendship a new configuration to account for the needs of the body with its essence, affection and reason in an unpredictable society in which death is a constant by urban violence, environmental disasters and lack of social responsibility.

The Friendship (PHILIA) as a pedagogical strategy in university education in biosciences and medical education can be a political instrument of intervention in the educational system contributing scenarios that allow universities to participate in a continuous way in the construction and development of human communities. It will be inserted in of the pedagogy of competences, with the inclusion of the characteristics of human corporeity: eco biopsychosocial and spiritual.

The study of the new social bonds, among them the Friendship ones, can be a pedagogical device to look for didactic rites in AGORAS of the POLIS of that time to deal with a new ETHOS and AGON (planetary struggle and competition) in the universalization of the teaching.

The "good teacher" arises from the technical-pedagogical interaction with the ethical-relational and is the one that besides affective has understanding in the areas of the humanities.²³

REFERENCES

- Unesco. Conferência Mundial de Educação Superior [Internet]. 1998. [citted 2016 Jan 20]. Available at: http://www.interlegis.gov.br/processo_legislativo/copy_of_20020319150524/20030620161 930/20030623111830>.
- Declaração da Conferência Regional de Educação Superior na América Latina e no Caribe. Avaliação [Internet]. 2009 Mar [citted 2016 Jul 30];14(1). Available at: http://dx.doi.org/10.1590/S1414-40772009000100012.
- 3. Frenk J, Lincoln C, Zulfigar AB, Jordan C, Nigel C, Timothy E, et al. Health professionals for a new century: transforming education to strengthen health systems in an interdependent world. Lancet [Internet]. 2010 Nov [citted 2016 Jun 07];9756(376):1923-58. Available at: http://dx.doi.org/10.1016/S0140-6736(10)61854-5.
- Brasil. Ministério da Educação. Diretrizes Curriculares Nacionais dos Cursos de Graduação em Enfermagem, Medicina e Nutrição. Diário Oficial da União [Internet] 2001 Out [citted 2016 Jul 30];131. Available at: http://portal.mec.gov.br/dmdocuments/ces1133/2001.pdf>.
- Dussel I, Caruso M. A invenção da sala de aula: uma genealogia das formas de ensinar. São Paulo: Editora Moderna; 2003.
- Silvestre CAS. Educação e formação de adultos e idosos: uma nova oportunidade. 3a ed. Portugal: Editora Instituto Piaget; 2013.
- Tavares F. Identidade médica, ética e iatrogenia. In: Mello Filho J (Org.). Identidade médica. São Paulo: Editora Casa do Psicólogo; 2006. p. 285-314.
- 8. Outeiral J. Adultecer: a dor e o prazer de tornar-se adulto. Rio de Janeiro: Editora Revinter; 2008.
- Bastos LAM, Proença MA. A prática anatômica e a formação médica. Rev Panam Salud Publica [Internet]. 2000 Jun [citted 2016 Jul 16];7(6):395-402. Available at: http://www.scielosp.org/scielo.php?script=sci_arttext&pid=S1020-49892000000600007&lng=en.
- 10. Silva MJP, Belasco JD. Ensinando o toque terapêutico: relato de uma experiência. Rev Lat Am Enfermagem [Internet]. 1996 Abr [citted 2016 Jul 16];4(Spe):91-100. Available at: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0104-11691996000700010&lng=en.
- 11. Cardoso Jr HR. Pensando a pedagogia com Deleuze e Guatarri: amizade na perspectiva do aprender. Educ Real [Internet]. 2006 Jan/ Jun [citted 2016 Jul 16];31(1):37-52. Available at: http://seer.ufrgs.br/index.php/educacaoerealidade/article/view/23000/13276.
- 12. Ortega F. Para uma política da amizade. Rio de Janeiro: Editora Relume-Dumara; 2000.
- 13. Universidade Federal do Estado do Rio de Janeiro. Projeto pedagógico da Escola de Medicina [Internet]. 2009 [citted 2016 Jul 30]. Available at: http://www.unirio.br/prograd/ppc-dos-cursos-de-graduacao/projetopedagogicodocursodemedicina.2009.pdf.
- 14. Ortega F. Genealogias da amizade. São Paulo: Editora Iluminas; 2002.
- 15. Freire P. Medo e ousadia: o cotidiano do professor. São Paulo: Editora Paz e Terra; 2011.
- 16. Arendt H. A vida do espírito. Portugal: Editora Instituto Piaget; 2000.
- 17. Nietzsche F. Genealogia da moral. São Paulo: Editora Companhia das Letras; 2009.
- Passos MC. Cura social: amizade e reinvenção da vida. Rev Mente Cérebro - LARPS. ed 208; ano XVII.
- 19. Zygmunt B. Tempos líquidos. Rio de Janeiro: Editora Zahar; 2007.
- 20. Souza LK, Hutz CS. A qualidade da amizade: adaptação e validação dos questionários McGiII. Aletheia [Internet]. 2007 Jun [citted 2016 Jul 29];25(1):82-96. Available at: ">http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S1413-03942007000100007&lng=pt>.
- 21. Souza LK, McCarthy SN. Ritos de passagem da adolescência à vida adulta. Rev Interinst Psicol [internet]. 2010 [citted 2016 Jun 15];3(2):124-35. Available at: http://pepsic.bvsalud.org/pdf/gerais/v3n2/v3n2a03.pdf.
- 22. Botti SHO, Rego S. Preceptor, supervisor, tutor e mentor: quais são seus papéis? Rev Bras Educ Med [Internet]. 2008 Jul [citted 2016 Jun 15];32(3):363-73. Available at: http://dx.doi.org/10.1590/S0100-55022008000300011.
- Madeira MC. Professor universitário: aprimorando o desempenho.
 São Paulo: Editora Sarvier; 2011.

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