Confronting covid-19’s infodemia in primary health care: experience report

Enfrentamento à infodemia da covid-19 na atenção primária à saúde: relato de experiência

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Abstract

Introduction: The spread of SARS-CoV-2 around the world brought challenges to health services and demanded efforts to increase health promotion, prevention and recovery measures applied to community and individual care. Added to this, infodemia, informational excess and (un)informative manipulation have the potential to generate serious consequences for individuals and the community. In this context, the role of Primary Health Care (PHC) in assisting the symptomatic stands out, such as enhancing health promotion and protection actions through health education. Objective: To report the construction of the Situational Strategic Planning (SSP) carried out by nursing students during their internship at the Basic Health Unit to enhance the health education practices by team members to the population. Method: Descriptive study, of the experience report type, developed from April to July 2021 based on the SSP. Results: The SSP was developed applying it to confront Covid-19’s infodemia in the PHC in its four distinct moments: explanatory, normative, strategic and tactical-operational. Conclusion: This study presented the SSP as a usable strategy in confronting Covid-19’s infodemia in PHC. From this experience, nursing students built learning related to observation, effective communication, organization and importance of teamwork; as such, it enabled practical experiences in relation to the bond with the community, comprehensive care and design of an alternative capable of intensifying the fight against the Covid-19 pandemic.

Keywords: Covid-19, Primary health care, Nursing students, Community-institution relations

Introduction

The pandemic caused by SARS-CoV-2 marked the beginning of the 2020s due to its important propagation and lethality capacity. This virus can cause a severe acute respiratory infection called Covid-19: a disease that affects all continents and socioeconomic groups globally, whose absence of treatment requires health prevention and control actions and measures. The World Health Organization declared on March 11,
2020, the state of pandemic due to the high number of contaminations that already total more than 184 million registered cases and more than 3.9 million deaths from the disease in July 2021\(^1\)\(^-\)\(^2\).

Mild cases, corresponding to 80% of individuals who were infected by SARS-CoV-2, and moderate cases are commonly assisted in Primary Health Care (PHC), considered the place of first contact with the Unified Health System (SUS) by users, which is able to encourage co-responsibility in the construction of care practices and facilitate access to the Health Care Network (RAS). Among its foundations and guidelines is territorialization, longitudinal care in the light of the principles of the SUS, the articulation between different professionals and areas of knowledge whose focus is the contribution to users: aspects that characterize the relevance of PHC\(^3\)\(^-\)\(^4\).

Given the challenge of the pandemic scenario, the PHC routine had to be re-adequate to ensure the protection of professionals and users. The possible paths to it to prevent the spread of SARS-CoV-2 in the enputed territory correspond to: development and application of preventive and control measures in a synchro way with users; facilitation of access to quality information and appropriate orientation to the population; reorganization of care in relation to local flow, considering the possibility of using remote devices and other resources available in each unit; continuity of actions whose purpose is the health of individuals, especially those who are components of the risk group to complications associated with Covid-19; and community support in the proper management of symptomatic cases\(^5\).

It is worth mentioning, in the relationship between the Basic Health Unit (UBS) and the user, the role of Community Health Agents (CHA). These actors, based on the proximity and link with the territory and the community, raise the potential of health promotion and surveillance actions, corroborating the change in the epidemiological profile and improvement of the population’s quality of life. Due to their insertion in the territory, the CHA are of immeasurable importance for providing support and guidance to the population at the community and family level based on household health measures\(^6\)\(^-\)\(^7\).

Nursing’s performance in the face of the circumstances of the Covid-19 pandemic stands out. Among the potentialities of this actor in the health scenario, his performance in the territory produces a care focused on social changes and health realities, both in the context of critical epidemiology, as well as in the perspective of interprofessionality and intersectoriality. This power considers the relations with a view to strengthening PHC, as well as community collaborative networks, and overcoming the health crisis experienced in the pandemic context\(^8\).

Based on the recognition of Primary Health Care as the priority strategy for the reorganization of the health system in Brazil, which expands health promotion, prevention and recovery actions in the territory, it is necessary to develop and implement care practices through the recognition of the needs of the territory from the perspective of integrality and access to health actions and services. The nurse, as an actor who manages the actions of the Family Health Team (EqSF), has the responsibility to conduct the planning and broaden his gaze to the dynamism of the variables, in order to consider the issues related to the health of the population\(^9\)\(^-\)\(^9\).

The exorbitant amount of information available at the moment does not ensure that people are properly aware of situational severity and the ability to improve prevention and protection measures within the collective. Infodemia, therefore, is a term that encompasses informational multiplication including the side effects of this excess; the manipulation (des) informative, the excesses brought by the media and media and the emotional overloads resulting from it, for example. Therefore, there is another challenge to health professionals and the community, since it can add consequences to people’s health due to decisions based on untrue news propagated by unofficial sources\(^10\).

From this perspective, this article aims to report the construction of the Situational Strategic Planning (PES) carried out by nursing undergraduates during the internship at the Basic Health Unit to enhance health education practices by team members to the population.

**Method**

Descriptive study, of the type of experience report, based on the experience of two students and a professor of undergraduate nursing courses of a private Higher Education Institution (HEI) located in the city of São Paulo. The writing took place from April to July 2021 in order to contemplate from the construction of pes, in its four moments, to the completion of the curricular internship in nursing.

In the fourth year of the undergraduate course, students have the opportunity to develop the curricular internship in PHC, a proposal that highlights the importance and way of functioning of the SUS, the singular and joint actions of nursing practice, health work from an interdisciplinary and interprofessional perspective, among other critical-reflexive characteristics pertinent to the theme.

The report comes from living in a Basic Health Unit (UBS), located in the central region of São Paulo, which the care proposal covers approximately 15,000
people, under the Family Health Strategy (ESF) management model.

Situational Strategic Planning (PES), a theme addressed during the last year of undergraduate nursing, is a practical method that recognizes the subjectivity of local reality situations, which are pending objective and transformative approaches. The PES is structured in the four stages, which are: explanatory, corresponding to the elucidation of why certain problems exist in the reality observed, based on the schematization of cause and effect, reaching the critical node; the second is named as normative, characteristic because it is when the actors are listed and the scenarios drawn, identifying the potentiality of solving the problem analyzed; the strategic, reserved for the analysis of how much the plan elaborated is possible and executable, relating the best possible scenario with the mobilized actors and their capacity for action; and the last moment, the tactical-operational, exists in order to put into practice and evaluate daily the effectiveness of what was planned. For the construction of PES, the following questions were used: how to update the population regarding prevention measures, as well as on the viral mutation of SARS-CoV-2, based on scientific evidence? Can Situational Strategic Planning be applied in this issue?

**Findings**

In the territory of coverage, not all users have access to communication channels to obtain information from health and government authorities. Added to this, there is a disarray with the amount of information available in the media, providing the deviation of scientific references and the spread of fake news. In this perspective, there are failures in the reception of information by the population, with consequent flexibility of prevention measures in the community, increasing the risk of (re)infection by SARS-CoV-2 and/or its variants. Therefore, the selection of the critical node was supported from the perspective of health care, in advance of the transmissibility of the virus causing Covid-19 and through communication strategies, to visualize the need to inform the population of the territory enrolled about the prevention measures and viral mutation of SARS-CoV-2 through scientific evidence. Then, the scenarios were idealized according to the best transformations, those intermediate to expected and the worst resulting from the application of PES; such designs correspond to the ceiling, center and floor scenarios.

At the strategic moment, the powers of the mobilized actors were analyzed according to the activities necessary to reach the ceiling scenario, which resulted in the following capacities: the organizational, that is, the power to coordinate or direct resources for the selected action to take place; financial control, corresponding to the economic power that enables the obtaining of resources; and political power, which is related to the social representativeness of the actor. The tactical-operational moment was planned in view of the need to act and continuously evaluate the proposed actions, considering the diversity of components of the plan, the delimitation of deadlines, the places of realization and the respective responsible for each proposal.

**Discussion**

Situational Strategic Planning was developed based on the identification of the aforementioned problems that are impacting the way of living and dying of the population in the territory. In this case, it was observed the possibility of increasing the state of health in the local context through the process of training good self-care practices, with a view to improving the quality of life and health of the population.

Covid-19’s infodemia configures information overload and requires initiatives to ensure that the community is not affected by this excess; therefore, the formation of a communication channel based on scientific evidence proves accurate to ensure the dissolution of fallacies, access to intelligible and reliable information.

People uninformed or motivated by the manipulation of the facts tend to make decisions that put themselves and others around them in risky situations. Access to the massive amount of pages created on the Internet allows the sharing of speculative news that defends conspiracy theories, healing measures generated by charlatanism and disinformation contrary to scientifically proven measures in relation to protective actions against SARS-CoV-2. The spread of false stories presented as news was not uncommon in this pandemic; Miraculous remedies, early treatments, the attempt to invalidate the use of masks and hand hygiene in the prevention of infection by the latest coronavirus were some of the components of this farce.

Strategies are needed to respond to the negative effects of infodemia in the context of the Covid-19 pandemic, such as the use of official national or international platforms to ensure access to quality information. Given the difficulty in the use of the official channels pointed out in relation to users of the UBS, it was based on the bibliographic search that is the constituent of PES operations to develop a booklet whose objective would correspond both to the realization of permanent health education (EPS) of the CHA and its availability to the community as a way to facilitate this access.
The perspective of interdisciplinary work in the elaboration of PES breaks the practice of individualized health and intends workers to operate care through a joint view, achievable from listening, exchanging information and/or knowledge and collective decision-making. Thus, the PES was applicable to the situation through the mobilization of different component actors of the EqSP(19).

The actions structured in the PES to inform, encourage and qualify self-care in health value the planning produced and discussed interdisciplinary, especially by the political capacity of the CHA to dialogue with the community. Established by the Ministry of Health in 1991, the Community Health Agents Program (PACS) is an important strategy for the reorientation of care, with the role of the CHA in being an intermediary and interlocutor in the approximation between health actions and services and the enrolled population, in order to enhance the improvement in the health conditions of a given community(15).

The National Policy of Permanent Education in Health (2004) characterizes EPS as a powerful instrument that enables the search for creative solutions to overcome the problems identified from the critical analysis of a given local reality, as well as qualify the care offered to users, in a dialogical and shared perspective among the subjects of quad teaching, service, management and social control. Thus, the incorporation of Permanent Health Education in PES is an important strategy to add new care practices in accordance with the updates of theoretical contributions and evidence available in the scientific literature(9, 16).

Developing the PES in a UBS at the level of the seventh semester of the undergraduate nursing course made it possible to visualize the applicability of this instrument in the approach of disinformation about The Covid-19 and, moreover, added to the graduates participating in this experience the learning related to observation, effective communication, organization and importance of teamwork. Despite being a method that values the power of different actors, it is worth highlighting the perception about the strengthening of specific nursing attributions in PHC through PES, exemplifying them: the planning and management of singular or joint practices of CHA with the team; the leading role in the development of EPS activities; and participation in health education actions to the individual enrolment(4).

The Curricular Internship (EC) promotes the consolidation of theoretical-scientific teaching built in the course of graduation through the practical experiences that establish the bond between students and the community, the exercise of comprehensive care and the contribution to improving the quality of health services from the local reality(4,17). In this context, the monitoring of changes in the epidemiological profile of Covid-19 in the territory and the challenges experienced in the face of work stimulated students to reinvent themselves to delineate strategies of joint actions with the team to enhance health promotion to the community in the prevention and protection against the virus causing Covid-19.

The initiative to develop a plan to confront the infodemia of Covid-19 in the health unit meets the social commitment of students to seek alternatives to intensify the fight against the pandemic, an attitude that is in line with the National Curriculum Guidelines (NcD) of the undergraduate nursing course, which emphasize the need to train professionals capable of acting with social responsibility and with the purpose of promoting the health of the being human(18).

Due to the completion of the school period, the PES was applied only until the booklet construction phase and its availability to the service professionals. However, the dates that ensured the application of the actions according to their idealization were preserved.

**Conclusion**

The study presented a strategy for coping with coiid-19 infodemia in the territory of coverage, starting from a Situational Strategic Planning (PES) in a UBS located in the central region of the city of São Paulo.

Thus, it was possible to reach the first action of the tactical-operational moment, justifying the non-follow-up with the other because of the completion of the stage prior to the time necessary for the application and continuous evaluation of the proposal. However, it is note point that this was presented to the unit team before the final day of the students’ performance in the field. Therefore, this study was limited by the non-application of PES in its entirety, although its comprehensive layout occurred.

The meaning generated to the practice of management, education and performance of the family health strategy team for work in PHC is reverberated; as well as the contributions to learning of future nursing professionals regarding the development of competencies essential for nursing work, such as effective communication and the organization of teamwork.

**References**

