



Organization and functioning of the health gym program in the city of Camaragibe-PE

Organização e funcionamento do programa academia da saúde em Camaragibe-PE

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ABSTRACT

The evaluation of health policies and programs is an important tool for decision-making. Among the instruments used for this purpose, the Logical Model stands out, establishing a visual reference regarding the interaction among the inputs, activities and expected results of an intervention. The present study aimed to evaluate the organization of actions and the functioning of the *Programa Academia da Saúde* (PAS – Health Gym Program) in the city of Camaragibe, Pernambuco state, Northeastern Brazil, using a logical model. Program actions were in line with some guidelines established by the Brazilian Ministry of Health services in relation to other primary care services and promotion of the adoption of active lifestyles by the population. However, they do not comply with the recommendations for work shifts and the professionals' workload at the centers. Camaragibe has the potential to enlarge the scope of multi-professional approaches aimed at comprehensive care.

Keywords: Health evaluation; Health programs; Primary health care; Brazilian Public Health System; Brazil.

RESUMO

A avaliação de políticas e programas de saúde configura-se como uma importante ferramenta para a tomada de decisão. Entre os instrumentos utilizados para esse fim, destaca-se o Modelo Lógico, o qual estabelece uma referência visual a respeito da articulação entre os insumos, atividades e resultados esperados para uma intervenção. O objetivo deste estudo foi avaliar a organização das ações e o funcionamento do Programa Academia da Saúde (PAS) no município de Camaragibe (Pernambuco) utilizando um modelo lógico. Observou-se que as ações do PAS alinham-se a algumas diretrizes estabelecidas pelo Ministério da Saúde quanto à articulação com outros serviços da atenção primária e incentivo à adoção de estilos de vida ativos por parte da população, porém, não atendem as recomendações quanto aos turnos de funcionamento e carga horária dos profissionais que atuam no polo. As ações do PAS em Camaragibe têm potencial para ampliar o escopo de abordagens multiprofissionais com vistas à integralidade do cuidado.

Palavras-chave: Avaliação em saúde; Programas da saúde; Atenção primária à saúde; Sistema Único de Saúde; Brasil.

Introduction

The evaluation of health programs is indicated as an essential practice for the process of decision-making and improvement of interventions aimed at the population¹. Costa et al.² emphasized that the assessment practice enables the identification of the effectiveness of interventions and the need to include specific and diverse activities, thus enabling the (re)organization of actions.

Therefore, the use of assessment strategies can be an important tool for the monitoring and assessment of physical activity programs, such as the *Programa Academia da Saúde* (PAS – Health Gym Program), aimed at contributing to health promotion and the production of care and health lifestyles in the population through the building or implementation of public spaces with qualified professionals and infrastructure³.

In this sense, the use of tools that enable visualizing the relationship between components, activities, objectives and results expected for the Health Gym Program would allow both the systematic follow-up of actions and the redirection of procedures for the qualification of such intervention. One of the tools used in this process is the Logical Model (LM), an instrument aimed at documenting the description and analysis of contextual factors that interfere with program activities⁴, as it enables the visualization of what must be measured and its contribution to the expected results of an intervention. Additionally, the use of the LM enables the establishment of the relationship between resources and actions, facilitating the understanding and scope of the program objectives⁵.

Although significantly contributing to the decision-making process in terms of management and provision of health programs¹, the incorporation of service routine assessment procedures is not a regular practice yet⁵. Thus, the identification of the limits and possibilities of a physical activity (PA) program can help to improve the development of actions and provide evidence of elements that guarantee quality services⁶, promoting the analysis of its impact on the organization and operationalization of health services⁷.

In this sense, the present study aimed to assess the organization of actions and the functioning of the Camaragibe Health Gym Program according to a logical model.

Organization

Camaragibe is located in the Recife Metropolitan Area (RMA), the sixth most populous one in Pernambuco state with 156,361 inhabitants, ranking 11th in terms of demographic growth rate in this state. Due to its proximity to the capital city, many people live in Ca-

maragibe and work in the capital and, consequently, its growth is disorganized and irregular⁸. The health service network is comprised of 55 establishments, of which 46 are public and nine are private. Moreover, its sanitary sewage rate is 40.5% and death rate 13.3 deaths per 1,000 inhabitants⁸. Its epidemiological profile is characterized by high prevalence's of circulatory system diseases, diabetes and external causes⁹.

Aiming to increase the scope of Primary Care Actions (PCA), the health department implemented a Health Gym Program center in the community of Timbi, in April 2014, the district where the majority of the population lives⁸. Program activities are held in the Açude Santa Rita de Cássia Park, where the following group activities are performed: dance lessons, guided walks, functional exercise sessions, recreational and sports activities, popular games, localized exercises, stretching and resistance training. These activities are performed from Mondays to Fridays with the participation of older adults, adults and adolescents living in the community and neighboring districts. The planning and guidance of activities are performed by a physical education professional (PEP) under the supervision of a nursing professional. These professionals work for 20 hours per week at the PAS site in Camaragibe and Unidades de Saúde da Família (USF – Family Primary Care Units), associated with the Núcleo de Apoio à Saúde da Família (NASF – Family Health Support Teams), as shown in Table 1.

Functioning

At the São Francisco Primary Health Care Unit, located within the scope of the PAS site, hypertensive and diabetic users are divided into two groups that participate in activities supervised by physical education

Table 1 – Activities of the Health Gym Program, Timbi center, city of Camaragibe, Pernambuco, Brazil, 2017.

Activity	Description	Location	Frequency
Group activities	Gymnastics, stretching, dancing, body expression, popular games, leisure activities, guided walks, resistance exercises	Açude Santa Rita de Cássia Park	Mondays through Fridays, from 5:00pm to 7:00pm
Service for hypertensive and diabetic users	Talks, educational games and movies related to the treatment of diseases and promotion of physical activity practice	USF São Francisco	Wednesdays from 2:00pm to 4:30pm
Interaction with NASF professionals	Analysis of strategies and interventions suitable for users	USF Timbi I	Mondays from 2:00pm to 4:00pm
Educational actions with NASF professionals	Group discussions, talks, educational activities and games	Açude Santa Rita de Cássia Park	Once a month at the time of group activities
Events integrated with the NASF team and Health Department	Gymnastics, clinical guidance, capillary blood sugar and blood pressure testing	Açude Santa Rita de Cássia Park and/or USF	Random actions

professionals from the USF and NASF, every 15 days. The following activities are included: talks about health issues, educational games, movies related to healthy eating, the importance of practicing physical activities, knowledge about medications used in the treatment of certain diseases, and stress management, among other contents. Stretching sessions lasting 30 minutes each stood out, emphasizing the importance of regular PA practice and subsequent invitation for users to participate in activities at the center.

NASF professionals meet weekly to analyze clinical cases of users, aiming to discuss adequate strategies and interventions for each individual. Additionally, a team professional goes to this center every month to organize discussion groups about health-related themes. The Timbi site uses the following materials: PET bottles with water/sand as weights for exercises, balls, hoops and speak-

ers as equipment for the development of daily activities.

The strategies developed at the Açude Park and USF São Francisco includes an average of 50 users per activity. Moreover, the Camaragibe Health Gym Program aims to facilitate social interaction and chronic non-communicable disease (CND) prevention and care, as described in the logical model below.

Discussion

The actions developed in the Health Gym Program in Camaragibe are similar to those performed in other community physical activity programs and they seem to meet the Program guidelines to promote the adoption of active lifestyles by the population¹⁰. However, in terms of work shifts when the program functions and working hours of physical education professionals, the PAS does not meet the recommendations of the pro-

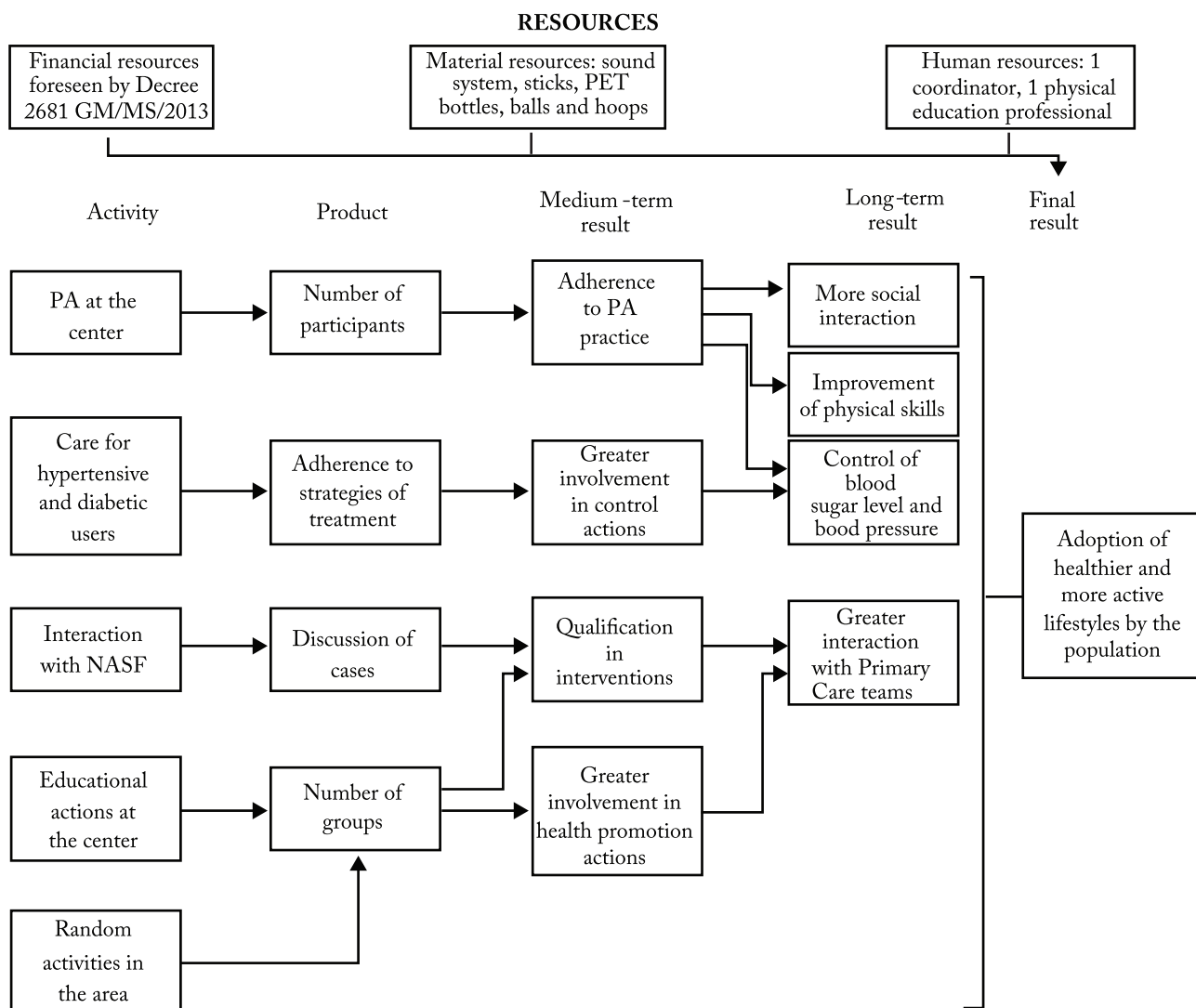


Figure 1 – Logical Model of the Health Gym Program in the city of Camaragibe, Pernambuco, Brazil, 2017. PA: physical activity; NASF: Family Health Support Teams.

gram guidelines. These guidelines show that activities must be performed during two different work shifts and include the presence of a professional working 40 weekly hours or two working 20 weekly hours each¹¹.

The development of actions in partnership with USF and NASF teams shows the interaction between the program and the city's Primary Care Network, aiming to achieve integrality of health care. This interaction enables the increase in the scope of multi-professional approaches to deal with different health problems in this area, as previously observed in studies on PAS in other Brazilian cities¹².

Educational activities about the benefits of the adoption of healthy behavior are considered to be important strategies for health promotion¹³. In this sense, the development of talks, educational games and dynamics in Camaragibe is an important tool to reduce program users' exposure to risk behavior associated with NCD. However, these actions do not regularly cater for the same population, as they are performed in the waiting room of the USF and particularly include users seeking this service on the day when interventions are conducted. This lack of continuity of actions of health education was also observed in other physical activity programs developed in the Recife Metropolitan Area¹¹.

A positive aspect of the Camaragibe PAS functioning is the development of Singular Therapeutic Projects (STP) based on the discussion of cases in weekly meetings with the Primary Care teams. The development of STPs is recommended as an intervention strategy on this level of organization of the health system and contribute to processes of change in health practices, in addition to diversifying the provision of services¹⁴.

The material resources used in the center are improvised, especially with the use of PET bottles as an implement for the performance of resistance exercises, thus restricting the possibilities of adequacy and progressive increase in loads¹¹. However, studies indicate that this practice is common in community programs of physical activities¹².

The preparation of logical models for PA programs is recommended by the Centers for Disease Control and Prevention (CDC) as a supporting tool for decision-making¹⁵. The logical model of PAS in Camaragibe was developed by the physical education professional and Primary Care coordinator in this city, aiming to establish a reference for the monitoring and assessment of such intervention. It enables the observation of the interaction among the resources required for the development of actions; activities performed and expected results, aiming to describe the causal path

for Program actions to meet their goals through the structure-process-result triad¹.

Final considerations

The Camaragibe PAS partially meets the guidelines recommended by the Brazilian Ministry of Health for this intervention, with an emphasis on the provision of health promotion and care production activities on a multiprofessional basis, interaction with Primary Care teams and incentive for physical activity practice, which can improve actions and promote important results about individual and community health, especially in terms of exposure to risk behavior for CND. However, adjustments must be made to the number of working hours, materials and program functioning periods.

Logical Models contribute to both the organization and follow-up of the routine dynamics of a service and the planning, management and development of assessment studies in the academic field. In this sense, the construction of this tool enables one to visualize how the program is organized in the area and how the activities developed are in agreement or disagreement with the guidelines recommended for such intervention.

Conflito de interesses

The authors declare no have conflict of interest.

Contribuição dos autores

Lucena JDFL, participated in the literature search, data analysis and interpretation, article writing and final approval of the version to be published. Saturnino LRL, participated in the analysis and interpretation of the data, writing of the article and final approval of the version to be published. Menezes VG, participated in the analysis and interpretation of the data, relevant critical review of the intellectual content and final approval of the version to be published. Feitosa WMN, participated in the analysis and interpretation of the data, relevant critical revision of the intellectual content and final approval of the version to be published. Guarda FRB, participated in the design and project, critical review relevant intellectual content and final approval of the version final.

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