



**OBJN**  
Online Brazilian Journal of Nursing

**ENGLISH**

Federal Fluminense University

AURORA DE AFONSO COSTA  
NURSING SCHOOL



Original Articles



## **Professorial implications in curricular transformations in the field of health: a socio-historical analysis**

**Lucia Cardoso Mourão<sup>1</sup>, Solange L'Abbate<sup>2</sup>**

1 Health Planning Department, Community Health Institute, Fluminense Federal University – UFF, Rio de Janeiro, Brazil

2 Collective Health Department, Medical Sciences College, Campinas State University – UNICAMP, São Paulo, Brazil

---

### **ABSTRACT**

We present here a reflection about the participation of professors in the curricula changes in Medicine and Nursing courses of a University. With the **objective** to comprehend how is the institutionalization of those curricula as collective projects, we selected professors who participate in these implementations, as then using the elements of the social-historical **method** and the institutional analysis, make it speak up the professional of health institution. The main **discussion** is that the social practices of the professorate are done in a dialectical relationship between the instituted, the instituting and the institutionalization moments. As a **conclusion**, we state that recent processes of curricula reforms are addressed as innovative, because the proposed pedagogical options aim at a higher integration between theory and practice, but on the other hand, potentiates the collective process of subjectivity production, competencies and abilities in the formation of future health professionals, and then, it becomes also important to consider the intersections that crisscross the professorial activity in the field of health.

**Keywords:** Collective Health; Medical Education; Nursing Education; Curriculum

---

## INTRODUCTION

The Brazilian University, born in the beginning of the 20<sup>th</sup> century, carries the diversions and the problems of its pioneers, such as the lack of a definition of an educational principle that fulfills the necessities of formation of a critical and transforming citizen<sup>(1)</sup>. Despite that the facts of this crisis are quite visible, there is a certain lethargy in action as if nothing of this is happening<sup>(2)</sup>. Internal restructuring questions are being debated, without deepening the role of this organization within the State.

The curricula changes succeed one another and little is the manifestation about the role of the professor in those transformations in the process of professionalization, mainly in the field of health. The professor is an intellectual who executes a function of production and transmission of knowledge that fits a certain comprehension of the world and a certain organization of society<sup>(3)</sup>.

To Lourau<sup>(5)</sup> every intellectual is implied, and so every professor involved, in the processes of curriculum reform producing subjectivities that must be analyzed *in loco*.

The man, while planning his actions, acts consciously, maintaining a higher or lower autonomy depending on the degree of objectification of the labor process in which he is involved. In a traditional manufacturing activity, the process of labor is highly objectified, of limited autonomy, restricting the laborer to the full execution of the task. As a professor, this production has more autonomy, as seen by the interaction with the students, which is when necessities of an evaluation and continuous planning arise, guiding modifications, deepening and adapting content and methodologies from the concrete and immediate pedagogical situation.

It is indicated as a requirement from the new times that educators acquire long-term competencies, a complete domain of analytical methods, of multiple codes and languages for an intellectual qualification of a sufficient broad and abstract nature. These abilities are undeniably important for a continuous and efficient acquisition of certain specific knowledge, which respond the new and more elevated demands of the formation of professionals of health.

In this sense, we developed this research with the intention to understand how does institutionalization of new curricula of College courses in the field of health, here understood as collective projects, from the analysis of participation of professors who redeem an individualized/singular practice.

It is imperative that this social practice focus towards the production of multiple and temporary subjectivities, through unconscious (or not) mechanisms that produces creative singular production, as much as desired possibilities, in a social space of general and health formation, specifically decrystallizing the hard territorializations that deny the important differences that emancipate the subjects<sup>(4)</sup>.

### **The process of curricula transformations of the Medicine and Nursing Schools**

Before the transformations of the labor world and of educational policies, the specific knowledge rapidly become anachronistic when generated by the pure technical-operational training, which seems hegemonic in the courses in the field of health.

For many years, the demanded qualification to act in the formation of health professionals was based on practical experience, acquired in sanatoriums and/or hospitals, without taking into consideration the pedagogical aspects this activity requires. More recently, with the advances in the field of education of health in a worldwide scale, and with the crescent preoccupation with the quality of the formation acquired, many professorate capacity programs were developed and contemplated beyond the professional competency and methodological aspects, a higher demand in the field of professional and personal ethics, requirements of all professions in a contemporary world.

From the professor in the field of health, especially those from Medicine and Nursing Schools, the object of this study, it is expected a systematic reflection and analysis from the initial perceptions from the learners, stimulating them to comprehend through observation, to question and search for answers, evaluating their own developments and difficulties, respecting the learning rhythm of who is learning<sup>(5)</sup>.

For the development of this so-complex part, which involves the formation of life caretakers, above all those operating in the services that nowadays are part of the Brazilian Unified System of Health (SUS, in Portuguese), to the technical competency that needs to be aligned to the personal and professional ethics.

In the Brazilian National Education Plan, there are curricula instructions to College education as a strategy to overcome minimal curricula that stiffened the formation, aiming to achieve in these new curricula "the inseparability of teaching, researching and extending, the curriculum flexibility, the whole formation of the citizen, the interdisciplinarity and the articulation between theory and practice"<sup>(5)</sup>.

A curriculum is pervaded by relations of power, therefore a formulation and an implementation of curricula are not neutral, nor are a product of an aseptic process of elaboration and instrumentalization of techniques. They represent most of the times a synthetic result of a process of debates or, in many cases, a silent and hidden struggle between positioning, interests and social, political, cultural and pedagogical projects, which are conflicting, sometimes antagonistic. The process of definition of curricula policies is not univocal, nor it is free from contradictions and tensions.

Since the 1950's, there is a movement in Latin America of reformulating the curricula of health professionals towards the capacity of people able to overcome the problems of the system, which they act upon, and to proportionate better services to the general population.

The new undergraduate courses of Medicine, implemented after 1994, and the ones in Nursing, implemented after 1996, are under the crossings of many institutions that configure a formation in health that progressively transforms itself, even though stores many vestiges from old guides, such as the specialism, the individual professorial practice, the contentism, and so on.

## **METHOD**

To analyze the implications of the professors selected, we resorted to the use of the institutional analysis method, of a social-historical perspective that indirectly views the social change while criticizing the established order. This sort of analysis can be done through the study of documents and/or fieldtrips and demonstrate the relationships between men and institutions<sup>(6)</sup>.

According to Rodrigues, Leitão e Barros<sup>(7)</sup> this type of study can be useful in a descriptive point-of-view, but also can be restrictive when we compare in a capture of instituted forces the theory (institutional analysis on paper) and practice (institutional analysis on a certain terrain).

The nuances of the process of institutionalization of the formation in health that occurred in the courses of Medicine and Nursing of the Fluminense Federal University (UFF, in Portuguese) throughout the years were initially approached by the description of the history of its curricula construction and report analysis, as well the reviews of minutes and studies produced for the curricula reform proposals and we also used the observation registered in an institutional journal that belongs to the first author, who is a professor of the two courses and works both in the classroom and in the administrative political forums of the University.

We organized debates with groups of professors of both courses, using the technique of focal group, with an objective to discuss the common lived experiences and/or to deepen some reflections. These meetings were recorded and filmed under the consent of the participants. They constituted as important resources for the analysis done, as well as documents to record the memory of the lived institutionalization process<sup>(8,9)</sup>.

Aiming to deepen or clarify the points that deserved a more rigorous and/or individualized investigation and to obtain information that were not available in the focal group experience, the first author interviewed some specific actors. The semi-structured interview was the one which best fitted this study.

This research was approved by the Ethics in Research Committee of the Medical Sciences School of UNICAMP (São Paulo), under the registry #713/2004.

## RESULTS

The professors selected were asked to review their personal and professional life, revealing their positive or negative engagements with the formation of these professionals during the period of curricula reform. Their speeches started with their placement in the structure of the University, so subsequently later, to their professional background and a brief historical description of how their professorial identity was formed.

It is visible that in the majority of these tracks the exercise of professorial activity without an adequate preparation to execute the profession. The conception is that having a good technique it would be more than necessary to be a professor caused some dilemmas during the exercise of the professoriate, setting some of them down and in doubt if the learning process was satisfactory.

There is a diversity of participations in the reform process that goes from the engaging attitude during their undergraduate years, passing by the time some were still technicians in the College Hospital, to those that already had professorial professional status and participate from the primary times in these debates internally, or in it insert themselves bringing an external view of the necessity of a more humanized formation. The premise is that a certain profession that based the production of knowledge in a vast communication among the involved actors, it would have a higher availability for the collective construction of the reform project of curricula, but this is not the observed behavior. The majority of the interviewed participated actively in the established debate over the meetings that were designed to build new curricula, but on the other hand many of them reported the difficulty to make their colleagues aware of the need to use the social practice to the construction of those studies.

The background path of those who had their academic lives driven within the same University is filled with frustrations, as they weren't immediately approved on the exams they had taken and adding to that the fact they do not have publicity on their own papers, they criticize the anti-democratic management of some of the University's units.

The professors who are undergraduate in Nursing tried harder to get qualifications as a professor, as a result of an internal policy of the Unit, which congregates them and that had and continues having a project to gain respect among the academic atmosphere through a better academic achievement of its professorial body. The class organisms of this labor category also endorse this policy.

## **DISCUSSION**

The changes in human life that alter contents and meanings, values and behaviors, rhythms and senses, subjects and objectives challenge the everyday of professorial action. It is needed to evolve from the knowledge-transmitter professor to the learning-motivator one, who also motivates the learning through peer observation, the teamwork learning process, stirring the student to make his own researches and reports, and allows a continuous dialogue between the student, the professor and the society.

The interdisciplinarity as a dynamic principle of the University and as an enhancer of the structures of the State and of society requires an individual and collective professorial practice that is lived and shared. The acknowledgement of individual limitations and the opening to construct with the others happen when the interdisciplinary teamwork can be exercised.

In general, the professor of the field of health that is recruited to exercise this activity by his technical capacity understands that he must allow his students to be as a good professional as he is. As they execute their technical activities predominantly in hospital organizations, they face some difficulty to widen their views of health beyond the diseases treatment.

The teaching in University level also demands a mastery of the contents in the field of education. To be a competent professor in a University, some minimum requirements are recommended, as: the awareness of learning process, the responsibility of curriculum management, the importance of the inter-relationship among student-professor-society, and the basic theory and practice of educational technology, that are all beyond the

voluntarism. Usually the professors of the field of health consider this proximity as rather superficial and exert an isolated practice without knowing the relation between their subjects to the totality of the formation they are intending to do.

The professor has a vision of the world, the society, culture and education which conducts consciously or unconsciously the nature of his educational practice. It is fundamental that the contemporary University is permanently open to the debate from all forms of expression of many diverse philosophies which guides the professorial practices for the individual acting that is also individualizing and corporatist and needs to be permanently faced with how is the citizen practice and life nowadays.

To analyze the implications of the subjects, as René Lourau said, we would have to bring the object closer to the observer to the observed, to disrupt the academic debates and to say what is done and not done without the religious confession connotation<sup>(10)</sup>.

The personal and collective engagement of a professor in an educational project is done through his family and libidinal history, his past and actual positions over the relations of production and of class and of his socio-political project in action<sup>(11)</sup>.

The analysis of professorial implications with the new proposed curricula, in the University as an institution, starts with a team of professors, in the commission and demands of the Brazilian society for a new sort of professional, in the epistemology of the field of education and of health and on the articles produced about this practice.

The desire to be a professor mobilizes some professionals that look to insert themselves in this profession even before concluding their under graduation. Some professors awake for the teaching also by the induction that the academic organization does to feed back its professorial board, e.g. through Monitoring Programs.

The intimate familiarity that some professionals have with the academic atmosphere shapes their perception of the world to behavioral patterns that do not find correspondence in the labor market. Given to some conjectural difficulties and the organization of the labor market in health itself it is quite uncommon to observe doctors and nurses reflecting, debating and sharing the results of their daily practices



systematically. This situation gives a false impression that they are unable to do so and value more the analysis done among the academic institutions.

Some aspects of intimate order, like family members and affection, influence considerably the professional path previously planned. The affective-libidinal implications, added to the historical-professional factors, redirect also the daily life of these professors. The dimension that the social labor of the professor has in our society is frightening but is seductive at the same time to those who desire this profession. The values created and shared among the social, religious and family groups set up a view of the world and also the manner on which professors act professionally<sup>(11)</sup>.

The double insertion, in the teaching and in the labor lives, generates more critical professorial practices and in tune with both the teaching objectives and the treatment of the necessities of population health in general.

The University professor needs more elements than just the good will to show in practice what is a good professional attitude. There are some specific competences, which are required, besides the under graduation, masters and PhD certificates. The professorial practice involves the development of a knowledge that integrates the knowledge of a specific area with other areas, in a interdisciplinary manner, towards the social and community commitments, the capacity to lead their affection-emotional aspects, the ability to work in a team, to communicate with people in and out of their work environment, the adoption of ethic, political and social values, what is not always mentioned during the student's life in the University<sup>(12)</sup>.

The preparation to be a professor in the area of health is something that, besides the already mentioned competencies, also requires expertise in the prepare of the field aiming to reach the educational objectives without losing sight of the objectives related to the care of population health as a whole, which interacts with the learning scenarios of the academic community.

This process of reflection of the educational practice in health must be expanded. It all starts with a self-evaluation and continues with an evaluation placed by the whole academic community and the society in general. Some initiatives of this nature are

already in place in specific congresses of education of health, but yet in an extremely academic format. The recommended suggestions have produced timid results in the day-by-day of this practice.

The educational practice is a social and universal phenomenon, unrestricted to the classrooms. The actors that compose a certain society mediate it. The nature of communication and inter-relation between the subjects that perform the pedagogical practice can favor the continuous construction of interdisciplinary knowledge that promotes a more solidarity and critical social formation or that can maintain the authoritarian, elitist and individualist traces internalized in a daily basis in Western countries. The inter-relationship among the people includes the conflict, the dispute of ideological positions, and the negotiation. The denial or the escape from these confronts in the educational field is to bet in an incomplete, fictitious formation that does not prepare for the full exercise of citizenship that must be the tone even in more technologically advanced areas.

The necessity to be attentive to what goes in the labor market and the problems that come from those transformations demands from the University professor a position towards the new curricula, which merges the technical with the ethic. The neutral transmission of scientific content is part of an ingenuous conscience that does not fit the contemporary world. Every professor has a vision of men, of the world, of society, of culture and of education that sets his options and actions consciously or not in the construction of history.

The different formats of engagement or non-engagement with the curricula transformations in the courses of Medicine and Nursing at UFF elucidate the diversity of projects of society generated by each professor.

The curricular reform in Medicine always had little participation from the professors and from the technicians involved in their deliberative forums because of many reasons. For the majority of the professors of Medicine, the school had disqualified itself as many students had left the walls of the Hospital to get experience in other scenarios. There are

objective understandings about this reform and even some identification by these professors that negatively criticized this reformulation.

UFF is an endogenous organization, like the majority of Brazilian universities. Almost unanimously, the professors of the institution were alumni. In general, they were invited from former professors to stay as professors and in general were extremely dedicated to the exercise of their tasks. They acted for a long time only with their under graduation degrees.

For the majority of the professors interviewed, it was a natural consequence and even a certain desire to continue their professional activities in the same place of learning; for the others there was a necessity to oxygenate in other universities.

The conscience to be resistant to the instituting allows some of the professors to place a demand of counterproof, as to say, that the new curriculum is more adequate than the past one against those who defend the new curriculum of Medicine.

The change in pedagogical posture of a professor, from the transmitter to a co-creator of the knowledge, exposes more the professors who work in a smaller number of students. The mechanisms of dissimulation or hiding of the weaknesses of each one loses efficiency, generating a fear to lose power, especially on those that are not prepared to manage reflexively their own limitations.

The professorate practice has changed, mostly with those who were in graduation recently. That, however, is not wide spread among all professors. The professor of the hospital area is yet too focused into the transmission of the technique than of those of collective health. Despite this fact, the simultaneous transformation of the posture of the student forces the professor to self-criticize about the learning process and, as a consequence, generating a collective change in professorial pedagogy.

The conteudism, conception that supports the traditional school that is organized as teacher-centered is yet the tonic of the practice of these professors. They possess the knowledge and the authority of the transmission of knowledge, and the student is a mere receiver of the cultural tradition. The curriculum is understood as a rigid piece and the students are considered as a homogeneous group, without any concern with individual

characteristics, interests or desires from them. The evaluation embraces cognitive aspects, such as the acquisition of transmitted knowledge, supervising the memorization, and the exams have a central role and an end on itself. The norms are strictly stipulated, aiming to achieve discipline and order, and obedience is considered a virtue.

The relationship professor-student is evidently vertical, suppressing any affect or emotion that are considered as impeditive to a good learning process. The result expected from the educational action is the acquisition of a model of education already established, with little preoccupation to the process, in a clear example of "banking education"<sup>(12)</sup>.

It is a mechanistic view of the world, where the neutrality and the quantification took preponderant dimensions based on the dictation of modern science. The importance of instrumental reason over the other dimensions of human knowledge took intense proportions and banished from the academic world the possibility to work with the subjectivities and to privilege the ethic condition, creating deficits for a wider world view formation, which is more comprehensive and integrated perception of society.

The matter of remuneration of professorial labor was always a controversy since Ancient times. With the displacement of the importance of this humanist social actor to the ones of the economical area, a reduction of their remuneration simultaneously decayed, especially in Brazil.

Strategies as the search of a technical insertion into de labor market that some professors of the area of health do in order to cope with their personal expenses do not happen without a decay in the quality of their educational and research practices.

Capital has a preponderant place in the group of human activities and according to Solange L'Abbate, "... it is impossible to think about the actual world without the existence of money, even though many times it goes unnoticed, discreetly or even abstract..."<sup>(13)</sup>. It constitutes as a natural analyzer and as René Lourau said is one of the most sensible element of socioanalysis to allow to speak the institutions<sup>(14)</sup>.

The prevalent conception is that the now means to divide and classify, and that the scientific knowledge is separated from the knowledge constructed by the common sense

broadens the fragmentation of the thought and the sidedness of view of the world within the University.

Then, knowledge becomes a private property of a professor who has complete control of the relationship with the students, exacerbating the individualism that is also reinforced by the University structures and by the curricula organizations based on the ideas of collections of this knowledge.

As a recent review of the professorial role, it is then taken by one of the ingredients of the process of learning, and as such, a mediator between diverse knowledge, establishing a horizontality that bothers those used to the antique status to be recognized everywhere he passes as the only source of information.

The necessity to engage to the success of the process of curricular reformation of the course of Medicine generated an overwork that impeded the establishment of partnerships and provoked political and personal friction among the professors that were overimplicated within the process.

The change of the profile of a student that is more participative in the process of learning generates a certain fear in the professors to connect and consequently insecurity in changing their posture to be co-responsible in the process of learning.

It was not observed from the interviewed professors an organic participation in the discussions that proposed to transform the curricula of Nursing and Medicine, even when the forums were open and publicized.

The extinction of some chairs, existent during the military dictatorship years, aimed to integrate the units and to establish, among others, the principle of co-responsibility of all the members of the department by the teaching, research and extension. On the other hand, we observe that the integration between the processes of many departments face with great difficulty the negotiation of the workload of subjects in both curricular reformation, and personal objectives responsible for each chair are more valued than the interdisciplinarity.

Throughout the years the reductions in financial resources for both sectors of health and education affected general work conditions in public hospitals with significant loss of

professionals and material resources. Added to that the gradual salary loss of University professors provoked an exodus of those professionals from the Nursery units to a point they were limited from their teaching activities based on the theory.

The traditional role of the professor-transmitter does not fit into the actual process of learning that needs to be co-managed. A motivated professor, who also motivates the development of the student, needs to establish a relation of proximity, considering the learner as able to take responsibility for his own professional formation.

## **FINAL CONSIDERATIONS**

In general, the act of research completes itself, according to René Lourau, in the processing of the coded text by the expectative, prescription and the tolerance of the cultural-scientific-editorial institution, leaving aside the analysis of the implications, since only the result matters<sup>(10)</sup>. The shameful extra-text is disregarded, as it takes to the analysis of the situation of the research that occurs in a surreal plan and it distances itself from the social-historic reality, the common sense.

Here we address over this analysis since an ideological place where professors circulate is not well known and conscious, having as a consequence a supposed neutrality in their dissonant action with the plurality that belongs to the human condition<sup>(15)</sup>.

Professors are not gods, nor machines, and as a consequence, they are not homogeneous in their attitudes. According to Mourão<sup>(15)</sup>, "prescriptive curricula reforms that do not foresee spaces of constant debates are innocuous to reach proposed objectives to the formation of new professional profiles and tend to evade daily by the social actors involved", as we observed on the proposed analysis.

The topic of curricula reform in health is quite delicate, and until today, difficult to be discussed among the involved professors, especially if there isn't a previous idea of who participates in these debates. Internal disputes of power are implicated, as well the

ability to criticize the development of their pairs, which is not so debated or not so truly declared.

The lack of pedagogical evaluation evidenced by the professors of the same department or many departments let on the contradiction between what is present in the curricular propositions of interdisciplinary formation, and then, of collective construction that is the individualized performance of every professor in their everyday life with their students.

The incorporation of a way of doing in a group is what the new curricula require, demand a comprehension of the process of inherent subjectivity to all subjects that participate in this formation, as to say, professors, students, technicians or administrative personnel.

The comprehension that all are co-constructors of knowledge still escapes from the whole of the responsible community by the formation of the professionals of health and that generates some nuisance. There are disputes between the professorial subgroups and each one wants to be dominant in its way to manage the formation, denying this necessary production of collective subjectivity.

The refusal of some professors to our invitation for a reflection about their practices leads us to the reflection for the embedded suffering of this action that some courageous ones are willing to surpass.

The participation of professors favorable or contrary to the approved curricular proposals, defenders of more traditional or more participative pedagogies in this study, reveals the importance to maintain a constant debate, despite the diverging positions, as an engagement with purpose of improvement of the public University.

This availability to participate reveals somehow a tendency, since it falls especially over those that managed the reform process of the last two analyzed curricula.

The resistance, considered as a natural analyzer from this institution in the beginning of this study, is identified in all segments and let arise the separatist notion that induces it.

The fear of the power of destruction that is attributed to the other confirms the dissolution of the circular framework that does not contemplate this necessary oxygenation that the other can give towards the hermetic, homogeneous views.

The lived experience by many professors during the military dictatorship has become a benchmark for the construction of a different society, even among those who were not politicized.

The professionals of education in health dominate the content of their own disciplinary fields, but the opposite is not always true when referring to the pedagogical processes and the conditions to teach. They are not prepared to be professors, nor are demanded in teaching abilities during their hiring process. Nowadays, it is more valued their development as individual researchers than of a constructor of shared knowledge, divided with the other members of Academia and with the society as a whole.

In the process of learning there are difficulties to approximate the theory from the practice, prevailing the transmission of contents already consolidated, instead of being discussed from the activities of research of professors and students.

The recent process of curricula reforms here approached are, however, in a general sense, innovative as they propose pedagogical options that aim to a higher integration between theory and practice, the acting of interdisciplinarity and a development of a better bond between students and the practice of services.

The professors, main actors of any implementation of process of curricular reform, have taken a position and divided themselves in many groups. These professors that are engaged in curricular innovation are, in general, unsatisfied with the previous curriculum, or especially, unsatisfied with the most traditional teaching methods. There are also those who adhere to the curricula changes proposed by political alignment with the leaders that are implementing the reform. On the other side, there are professors who do not stick with it to resist the changes proposed, which reveals an attitude sometimes quite sincere that there is a belief the already instituted curriculum is better, more adequate than the new, proposed one, and the professional is also more used to a more traditional teaching method and feels afraid or uneasiness to change. The uncertainty tends to emphasize itself, insofar as the reform proposed the integration of contents and even of subjects, which means in many times, the loss or reduction of space and workload. There are also some professors that decide not do adhere because they belong



to a certain group politically opposed to the direction that is proposing the reform. Those subjects, depending on the amount of energy used while acting, can harm and create difficulties to the process of reform, once these professionals enjoy autonomy, especially in the public University, where they are still seen as the almost absolute lord of the classroom.

It is evident these two professorial polar groups will interact with other professors in intermediate positions or with those who are almost completely uninterested. Therefore, professors and the other subjects also involved in the whole process of curricular reform, such as those who occupy positions of management in Colleges and in superior instances of the University and, logically, the student body, technicians and administrative personnel, are also involved positively or negatively with the whole process.

When declaring these many positions, any proposal of curricular reform becomes a strong analyzer as it reveals many aspects that, without its occurrence, they would be kept hidden or, in a certain way, disguised. This is how the contradictions and resistances are revealed and, even though they are present and most of the times well consolidated, they do not show up so clearly in the set of involved actors. Besides that, such proposals of change can act as analyzers of broaden and more complex dimensions of University politics related to the allocation of funds for human and material resources or to new guidelines for the University, revealing the dimensions of the University politics of a certain government.

The professors implicated with the curricula reform are in general stricken to a certain blindness considering everything the reform proposes is excellent and the past must be denied. Because they stick with and believe in the reform, such professors can get overloaded with tasks. This ample form of adherence also makes it difficult, because the gaps are seen only when they take the responsibility the others refused to do, for example, to develop the interdisciplinary work or they ended up opening themselves too much to many students' groups and at the same time, as there isn't enough amount of professors as recommended by the new approved curricula.

It is known that working under the perspective of the interdisciplinarity and the use of innovative and participative methods of teaching-learning demands great effort, time, patience and sometimes brings the necessity to appeal to other courses and informative seminars, not always available by the policies of the University's organization.

In a final analysis, the curricular reform is much more than a reorganization of subjects, contents and pedagogical techniques and it is fundamental to an improvement to the health treatment of the population.

It is correct to say that the interviewed professors, besides their different positions towards the reform, are well implicated with the defense of the public University, which, based on our opinion, is essential to the construction of a fairer and more solidarity society.

## REFERENCES

1. Ribeiro D. Universidade de Brasília. Revista Brasileira de Estudos Pedagógicos. 1961; 36(83):161-230.
2. Goergen P. A Crise de identidade na universidade moderna. In: Santos Filho JC, Moraes SE, org. Escola e Universidade na Pós-Modernidade. São Paulo: Mercado das Letras, FAPESP; 2000. p. 101-63
3. Lourau R. Le lapsus des intellectuelles. Toulouse: Privat; 1978.
4. Rocha T, Abrahão AL inserção das tecnologias leves, leves duras e duras no gerenciamento do cuidado pelos enfermeiros de um hospital universitário. Online Braz J Nurs [on line]. 2007 [ acesso em 30 de agosto de 2007];6(2). Disponível em: <http://www.uff.br/objnursing/index.php/nursing/articles/view/j.1676-4285.2007.1019/214>
5. Oliveira GS, Koifman L. Integralidade do currículo de medicina: inovar/transformar, um desafio para o processo de formação. In: Marins JJN, Rego S, Lampert JB, Araújo JGC. Educação Médica em transformação: instrumentos para a construção de novas realidades. São Paulo: Hucitec; Rio de Janeiro: Abem; 2004. p.143-64.
6. Hess R, Savoye A. L`Analyse Institutionnelle. 2ª ed. Paris: PUF; 1993.
7. Rodrigues HBC, Leitão MBS, Barros RDB, org. Grupos e instituições em análise. 2ª ed. Rio de Janeiro: Record/Rosas dos Tempos; 2000.

8. Hegel GWF. Vida e Obra. Coleção Os Pensadores. Coordenação Editorial: Janice Florido. São Paulo: Editora Nova Cultural. 1999.
9. Westphal MF, Bógus CM, Faria MM. Grupos focais: experiências precursoras do uso da técnica em programas educativos em saúde no Brasil, Boletim de la Oficina Sanitaria Panamericana 1996. Washington: 120(6):472-82.
10. Altoé S. org. René Lourau: analista institucional em tempo integral. São Paulo: HUCITEC; 2004.
11. Barbier R. O conceito de "implicação" na pesquisa-ação em ciências humanas. In: Pesquisa-ação na instituição educativa. Rio de Janeiro: Zahar; 1985. p. 105-28
12. Freire P. Pedagogia do oprimido. 17ª.ed. Rio de Janeiro: Paz e Terra; 1986.
13. L'Abbate S. L'argent, un analyseur de l'institution médico-sociale au Brésil. Les Cahiers de L'implication. Saint Denis: Université Paris 8; 5. 2001/2002. p. 37-69.
14. Lourau R. La clé des champs. Paris: Anthropos; 1997.
15. Mourão LC. O professor e a instituição formação em saúde: implicações nas transformações curriculares [Tese] Campinas (SP): Universidade Estadual de Campinas; 2006

#### **CONTRIBUTION OF THE AUTHORS**

Concept and design: Lucia Cardoso Mourão, Solange L'Abbate. Bibliographical research: Lucia Cardoso Mourão, Solange L'Abbate. Data collection: Lucia Cardoso Mourão, Solange L'Abbate. Analysis and interpretation: Lucia Cardoso Mourão, Solange L'Abbate. Critical review and final approval of the article: Lucia Cardoso Mourão, Solange L'Abbate.