







# 03

## Promotion of healthy child and youth development: experiences from an extension project at a municipal school in Belo Horizonte

### EXPERIENCE REPORT

### ABSTRACT

ISADORA SOARES BICALHO GARCIA<sup>1</sup> , RAQUEL SALDANHA BUENO<sup>1</sup> , MARIA EDUARDA CAETANO BATISTA DE PAIVA<sup>1</sup> , NATHÁLIA LETÍCIA BORGES DE MATOS<sup>1</sup> , ANA CAROLINA LIMA VIEIRA<sup>1</sup> , VALQUÍRIA FERNANDES MARQUES VIEIRA<sup>1</sup> 

<sup>1</sup> FACULDADE DE CIÊNCIAS MÉDICAS DE MINAS GERAIS, BELO HORIZONTE, MINAS GERAIS, BRASIL<sup>1</sup>.

CORRESPONDING AUTHOR: ALAMEDA EZEQUIEL DIAS, 275. 30130-110 VALQUIRIA.MARQUES@CIENCIASMEDICASMG.EDU.BR

**Introduction:** Childhood and adolescence are periods of intense development and growth that deserve constant vigilance. Despite the importance of healthy development, it is not always guaranteed due to a series of issues in the country. **Objective:** To describe the experience and health education initiatives carried out by Medical students conducting playful pedagogical activities for children in a public educational institution located in Belo Horizonte, Minas Gerais. **Experience Report:** A descriptive study, of the experience report type, of an extension project developed in a municipal school in a region with high social vulnerability in Belo Horizonte. The project participants were 349 children aged 3 to 13 years old. The activities were conducted in the form of workshops, with themes including Hygiene and Self-care, Oral Health, Emotions, Accident Prevention, and Sex Education. Throughout the five workshops, the children showed receptiveness, engagement, and interest in most activities. During the project execution, the addressed topics and methodological strategies of the activities were outlined based on the observation of the extensionists and suggestions from school professionals, considering the progress of interventions and students' demands. **Final Considerations:** Health education is an effective tool in promoting changes in the health of children and adolescents in vulnerable regions.

**Keywords:** Child Development; Community-Institution Relations; Health Promotion.

## INTRODUCTION

Childhood and adolescence are periods of intense development and growth that deserve constant monitoring and interventions<sup>1</sup>. Adolescence is seen as a transitional period marked by new and complex experiences of physical and socioemotional maturation<sup>2</sup>. However, despite the importance of healthy child and adolescent development, it is not always guaranteed due to various national issues such as the absence or scarcity of sexual education in schools, a high rate of morbidity and mortality due to domestic accidents, a significant prevalence of mental illnesses, and inadequate oral and bodily hygiene in children and adolescents, among other factors<sup>3,4,5</sup>.

In the face of these social challenges, multiple interventions can be applied to address these issues. University extension actions stands out as a potential health-promoting agent, aligning with the social mission of the university and meeting the community's demands<sup>6</sup>. In accordance with the New National Curricular Guidelines<sup>7</sup>, the academic training of future health professionals is based on three inseparable pillars: teaching, research, and extension. Extension, a fundamental part of this triad, is a dynamic educational process that integrates teaching and research to facilitate the interaction and translation of knowledge between the university and society<sup>8,9</sup>. In the academic context, extension is essential for the formation of more competent and humanized professionals aligned with the comprehensiveness of the Unified

Health System (Sistema Único de Saúde – sus). In terms of social benefits, extension promotes active participation, group discussion, and reflection, stimulating debates on good health practices. Moreover, considering that individuals served in the community can potentially disseminate acquired knowledge, extension contributes to empowering health-promoting action multipliers<sup>8</sup>.

Promoting actions for child and adolescent development can minimize, to the extent possible, the adversities stemming from poverty, neglect, abandonment, and violence, providing children with more opportunities for learning, physical growth, and good health<sup>6</sup>. Furthermore, the school is one of the main life contexts for children and adolescents, exposing its relevant psychosocial nature that should be explored as a way of health promotion and education<sup>3</sup>.

It is also essential to contextualize the importance of the National Health Promotion Policy (Programa Nacional de Promoção de Saúde–PNPS) and highlight intersectorality as a commitment of the health sector. PNPS aims to promote health and prevent diseases, recognizing that health promotion actions are not limited to the medical sphere but also involve social, economic, and environmental determinants. In this sense, intersectorality becomes essential, promoting collaboration between different sectors such as health, education, social assistance and the environment to address public health challenges in an integrated manner. Integrating these policies into initiatives like university extension enhances the impact of actions, strengthening the promotion of child and adolescent

health and contributing to their comprehensive development<sup>10</sup>.

Therefore, considering the transformative potential of extension and the complexity of the reality of public childhood education in Brazil, the initiative “Medical Sciences in the Community: Health in Schools” was developed to contribute to the promotion of healthy child and adolescent development in biopsychosocial spheres. The objective of this article is to describe the experiences and health education actions carried out by medical students while conducting pedagogical activities for children in a public educational institution located in Belo Horizonte, Minas Gerais.

## EXPERIENCE REPORT

In the second semester of 2022, a meeting took place involving extensionists, a faculty member from a Higher Education Institution, the school coordinator and professionals from the Basic Health Unit in the assigned area of a municipal preschool located in the southeast region of Belo Horizonte, Minas Gerais. The school caters to 349 children aged 3 to 13, divided as follows: three kindergarten classes, three 3rd-grade classes, two 4th-grade classes, two 5th-grade classes and one Integrated class (full-day school regime).

During this meeting, the days and times for activities were agreed upon, along with the themes to be addressed for each age group based on the perceived needs of the school professionals. Additionally, suggestions for methodological strategies that would work best with each class were discussed. The selected themes included: 1) Hygiene and Self-care; 2)

Oral Health; 3) Emotions; 4) Accident Prevention; and 5) Sexual Education. Furthermore, a suggestion box was placed in the school for students to anonymously write down questions about the topic discussed during the week, which the extensionists would collect and address in the next meeting.

All chosen topics were addressed in the form of workshops. Learning workshops represent an active teaching methodology that stands out in the current educational context. They provide an environment for interaction and knowledge sharing, following democratic and participatory principles. These workshops promote the collective construction of knowledge and overcome the division between theory and practice, integrating education and life. Participants learn while engaging in activities together, develop social interaction skills, and promote interdisciplinary learning. Both students and educators become learners in this process, and knowledge is collaboratively co-constructed, reflecting a balanced and transformative approach to education<sup>11</sup>.

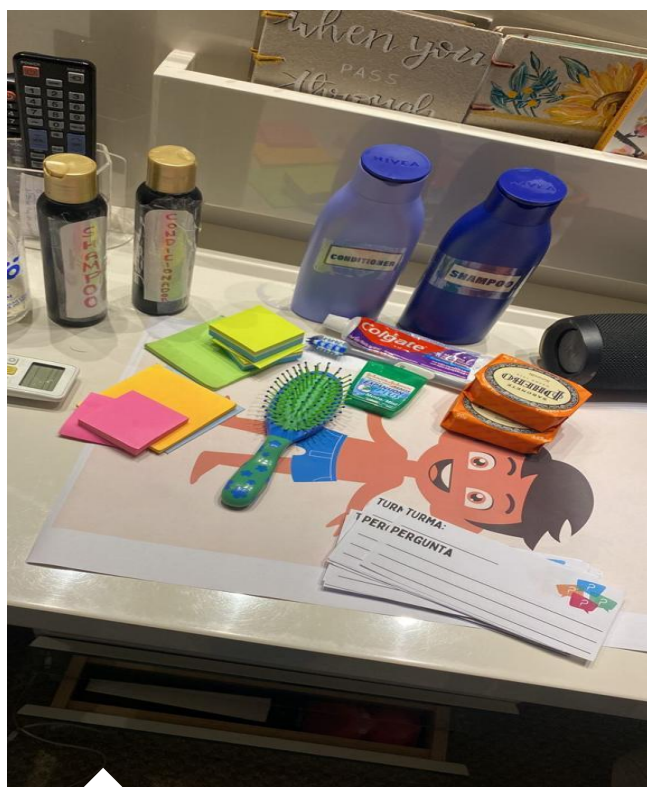
The workshops were systematized as follows:

### Hygiene and Self-care Workshop

For participants from the 3rd grade and Integrated class, the activity began with a mime about hygiene actions. Initially, the materials to be used were separated and four volunteers were asked to participate in the mime. Each volunteer mimicked a hygiene step: washing hair, body, feet and ears.

After miming, the class had to identify what was being represented. During the activity, they had the necessary objects at their disposal: shampoo, conditioner, and soap (Figure 1). Participants were asked if anyone would do any step differently and if they would add anything to their peer's mime. Explanations about the hygiene steps and how to perform them were provided between each mime.

Finally, two dolls, one of each gender, were affixed to the board, and the children exemplified hygiene actions on them.



**FIGURE 1. MATERIALS USED IN THE HYGIENE AND SELF-CARE WORKSHOP.**  
SOURCE: AUTHORS.

For 4th-grade participants, the dynamics allowed the class to interact with dolls attached to the boards, indicating which hygiene items were used on each body part. In this way, participants wrote on the board which hygiene items they used for the designated body part. All participants were invited to contribute their own experiences and knowledge about hygiene.

Additionally, the traffic light touch dynamic was applied with three signs stating, “Can touch” “Attention! Be careful” and “Cannot touch”, where the participant could identify body parts that others can or cannot touch<sup>12,13</sup>. Finally, a brief group discussion on consent was conducted.

Participants showed great involvement in the workshop, facilitating strong interaction between them and the extensionists, creating a bond that facilitated the workshops in the following weeks. When asked about what hygiene is and its importance, the children responded with joy and participated actively. Many participants volunteered to mime and showed a keen interest in contributing to the poster demonstration.

It became evident that visual and colorful elements should be used in the upcoming dynamics. A positive surprise was the maturity of the participants in approaching intimate body parts and the touch traffic light.

The main challenge during the Hygiene and Self-care workshop was with the Early Childhood Education classes, composed of children aged 3 to 5. In this age group, the need to plan the workshops differently became evident. It was clear that more playful and

interactive strategies were essential to capture the attention of children in this age group. It is worth noting that the highlight of the dynamics with Early Childhood Education was the use of sound resources, notably the use of the children's song "Mundo Bitá-Bom banho" available on YouTube<sup>14</sup>.

At the end of the activity, the students, acting as facilitators of the action, posed some questions about the topics discussed and practiced in the workshop, aiming to assess the effectiveness in achieving the purpose of knowledge-sharing. The responses, promptly offered and infused with enthusiasm, reflect the success of the Hygiene workshop. The outcomes of this educational action manifested in the following results: the grasp of the importance of maintaining proper personal hygiene; mastery of the appropriate techniques to promote hygiene and self-care; active participation in conceived dynamics; and understanding regarding the significance of preventing sexual violence, coupled with the inherent responsibility for self-care.

### Dental Health Workshop

The second topic addressed was Oral Health. Despite the widespread dissemination of information regarding the importance of oral hygiene, some aspects of this subject need to be emphasized, such as the use of dental floss, the amount of toothpaste on the brush and the relationship between sugar and dental caries<sup>15</sup>.

For the 3rd, 4th, and 5th grades, as well as the Integrated School, the dynamics were conducted using the following materials: a mouth model made by one of the college students, a toothbrush, string to represent dental floss, and toothpaste (Figure 2). To start, participants were questioned about the importance of brushing their teeth, whether they brushed correctly, and the meaning of dental caries. Participants demonstrated their knowledge, mentioning brushing teeth for fresh breath and describing cavities as "little creatures" or "black spots" on teeth.

With the mouth model fixed to the board, the brushing steps were demonstrated, and participants were invited to replicate what they learned on the model. This ensured that the teachings had been assimilated, and any errors in brushing techniques were corrected. Finally, the discussion covered the minimum number of required daily brushings and the control of sweets intake, a crucial factor in dental caries prevention<sup>15</sup>.

For early childhood education, in addition to the materials used in other classes, the dynamic was developed with the help of plush toys-toothpaste and a puppet with a mouth. These objects were essential to capture children's attention and enhance their involvement in the proposed activity.

In all school classrooms, two posters on oral health were displayed, one explaining brushing and the other illustrating the correct use of dental floss. It's worth noting that for this workshop, support was obtained from an Oral Health Technician from the neighborhood Health Center, who provided toothbrushes for

students (distributed during the workshop) and applied fluoride.



**FIGURE 2. EXTENSIONISTS WITH MATERIALS USED FOR THE DENTAL HEALTH WORKSHOP.**  
SOURCE: AUTHORS.

After the satisfactory results with the use of visual elements in the previous workshop, it became clear that the use of the “Colored Mouth” in the Oral Health workshop was equally interesting. Almost all partici-

pants showed extreme interest and eagerness to actively contribute to the dynamics.

One of the main points of the Oral Health workshop was the realization that many children did not practice proper oral hygiene, due to lack of resources or knowledge. This increased the participants’ intrigue regarding the questions and information provided. At the end of the workshop, some participants re-

requested more than one toothbrush to take home for their families, stating that they would provide them to their siblings.

From the second workshop, it was noticed that the bond between the extensionists and the participants became stronger. Again, questions about the topic were asked to the class after the activity to verify if the subject had been effectively addressed. In this workshop, the following results were obtained: understanding the importance of maintaining good oral hygiene; knowledge of the correct ways to promote oral hygiene; and a high level of engagement, enthusiasm and active participation from the children during the activity.

### Emotions Workshop

The Emotions workshop was the third workshop conducted. The topic was introduced with questions like “What are emotions?” and “How do you deal with emotions?” Using printed emojis, the five primary emotions were presented: Joy, fear, sadness, disgust, and anger. Analogies were made to explain emotions: “Our body is like the sky, something permanent, while emotions are like clouds, meaning they have different shapes and can be more or less present depending on the moment.”

After the introduction, participants received a table titled “Monitoring and Understanding My Emotions,” with columns for “Feeling,” “What caused it,” “How I felt in my body,” and “How I dealt with it.” Participants were instructed to fill in the table based on situations they had experienced or would encounter during the

week. The table was an important tool for participants to not only identify their feelings but also find ways to cope with certain situations.

For the preschool class, the dynamic was different. It was chosen to discuss emotions using, in addition to emojis, the children’s song “Cara de quê?” available on YouTube. The discussion started similarly to the other classes, through dialogue, presenting the image and asking participants what it meant. Finally, the song was played—it presents each emotion and instructs those watching to imitate the expressions—and the children’s participation was observed. This audiovisual resource was crucial for the active participation of the students.

The Emotions workshop was the dynamic in which the extensionists had more room for dialogue with the 3rd, 4th, and 5th-grade classes. The brief introduction to the topic and the metaphor of emotions as clouds captured the participants’ attention, who seemed to understand the analogy. This allowed them to feel comfortable talking about their own emotions and how they react, even when admitting negative reactions, such as getting nervous and attacking a classmate. The open dialogue made the children reflect on how they handle their own emotions and those of their family and community members.

With the 3rd-grade children, the use of drawings representing various emotions was a playful way to address the topic. However, the use of the table was not very effective, as some 8-9-year-old children did not understand the purpose or did not know how to write.

At the end of the activity, it was noted that reinforcing the importance of paying attention to classmates' emotions and asking for or offering help when needed was also a subject of reflection and debate. In one of the classes, two 3rd-grade participants used the workshop to talk about how they treated each other and opened up about their feelings regarding friendship.

The dynamics of Emotions in Early Childhood Education and the Integrated School were different from the other classes due to the sound resource used but they were equally successful. The children were very happy and excited about the use of music and participated by dancing and singing along with the extensionists<sup>16</sup>.

### Accident Prevention Workshop

The fourth workshop focused on Accident Prevention and was developed for the 3rd grade and the Preschool class, representing 8-9 years and 3-5 years, respectively. Domestic accidents are the leading cause of mortality, temporary disability, and permanent disability in children, and most accidents are preventable<sup>17</sup>. Posters with representations of risk situations—choking, drowning, falling, and burning—were used, along with a doll to teach the choking maneuver and PET bottles with colored liquid (a mixture of water and gelatin powder) to symbolize chem-

icals, as they usually have attractive coloring and can be improperly handled by children.

In the 3rd grade, the Heimlich maneuver was taught—a simple technique that does not require material or instruments, where pressure is applied to the diaphragm to expel the air from the lungs and thus clear the airways—by dividing the class into groups so that participants could practice the maneuver<sup>18</sup>. Additionally, signs of choking, such as bluish coloration in the body's extremities and lips, were taught. Everyday situations that could lead to accidents were also discussed: using knives, being close to the stove, and contact with cleaning products. Finally, emphasis was given to methods of preventing such domestic accidents.

For the Preschool class, the dynamic was similar, excluding the choking maneuver. The material that generated the most curiosity was the bottle of colored liquid. It was explained that, despite appearing harmless, cleaning products can be toxic, and therefore unknown substances should not be ingested.

During the workshop with the 3rd-grade classes, it was observed that they understood the choking warning signs and were able to perform the choking maneuver on stuffed animals<sup>18</sup>. In Early Childhood Education, the use of bottles with colored liquid proved to be particularly interesting. Some children participated, claiming that the bottles contained juice, and they were surprised by the explanation that such liquids should not be ingested. Children aged 3 to 5 were also able to correctly identify which accidents were depicted in each poster drawing (Figure 3).



FIGURE 3. POSTER WITH ACCIDENT SITUATIONS CREATED BY THE EXTENSIONISTS. SOURCE: AUTHORS.

### Sexual Education Workshop

Actions in the field of sexual education in Brazilian schools are still guided by moral and pedagogical treatment, highlighting the need for advances in this area<sup>19</sup>. The Sexual Education workshop was conducted only with the 5th graders, aged 11 to 13. To conduct it, internal and external menstrual pads were used,

material containing images of genital organs provided by the Health Center, and an anatomical model of the female pelvis provided by the College. Specifically for these dynamics, the teachers left the classrooms so that the participants would feel less embarrassed to express possible doubts.

The workshop began with a focus on girls, addressing menstruation—what it is, the average age of menarche, what Premenstrual Tension (PMS) is, and how to use a pad. To make the explanations more didactic, the analogy was used that the female body prepares a “bed” (endometrium) every month to accommodate an embryo, and if there is no embryo formation, the “bed” is not needed and is eliminated from the body in the form of bleeding. The phases of the menstrual cycle were described through a timeline drawn on the chalkboard.

The model of the female pelvis was fundamental and useful for explaining female anatomy and how to use internal pads. Thus, participants could perceive, not only through images but also through hands-on experience, the main parts of the body related to menstruation (Figure 4).

With a focus on boys, ejaculation (what it is and how it occurs), how erections occur, and what semen is composed of were addressed. In addition, the topic of nocturnal emissions was discussed to clarify that it is a physiological and common occurrence in the age range of 9 to 13 years.

Despite focusing separately on girls and boys, explanations were provided to all participants since many

were not familiar with what happens to a peer of the opposite sex.



**FIGURE 4. EXTENSIONISTS DURING THE THEORETICAL EXPOSITION WITH THE MODEL OF THE FEMALE PELVIS USED IN THE SEXUAL EDUCATION WORKSHOP.**

**SOURCE: AUTHORS.**

This workshop was exclusively conducted with 5th-grade participants. The initial conception contemplated segregating the class by gender, aiming to provide a conducive environment for children to express their doubts comfortably. It was evident that the workshop achieved satisfactory results, even without gender segregation. This was attributed to the serious presentation of the topic, without con-

cessions to jokes, which encouraged participants to approach it with due seriousness.

Surprisingly, the absence of gender distinction in the activity not only proved feasible but also extremely productive. The success of the workshop can be precisely attributed to the assertive approach to the topic, which prompted participants to engage more diligently. Notable curiosity was evident among both girls and boys throughout all moments of the dynamics. It is relevant to emphasize that, despite the lack of gender segregation, all participants contributed equally actively, demonstrating the effectiveness of the adopted approach and the equitable participation of all involved.

## THEORETICAL REFLECTIONS

With the purpose of conducting a situational diagnosis and identifying the community's needs in question, a thorough analysis was carried out in collaboration with the coordination and the teacher. It covered the institution's global dynamics, its organizational modalities, and the building's infrastructure. In addition, interactions between children and school teachers were examined, highlighting the notable charisma, attention, and receptivity of most participants.

At this stage, the following characteristics were identified: the building's structure is adequately sized to accommodate both the number of students and teachers, being spacious and well-distributed, capable of meeting their demands and requirements. The building features open and wooded spaces designed to provide moments of recreation, sports activities, and

leisure. Additionally, there is an environment with a primary focus on promoting the students' value, evidenced by the predominantly child-created drawings and phrases decorating the space, highlighting their skills. Furthermore, the institution has a library equipped with a wide range of books and study resources, playing a fundamental role in children's educational formation.

According to the National Common Curricular Base (BNCC), playfulness and learning are inseparable. Thus, the extensionists opted for activities that followed this premise established by the BNCC. They also used the "touch traffic light" as an illustrative method to indicate which parts of the body were allowed to be touched by others and which places require attention when touched by strangers. Participants showed awareness of the topic and did not display shyness<sup>19,20,21</sup>.

In the following week, with the oral health theme, colorful mouth cutouts were made as a more attractive illustrative form so that participants could understand how to brush their teeth properly. This exercise was fundamental, as studies conducted in Brazilian locations corroborate the benefits of oral health promotion actions in schools. This is because the results reveal better oral health conditions—lower rates of cavities, dental trauma, and periodontal conditions—in schools that implement these actions<sup>15</sup>.

In this context, extension facilitators concluded that addressing the dissemination of information about oral hygiene is extremely relevant and can, in the long run, result in a significant reduction in dental prob-

lems among participants. Additionally, the presence of the Oral Health Technician, a local health professional, enriched the activity with detailed explanations about fluoride and providing toothbrushes distributed to everyone. The intention was to allow everyone to put into practice the knowledge acquired during the educational session in their homes.

A relevant dynamic addressed was the accidents prevention, using playful techniques and visual elements such as objects, images, and mimics. The focus was on preventing domestic accidents. Illustrative images were used to highlight possible risk situations, allowing students to identify danger factors in each context. The use of plastic bottles with colored liquids simulating improperly stored cleaning materials was a visual strategy adopted to alert about the dangers associated with this practice. Then, students shared their perceptions about the most appropriate behaviors in each situation. The extensionists led the discussion, guiding on the best approaches, correcting misconceptions, and clarifying doubts.

Regarding the encountered difficulties, the extensionists faced resistance when addressing the topic of sexuality due to its considered "taboo" nature. Besides being a complex issue, there was a need to translate it into an accessible language. Despite being prepared with in-depth studies on the subject and adopting interactive forms of communication, they expressed insecurities due to the relative lack of exploration of the topic in school. Additionally, the group of extensionists was exclusively composed of women, generating a perception of limitation, considering that the

absence of a male extensionist could hinder conversations with male students.

Faced with this urgent need to address sexuality-related issues in the institution, strategies were implemented to clarify all participants' doubts without restrictions. The anonymous question technique was adopted, allowing each participant to write their questions discreetly on paper. The following week, all questions were answered without exposing the participants' identities. Then, a brief explanation was given, using images and illustrative objects to address the content of sexuality. Surprisingly, participants felt comfortable during the dialogue, asking various questions. This outcome highlights the importance of addressing sexuality in an interactive and strategic manner in the school environment, something that is not yet widely and effectively implemented nationally<sup>19</sup>.

Approaching topics such as mental health and emotions proved challenging, as many children reported experiencing depressive and anxious episodes daily. These problems, associated with adverse family relationships, low self-esteem, and the discovery of sexuality, were significant demands. The response and guidance in the face of this considerable amount of psychosomatic suffering cases were complex.

It is important to highlight that the COVID-19 pandemic had a particularly negative impact on children's socioemotional development. Stressful factors such as social distancing, school closures, economic crises, domestic violence, and pandemic-related uncertainty contributed to the increased prevalence of psychosomatic problems. It becomes essential for schools,

families, and mental health specialists to be aware of these impacts, collaborating to provide the necessary support and essential resources to help children face challenges and recover emotionally<sup>22</sup>.

To overcome this challenge, an illustrative emoji dynamic was carried out so that children could identify their emotions and understand them. The goal was to create space for more serious conversations about the topic and explain what to do and who to turn to in situations of distress. The issue of turning to teachers and the school coordinator was addressed since, many times, family members are a source of distress for students. Such indications reinforce what is pointed out in the literature regarding the importance of teachers and the school in the child and adolescent growth<sup>3</sup>. Authors suggest that creating coping techniques for emotional lability and aggression situations in children, such as the establishment of visual resources and more effective dialogue, is extremely beneficial for promoting children's mental health<sup>12,22</sup>.

The project faced its main challenge in the need to adapt the language to the various age groups, considering the varied cognitive development of students in each class. This diversity made it difficult to formulate a common strategy for the workshops. Furthermore, adapting medical terminology to accessible language to laypeople was an additional obstacle, requiring care in the elaboration and conduct of activities. It is worth noting that the project could have benefited from interventions directed at families and caregivers, which proved to be a gap. The activities were restricted to the school environment, a limitation to be considered.

Despite these weaknesses, the project seems to have positively impacted participants' learning regarding the proposed health education. Students showed positive anticipation each week, eagerly awaiting new topics. Moreover, they exhibited deep involvement in the learning process, taking the information home and applying it in their daily lives. The experiences shared by students after the interventions, as well as the teachers' reports of observed positive behavioral changes, attest to the project's effectiveness. Playful approaches, such as the use of music, images, and mimics, proved to be particularly beneficial, especially for children in early childhood education.

## FINAL CONSIDERATIONS

This experience report aims to address reflections and observations regarding the strengths and weaknesses of the actions carried out in the university extension project at a municipal school in Belo Horizonte, Minas Gerais. Among the strengths of the project, the following stood out: (1) the situational diagnosis of the school, crucial for the development of a schedule of activities tailored to the demands of students and teachers; (2) the possibility of addressing taboo subjects in a playful and interactive way by medical students; and (3) the multidisciplinary in building the project with active participation from directors, pedagogues, teachers, and children and adolescents.

In summary, the extension project seems to have represented a constructive and enriching experience for both the children and the extensionists. The bidirectional nature of knowledge construction highlights the exchange of information between the extension-

ists and the community, showing that both parties are active agents in knowledge building. This project may have provided significant benefits to children by addressing essential themes for the development of good lifestyle habits in a playful and accessible manner. This approach emphasizes the potential to considerably enhance the quality of life for the involved children. By empowering the population to promote health, the project goes beyond impacting only the directly involved children, potentially extending these benefits to the entire community around them, surpassing the conventional limits of hospitals and schools.

## REFERENCES

1. Fonseca JC, Drumond MG. O consumo de alimentos industrializados na infância. *Revista Brasileira de Ciências da Vida* 2018;6(Especial 2018).
2. Laranzi G. Escritos sobre a clínica psicanalítica na adolescência. *Estud Psicanal* 2019,(51):163-170.
3. Cid MFB, Squassoni CE, Gasparini DA, Fernandes LHO. Saúde mental infantil e contexto escolar: as percepções dos educadores. *Pro-Posições* 2019,30(e20170093):1-24.
4. Cruz KB, Martins TCR, Cunha PDH, Godas ALM, Cesário ES, Luches BM. Intervenções de educação em saúde de primeiros socorros, no ambiente escolar: uma revisão integrativa. *Enferm. Actual Costa Rica* (Online) 2021,(40).
5. Moreira RS, Mauricio HA, Jordão LMR, Freire MCM. Implementação do Programa Saúde na Escola: relação com aspectos da saúde bucal dos estudantes. *Saúde debate* 2022, 46(spe3):166-78.

6. Costa P, Palombo CNT, Silva LS, Silva MT, Mateus LVJ, Buchhorn SMM. Ações de extensão universitária para translação do conhecimento sobre desenvolvimento infantil em creches: relato de experiência. *Rev Esc Enferm USP* 2019,53(e03484).
7. Brasil. Ministério da Educação. Conselho Nacional de Educação. Câmara de Educação Superior. Resolução nº 3, de 20 de junho de 2014. Institui Diretrizes Curriculares Nacionais do Curso de Graduação em Medicina e dá outras providências. *Diário Oficial da União*. 2014 Jun 20.
8. Santana RR, Santana CC de AP, da Costa Neto SB, de Oliveira ÊC. Extensão Universitária como Prática Educativa na Promoção da Saúde. *Educação & Realidade* 2021,46(2).
9. Meireles MAC, Fernandes CCP, Silva LS. Novas Diretrizes Curriculares Nacionais e a Formação Médica: Expectativas dos Discentes do Primeiro Ano do Curso de Medicina de uma Instituição de Ensino Superior. *Rev Bras Educ Méd*. 2019,43(2):67-78.
10. Ministério da Saúde. Política Nacional de Promoção da Saúde (PNPS) [Internet]. Brasília-DF; 2018.
11. Mastelari TB, Zômpero A de F. Oficina de Aprendizagem: Uma proposta metodológica na formação do estudante do ensino médio. *Investigações em Ensino de Ciências* 2023,22(3):244-43.
12. Fernandes ADSA, Cid MFB, Speranza M, Copi CG. A intersectorialidade no campo da saúde mental infantojuvenil: proposta de atuação da terapia ocupacional no contexto escolar. *Cad Bras Ter Ocup* 2019, 27:454-461.
13. Rosa, N. L., Vieira, G., & de Menezes Faria, J. C. N. SÉMAFORO DO TOQUE-: CONHECENDO OS LIMITES DO MEU CORPO. *Anais do Encontro Nacional sobre Inclusão Escolar da Rede Profissional Tecnológica (ENIERPT)* 2021, 1: 1.
14. Mundo Bitá-Bom Banho [Internet]. [www.youtube.com](http://www.youtube.com). [cited 2023 Jun 1].
15. Teixeira AD, Tury ICA, Milagres LO, Silva JPS, Scalioni FAR, Alves RT, Carrada CF. Conhecimento dos pais e responsáveis sobre hábitos saudáveis de higiene bucal e dieta na infância. *Rev Fac Odontol Porto Alegre* 2020,61(2):13-21.
16. Música Infantil-Cara de Quê? / CD Coração Palpita {Tia Tati} [Internet]. [www.youtube.com](http://www.youtube.com). [cited 2023 Dec 27].
17. Ribeiro A, Barross M, Ayres IP, Lírio C, Pinto IP, Couro ML. Conhecimentos e práticas parentais sobre medidas preventivas de acidentes domésticos e de viação. *Rev Port Med Geral Fam* 2019,35(3):186-95
18. da Silva, M. E. P., Capelario, E. D. F. S., dos Santos, L. A., Cardoso, M. C. V., da Silva, É. D. A. A., da Silva, W. G., ... & Zanoni, R. D. Manobra de Heimlich como técnica de desengasgo nos primeiros socorros pediátricos: Revisão integrativa de literatura. *Research, Society and Development* 2023, 11: e50111738629-e50111738629.
19. Furlanetto MF, Lauermann F, Costa CBD, Marin AH. Educação sexual em escolas brasileiras: revisão sistemática da literatura. *Cad Pesqui* 2018,48(168):550-71.

20. BRASIL. Ministério da Educação. Base Nacional Comum Curricular – BNCC Versão Final. Brasília-DF, 2017.
21. BRASIL. Parâmetros curriculares nacionais: terceiro e quarto ciclos de ensino fundamental. Secretaria de Educação Fundamental, Brasília, DF, 1998.
22. Vita GGP de A, Jorge TM. Impact of deprivation of school physical space on child development during the pandemic: the perception of preschoolers' families. Rev CEFAC 2023;25(2):e9822.

