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### HUMANIZATION OF HEALTH EDUCATION, PRACTICE REFLECTION AND COMMUNITY EMPOWERMENT

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**Introduction:** The University Extension Project “Humanized Training for the Healthcare Professional” has been providing, since 2007, an avenue for undergraduates to experience the reality of the health-disease process in the context of primary health care while focusing on the implementation of lightweight technologies.

**Objective:** This study aims to describe the positive impacts experienced by the future health care professionals, the experienced ones already in service, and the community assisted by the project.

**Methods:** To evaluate this project, several reports describing the 7 years of field experience by the Family Health Unity “Timbo II”, in João Pessoa, PB, Brazil were consolidated and analyzed.

**Results:** A socially relevant training and integration into primary health care, gateway to the Unified Health Service (Brazilian public health system), is shown to be a strategy that can help achieve the humanization of the future health professional’s formation. At the same time, professionals who are already working in the Family Health Team receive a unique opportunity to reflect on their practice in service, and find new strategies. The community assisted by the Team also benefits from the service improvements and experience exchanges provided by “discussion meetings” with participating undergraduate students, which has provided the community empowerment of their responsibility in the health-disease process.

**Conclusions:** We believe that the present results indicate the correction and adaptation of the proposed strategies in the pursuit of the humanization of healthcare professionals.

**Descriptors:** Community-Institutional Relations; health personnel; soft technologies; community; primary health care.

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### CHARACTERIZATION OF USERS OF SANTA MARIA MAIOR CONTINUOUS CARE UNIT (CCU) AND SOCIAL RESPONSE AFTER DISCHARGE OF USERS WITH CEREBROVASCULAR ACCIDENT (CVA)

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**Introduction:** The stroke is a neurological disease caused by the sudden decrease in blood supply to a particular brain region. It is a state of medical emergency and, in Portugal, is the leading cause of death.

**Objective:** To identify the social responses after discharge of stroke patients.

**Methods:** A cross-sectional, quantitative, observational and descriptive study was developed. This study was conducted at a Continuous Care and Long Term Maintenance Unit. A sample of 222 patients admitted over the period December 2008 to November 2013 was selected. Data collection was made, using Gestcare Integrated Continuous Care, in the last quarter of 2013, after authorization granted by the responsible Unit.

**Results:** Of the 222 patients, 79 were admitted to the CCU with the diagnosis of stroke, noting this pathology a prevalence of 35.6% during the analysis period. From the total CVA patients, the majority were male (53.2%), lived in rural areas (61.3%) and had family support (78.5%). Their ages ranged from 48 years to 95 years old. Patients after discharge, had the following destinations: 25.3% were transferred to other units to receive more specialized care; 24.1% patients enrolled in a nursing home; 13.9% returned to the home with family support; 8.9% patients returned to their home with support of a home care; 3.8% patients went to a foster family and, the remaining (24,1%), died.

**Conclusions:** The family plays a key role in supporting the patient. However, there is also the need for institutions and social support services that meet and complement the needs of the patient and family.

**Descriptors:** Stroke, Cerebrovascular accident, Continuous care; Northeast; Portugal.

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