



Article

## Reflections on training in Physical education for health performance

**Stela Lopes Soares<sup>\*1</sup>, Douglas Prado Araújo<sup>\*\*2</sup>, Diogo Queiroz Allen Palácio<sup>\*\*\*3</sup>, Heraldo Simões Ferreira<sup>\*\*\*\*4</sup>, Neide Dourado Martins<sup>\*5</sup>, Anaísa Alves de Moura<sup>\*6</sup>, Eveline Rufino Brasil<sup>\*\*\*\*7</sup>, Davi Moreira Lima Romcy<sup>\*\*\*\*8</sup>**

\*Centro Universitário INTA (UNINTA), Sobral-CE, Brazil

\*\*Secretaria de Saúde de Sobral-CE, Brazil

\*\*\*Secretaria de Educação (SEDUC), Fortaleza, Brazil

\*\*\*\*Universidade Estadual do Ceará (UECE), Sobral-CE, Brazil

### Abstract

The teacher of physical education, became in the course of the years, a professional valued by society, in such a way that, currently integrates multidisciplinary teams in the single system of health-SUS, and through its interdisciplinary approach, comes gaining more and more space. For this purpose, the objective of this research is to analyze the training offered in the course of undergraduate degree in physical education at Universidade Estadual Vale do Acaraú. For this, this study has as methodology the field research and exploratory, because it has as focus the information and/or knowledge about a problem or situation, seeking answers to either, or proving assumptions, discovering new phenomena or the Relations between them. The scenario of this research was the Universidade Estadual Vale do Acaraú, in particular, interviews with the faculty of the Physical Education course of the aforementioned University in the year 2017. From the findings, the profile of these teachers was observed: men, aged between 41 and 50 years, masters, graduated in physical education from the Universidade de Fortaleza, sought a master's degree or doctorate in the area of health, have between 20 to 29 experience in Higher education and have between one to five years of experience in the university cited it is believed that the concept of health exerts influence in the training of the professionals of physical education, and other attitudes

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1 Master in Health Teaching, State University of Ceará. Professor of Physical Education Course of University Center INTA (UNINTA), ORCID iD: <http://orcid.org/0000-0002-5792-4429> E-mail: [stelalopesoares@hotmail.com](mailto:stelalopesoares@hotmail.com)

2 Specialist in Family Health for State Valley University of Acaraú (UVA). Professor Physical Education of Integral Care Network Mental Health, Sobral Health Secretary. ORCID iD: <http://orcid.org/0000-0002-6195-521X> E-mail: [douglaspradomsn@hotmail.com](mailto:douglaspradomsn@hotmail.com)

3 Doctorating in Sports Sciences by University of Trás-os-Montes and Alto Douro (UTAD), Portugal. Professor of Physical Education. ORCID iD: <http://orcid.org/0000-0002-3814-9607> E-mail: [diogoallenpalacio@gmail.com](mailto:diogoallenpalacio@gmail.com)

4 Doctorate in Collective Health. Adjunct Professor of the Physical Education Course. State University of Ceará (UECE). Centro de Ciências da Saúde (CCS). ORCID id: <http://orcid.org/0000-0003-1999-7982> E-mail: [heraldo.simoese@uece.br](mailto:heraldo.simoese@uece.br)

5 Distance Education Specialist. Directorship of Pedagogical Innovation (DIRIN), University Center INTA (UNINTA). E-mail: [neidedourado@uninta.edu.br](mailto:neidedourado@uninta.edu.br)

6 Doctorating in Education – ULHT, Lisboa, Portugal. Educational Guidance, University Center INTA (UNINTA). ORCID iD: <http://orcid.org/0000-0002-4878-089X> E-mail: [anaisa1000@hotmail.com](mailto:anaisa1000@hotmail.com)

7 Master in Health Teaching, State University of Ceará. E-mail: [eveline\\_brasil@hotmail.com](mailto:eveline_brasil@hotmail.com)

8 Doctorating in Sports Sciences by University of Trás-os-Montes and Alto Douro (UTAD), Portugal E-mail: [daviromcy@gmail.com](mailto:daviromcy@gmail.com)

are necessary for the modification of the framework found. In this way, it is understood that the initial formation of those involved did not prepare them to address the thematic health in the school.

**Keywords:** Vocational training, Physical education and training, School health services.

## Introduction

This paper presents part of research carried out in Master's degree course in Teaching in Health of State University of Ceará (UECE). Therefore, it reflects on competences in education and human development, in which the Physical Education professor has become over the years a professional valued by society, so that currently integrates multidisciplinary teams in the National Health System - SUS, and through its interdisciplinary approach, has been conquering more and more space.

Thus, Nunes, Votre and Santos (2012, p.10) affirm that it is considered a Physical Education professional who is able to teach, to supervise, to coordinate and to guide educationally in public and private units of formal and non- formal education, thematizing the Movement Body Culture, broadening the cultural training of his students in health education, physical-sports leisure activities, and promoting the relationship between school, culture and society.

Gonçalves and Rochaël (2015) show that the teaching approaches the knowledge of public educational policies, teaching and didactics methods, evaluation mechanisms, specific knowledge and contents to be taught, interlinking a combination of skills and attitudes for the understanding this content for teaching and learning.

Therefore, the justification for conducting the study is based on professional experiences in Physical Education course, from 2014 to 2016, perceiving the difficulties of students and professors to approach issues related with health during classes.

It is understood that the university is the most suitable place for reflection, seeking strategies to fulfill the goals established by the institution. It is expected that the university will appropriate its own contours from the dialogue with the reality in which it is inserted.

The aim of this study is to analyze the training offered in Undergraduate Degree in Physical Education of State University of Vale do Acaraú (UVA) and specifically, to identify the Professor Profile about the formation and academic performance, as well as to observe how professors understand / conceptualize health.

In view of above, following question research is formulated: How is the training professors of a Physical Education course in Health area?

In this way, the problematic to be investigated has a significant relevance, because will address with the training of Physical Education professors in health, which, in context to be researched, have specific habilitation, but still chained by hegemony of sports education isolating other practices lived in their training course.

As a result, this article can contribute to reflection of their professional training by those involved in the research, making possible a remodeling and a greater diversity of their school practices, and awakening them to the importance of continuing education.

It is expected to contribute to the production of scientific knowledge of the area by physical education professors, in order to widen concept of their initial formation, seeking appreciation and recognition of physical education in school environment.

### **Training in Physical Education**

Carrying out a historical rescue on Physical Education training in our country, it is believed that occurred in different contexts: political, economic, social and cultural. In this way, this practice is recent, because it has a brief history, however, professionalization is current.

The consolidation of Physical Education profession took place in mid-2000, after increase in graduation and post-graduation in the area. These discussions in the area served to expand the horizons of profession and in the 90s in the twentieth century, the strands of activity among undergraduate and / or bachelor's degree were even more widespread (FERREIRA; OLIVEIRA; SAMPAIO, 2013).

To support this expansion, before the conflict, the Ministry of Education of Brazil, together with the Department of Higher Education Secretary, in 2010, launched the National Curricular Reference Frameworks for the Bachelor's and Bachelor's Courses, which was contained information of guidelines on how they should be the new curricula (BRASIL, 2015).

The current curriculum of Physical Education Course, despite a few years, is guided by Law on Guidelines and Bases of Education - LDB 9.394 / 96 - and based on Resolution CNE / CP 01/2002 and Resolution CNE / CP 02/2002.

In this perspective, under Resolution No. 218/1997, the Physical Education professional should work on health, strengthening preventive actions and combating one of factors that most cause degenerative diseases in the world population: the sedentary lifestyle (CONFEEF, 2010).

### **Health at school**

According to Carvalho (2016), health and education are required when the subjects are the living conditions of the population independent of scenario, because the interaction between them is interesting way to improve quality of life.

Thus, it is believed that health professionals, understand among them Physical Education Professional, can contribute strongly to the consolidation of Health Promotion in schools, being able to solve the necessities of schoolchildren, as well as the community in which it's inserted (COSTA et al., 2013).

Thinking about this, it is reflected in the definition of Health that should not only be the absence of disease, but also as physical, mental and social well-being, as recommended by the World Health Organization (WHO) in 1948 (FERREIRA, 2011). Thus, new thinking and acting in health originates new models of health care, valuing the subjectivity of people, which implies in reformulation of the form of intervention of the professionals of the area.

It is observed that from 1950 to 2000, several approaches have been made to contemplate and approximate the fields of health and education through public policies. Supported by the National Policy for Health Promotion (PNPS) through the Ministry of Health, in 2006, they aimed necessary conditions for communities and their members healthier, reiterating the political dialogue in SUS (BRASIL, 2012).

## Methodology

This study is considered a field and exploratory research, because it focuses on information and / or knowledge about a problem or situation, seeking answers or proving assumptions, discovering new phenomena or relationships between them (OLIVEIRA; BEZERRA, 2012).

The scenario of this research was UVA, more specifically the environment which Physical Education course is located, in the city of Sobral, Ceará, Northeast Brazil.

All professors' members of UVA Physical Education course were invited to participate of research. As inclusion criteria was used for those who should have an employment relationship with the UVA, independent they are effective or substitutes; and to be part in of collegiate of Physical Education, by signing the Informed Consent Term - TCLE.

The research initially had 21 participants, however, three were removed during the study period for health reasons and / or professional qualifications, not attending and also be available to participate, and finally, one of professors did not attend the collection period stipulated. Finally, applying exclusion criteria, the research was conducted with 17 professors of Physical Education course - UVA.

The interviews were carried out at the beginning of July 2017. Information on age, academic training, degree, time spent in other HEIs (Higher Education Institutions) and UVA, as well as subjects taught, were impact of this information on training to work health at school. This study was submitted to the Ethics and Research Committee of State University of Vale do Acaraú (UVA), whose registration was approved through the CAEE of n °: 67893317.2.0000.5053 and substantiated opinion no. 2,083,625. Thus, the ethical aspects of research involving human, in accordance with Resolution 466/12, were considered, and the fundamental principles of bioethics, inherent in autonomy, beneficence, non-maleficence, justice and equity (BRASIL, 2012).

## Results and discussions

This section discusses the results collected from interviews, starting with the data collected in interviews with professors of course of Physical Education at UVA.

### *Profile of participants*

The profile of participants was divided as follows: gender, age, training area, training institution, initial training, degree, continuing training area, time spent in HEI and, lastly, work experience in the UVA. For better visualization of these findings will treat the following results through a contextualization of information gathered from the interviews.

### *Gender*

The UVA Physical Education course collegiate, in its majority (71% of sample), is composed for men. This information compares with Census of Higher Education carried out, in which Brazil (2015) claims that in private and public higher education institutions, its teaching staff is mostly male.

Corroborating with this result, Garcia, Fonseca and Leite (2013), in their

study with Professors of Medicine course, in which 72 individuals participated, of whom 38 men and 28 women. Differently from what Moreira, Nascimento, Sonoo and Both (2010) say in their study, they found that female professors' contingent is larger. However, based on findings of the present study, and the majority of authors studied and still from the census researched, it is believed that the largest population of Professors in Higher Education is made up of men, as evidenced by this research carried out with professors of Physical Education course of UVA.

### *Average Age*

The results show that the professors of investigated institution have an average age above 30 years and that, in the majority, they have between 41-50 years.

This information is different from that found in the study by Laudelino and Maes (2010), who affirm that the average age among Higher Education professors is between 36-45 years.

Andrade and Souza (2016) and INEP (2011) are in agreement with results of the present study, because they affirm that the typical professor in 2011 in private HEIs was 34 years old and 47 years old in public HEIs, justifying this fact, because this is associated with higher degree, which would require more time for training, but also obtained in this result.

### *Initial Formation Area*

In higher education usually has different areas of initial training of professors of collegiate courses.

According to the interviews, most professors of Physical Education course at UVA, has a degree in Physical Education, accounting for 82% of the college. Only 6% are from other professional categories.

Supported by Lauxen and Pino (2017), it is believed that teaching work is an important aid to understanding the transformations that take place in society, because this is one of the forms of production and socialization of knowledge accumulated throughout the historical processes of humanity.

Fiorin et al. (2015) affirm that the integration of knowledge of the different professions favors interdisciplinarity, thereby tending to differentiated initial formation.

In this sense, having professors from several professions involved in the initial training in Physical Education, as is the case of the collegiate of present study, favors a new posture, so that conception of interdisciplinary teaching is increasingly valued.

Such a assertion goes to the meeting with Menegazzi and Dalcin (2016), because the exchange of knowledge between different professionals, provides a plural relationship, favoring a differentiated practice.

However, this information still reveals the importance of initial training for professor profession, as well as point out the weaknesses in training itself, because from them it is possible to perceive influential factors in the organization of the courses. This aspect, undoubtedly, exerts influence in the formation and, consequently, in pedagogical practices.

### *Initial Formation Institutions*

With regard to the Institutions of which professors are graduates, what has happened is that they had initial training in different HEI. The most, corresponding to 41%, was graduated from University of Fortaleza-UNIFOR, followed by researched institution itself, the UVA, with 29%. In addition, 12% are formed by UFC<sup>9</sup> and UECE<sup>10</sup> and 6% by UFPB<sup>11</sup>.

According to Andrade and Souza (2016), in allusion to the professor performance, the professors of Higher Education generally seek the places from where they are graduates to enter in professor career; however, was not found in this research, because most of the interviewees (41%) came from UNIFOR.

### *Initial Training Modality*

In approaching initial training, it is understood that this is a basic element for professors to follow their teaching practice and technical knowledge. However, the current situation of our country shows that more and more professionals migrate to teaching exclusively or accumulating with their professional activities.

According to the interviews, most of professors have initial training in Full Degree, corresponding to 75% of total interviewees and 25% are Bachelors. It should be noted that of the interviewees, none were just Licensed.

Licentiate degree, in accordance with Resolution 01/02, corresponds to the professor training, preparing it for improvement of pedagogical practice to act in formal education, from kindergarten through high school (BRASIL, 2002).

Bachelor professional, according to National Curricular Guidelines, has the direction to develop a specific training to act in informal environments (BRASIL, 2004).

It is interesting to mention Faria Junior's (1987) understanding that the debate about licentiate-bachelor division arises from the non-acceptance of model previously in force, the generalist professor.

Thus, from the findings, it is understood that according to the official documents, the professionals of the present study were not fully prepared to act in Higher Education.

The findings presented by the subjects show some difficulties in their professional practice and possibly have to do with type of training they had or, in some cases, problems and deficiencies in initial training, independent of posture.

### *Professor degree*

In Brazilian education, higher teaching degree has become a fundamental activity for professors who intend to remain in this area. Thus, courses, congresses, seminars, and even more, *Stricto Sensu* postgraduates have become indispensable for professional practice.

Regarding the degree of the professors interviewed, 82% are masters, 12% are doctors and 6% are postdoctors. The professor needs to be aware that, regardless of the conditions he experiences, he needs a continuity in his education to be a constructor of changes in Education (PIMENTA; GHEDIM, 2008).

Isaia and Bolzan (2004) recognize the importance of university pedagogy by means of minimum master's degree, so that it is possible to exchange experiences and construct the identity and formation of university professor.

According to Cardoso (2016), being a specialist isn't enough to act in HEIs, not even in private ones, because they represent a lower score in the institutional evaluation policy.

Pereira and dos Anjos (2014), in a field study, affirm that the professors of Higher Education are classified: 16.5% are doctors, 44.1% are masters and 39.4% are specialists.

In this way, it can be observed, from the findings and reading about authors who study the subject, such as Huberman, Pimenta and Tardiff, more and more, the professors of Higher Education are seeking degree, at least Mestre.

With globalization, the present changes in educational scenario, from the concepts, scientific and technological area, oblige the professor to be in continuous update, influencing and much, in current choices of the professionals of the health area.

### *Training area in maximum degree*

Physical Education professors of researched collegiate, as training in the titration, opted for different areas.

It can be seen that the maximum titre achieved by the professors is diversified: 59% in health area such as Collective Health, Health Teaching, Physiology of Effort, Physical Activity and Health; 35% in education as Education, Public Policy and Physical Education; and 6% in sports: High Performance Sport.

According to Pimenta and Ghedim (2008), masters and doctoral programs focus on the training of researchers and professors in their specific fields, and not on initial training, because they are not able to educate for teaching.

Thus, from the results, it appears that most collegiate professors are better prepared to deal with the health theme, the main focus of the present study.

The pursuit of continuing education beyond the initial offers other perspectives beyond bodily practices of movement. In opposition to this, it can not be denied that the way as the Physical Education professionals are formed and organized, they signal the ways of acting and to think of their graduates. Certainly, these mechanisms there may be transformations, along the professional trajectory of each one, by influence of new knowledge produced in the particular practice of professionals.

### *Time in Higher Education Work*

When the subject was the professors' time of work in Higher Education, what it was noticed that 47% have between 20-29 years of experience; 23% between 10-19 years, 18% between 1-9 years and 12% with 30 years.

Laudelino and Maes (2010) diverge from the results of this present study, because in their research, most of interviewees hadn't experience in Higher Education.

Pryjma and Oliveira (2016) claim that the professors' experience occurs through education, from teaching practice, and this favors the construction of new knowledge about teaching, giving new meaning to the professors' practice like intellectual, through research and his own practice.

Tardif (2000) and Nunes et al. (2017) affirm that experiential knowledge is one of the components that structure professional knowledge (consisting of knowledge, competence and abilities), long-term professional life (identity

dimensions, professional socialization dimensions, phases and changes) derived from history of life and also the structuring of professional practice (trial and error).

In fact, the value of Physical Education professional experience is important because it tends to recognition and awareness of different processes of human development, subsidized by a planned pedagogical work, whether at school or in different professional fields of endeavor of Education Physics, such as: gyms, hotels, health posts, squares, directly influencing the development of individual training through the social practice so present in this profession.

### *Taught Disciplines*

The Physical Education professor works in the biopsychosocial formation and children, adolescents and adults education, being able to systematically study human movement, whether voluntary or oriented, with emphasis in areas of sports, gymnastics, recreation and dance. Thus, the Physical Education professor usually works in different areas.

According to interviews 45% of UVA Physical Education College professors teach disciplines in the pedagogical area, followed by 32% in field of health and finally, with only 23% in areas Sports.

The lack of update in the area can justify the possible gaps found, for as noted above, although the majority have focused continuing education for health, educational method are those over worked.

Physical Education is key part in prevention and treatment of various diseases and health promotion. Aware of outstanding role of the Physical Education professional in promoting health, seeking updates to subsidize teaching and professional practice in health area, it also reflects in professional training curricula, becoming a challenge to the professional identity of Physical Education, something often unidentified.

### *Working time at UVA*

According to the interviewees, they are very diverse findings, pointing to existence of professors at different stages of their professional careers.

Throughout the teaching trajectory, professors graduate and turn into themselves, bearing in mind the demands of life and profession (ISAÍÁ; BOLZAN, 2011).

Huberman (2000) makes the following classification of professors in four stages of professional development: entry into career (one to three years of profession), stabilization (from four to six years), experimentation or diversification (from seven to 25 years) and preparation for retirement (35 to 40 years of profession).

From the contribution of mentioned author, the professors of Licenciante Physical Education course of UVA are classified in the majority, at entry of career, followed by those who are in phase of experimentation or diversification. It is noteworthy that the results indicate that no professor of mentioned UVA course was still in the preparation phase for retirement.

Referring to Larrosa-Bondía (2002, p.27) when affirming that "the knowledge of experience is a particular knowledge, subjective, relative, contingent, personal". In relation to the knowledge of experience, it was observed that these are composed of different scopes, which span both the initial socialization (pre-professional), as well



as years of formation and subsequent to it.

Therefore, it should be understood that experience is continuous process and that it contains all experiences lived along the life trajectory and that should always be taken into account.

From the findings, in order to advance in the face of observed challenges, limiting oneself is not the best way out. It is necessary to idealize new ways of teaching practices. Rescuing Physical Education in schools, in which the professor perceives himself as someone who can produce knowledge, not only to apply knowledge, doing justice to the pedagogical practice, valuing the reflection to change the found frame.

With this aim, we tried to observe how these professors saw the studied subject. In order to guarantee the anonymity of the participants, instead of own names the abbreviation P: Professor was numbered from P1 to P17, according to the order of citation in the text.

## Health Concept

The participants were asked about health concept. Their answers were categorized into three themes: a) health and social determinants (10); b) concept based on the wording of the World Health Organization - WHO (5); and, (c) based on the biological perspective (2).

### *Health and Social Determinants*

The health concept is related to social, economic, political and cultural context, as it undergoes variations depending on the time, place, social class and differences between people.

Thus, of all interviewees, 10 professors compared the theme 'health and social determinants' with this category; then there are 04 statements, being represented by the following speeches of those involved:

P4 "An appreciated feeling of life in extended way, linked to housing, food, heart, affective life to social relations and people will only understand all this, linking and taking care of all aspects that actually make up the integrity of human".

P6 "{...} Basically the person has a fullness in all spheres. Both physical, spiritual and social and to be in balance with all the factors that subsidize these aspects".

P7 "The concept of the WHO, is not the complete only with the full biopsychosocial well-being, but a broad scope in these three categories. Because it comes within the biological concept, many nuances surrounding this concept of biology, we have to mention psychological part that is another range that acquires knowledge in which we have passed, and the social part".

P9 "The access of knowledge, access to physical health, to health system as Primary Care, to hospital care and refers, as base to everything, to social health, to social relations"

The NCCB (National Curricular Common Base) reinforces in contents that the conceptions, the objectives of Physical Education correlated to teaching of health, or about what is healthy, value the habits and lifestyle, attitudes towards health issues; permeating all areas of school study and that Physical Education plays

a fundamental role in health education (BRASIL, 2015).

Garbois, Sodré and Dalbello-Araújo (2017) understand that the social determinants of health are circumstances in which populations grow, live, work and get old, as well as the implemented systems to deal with disease. But just as in referenced study, at present, some bring 'contexts', 'circumstances' and 'conditions', adopting a reductionist and fragmented perspective of social reality.

The concern to avoid degenerative diseases such as overweight and obesity, has been the target of studies aimed at acquiring a healthier life. In the meantime, physical activity has been considered for the improvement of quality of life (FIORIN et al., 2015).

These ideas are justified by Nahas (1997), who argues that Physical Education school brings the biological perspective to explain causes and phenomena of health, but they do not stray from social issues.

Thus, in the study by Oliveira and Bezerra (2012) on understandings and health challenges in Physical Education school through a literature review, the findings were that health concepts discussed in physical education school courses should include concepts of health for beyond the biological aspects. Therefore, the situation of housing, access to culture, leisure and political empowerment are factors that contribute to understanding of health in its entirety.

In order to contribute what was presented in this category, the study carried out by Cardoso (2016) had objective of understanding the meanings of health concept of professional health professors from HEI in Rio Grande do Sul. The results evidenced a paradox in relation to the meanings attributed to the concept of health. For some, health is understood as a complex phenomenon that has as determinants: promotion of health, integrality, singularity, humanization, multidisciplinary, interdisciplinarity and complete well-being. For others, a reductionist phenomenon, because the focus must be given through assistance and curative actions related to the health-disease binomial.

In this sense, this category is promoted, based on Ferreira, Oliveira and Sampaio (2013), who affirm that the understanding of health in school environments should include situations such as: housing, access to culture, leisure, political empowerment and others elements, for your full understanding.

### *Health concepts based on the perspective of World Health Organization – WHO*

In this way, according to three of interviewed professors, the theme 'health related to concepts of WHO now exposed, is explicit in following excerpts from the speeches of those involved:

P2 "Health is a state in which the person is in physical health ... well-being, physical, mental, psychological".

P3 "It is well being, human in all dimensions, of human being, it is physical well-being, it is social well-being, emotional well-being, well-being in all dimensions that the human can be..., that human consolidates himself as a human"

P16 "[...] a daily activity of individual's life, then he seeks health on his own, as if he had autonomy to say whether he is healthy or not every day then health today is as if it were a personal concept"

Based on interviews carried out, it is understood that, although the first conceptualization was overcome, some people are still based on the concept of

health proposed by WHO in 1948, evidencing the necessity to update and discuss Physical Education and health within the current concepts, to deal with this issue in their day to day.

According to Laudelino and Maes (2010), the concept of health according to WHO was disseminated on April 7, 1948, the culmination of the recognition of the right to health and the obligation of the State to promote and protect health. Such a concept says that health is the state of the most complete physical, mental and social well-being; and not merely absence of diseases.

For Pereira and Anjos (2014), a WHO guideline has several points of a question, among them: a subjectivity of the concept of well-being, by concept of well-being from one person to another; making health ideal and practically unattainable; and possibility of concept of being used for abuses by state in relation to health promotion of a population.

Through the discourses of professors who have been graduating for some time, biologicist aspects in which the first WHO concept of 1948 is still perpetuated in a reductionist vision of Physical Education, implementing defense of sport and individual health, of gestures and motor skills (FERREIRA; OLIVEIRA; SAMPAIO, 2013).

Based on Ferreira (2011) points out that Physical Education in perspective of health can't think in practice of exercise in isolated, because it will not offer health to the individuals.

### *Health and Biological Condition*

Although controversial, some people still bring in their speeches striking features of theme 'health and the biological condition'. This thinking was represented in a speech of respondents, as it is possible to prove the following:

P15 "Health is the normal functioning condition of human organism".

Biological questions in Physical Education, correlating it with health are emphasized from the 1950s. At this time the programs were directed to health at school with actions to biological issues problems of the issues related to education (COUTO et al., 1987).

Despite the advances, it is perceptible, from the interviews, that some professors present the idea of health in biological concept (through of judgment that is got health, if isolated physiologically well). Ferreira, Oliveira and Sampaio (2009) reinforce the idea that health education has been ineffective, has been linear and traditional, following a growing complexity, but fragmented, with a list of health issues with the social and cultural context from the students.

Contributing to what has been mentioned, Lorena et al. (2016), assume that the characteristic of biological bias in training of Physical Education professionals is still striking. Although health can not simply be reduced to biological relation of cause and effect, for man is historical being and socially and culturally related.

Complementing above author points out that the fragmentation of knowledge also provides emergence of various problems in formation of health professional, among them the lack of interdisciplinarity.

Burgarelli and Carmo (2017) affirm that no matter how good an initial formation, everything will be insufficient if the professor is not attributing aspirated value to what is offered.

Therefore, for Ferreira, Oliveira and Sampaio (2013), health is not perfect state of equilibrium, but a dynamic game between physiology, environment, culture and strategies of intervention articulated by society.

Carvalho (2016) states that health in the area of Physical Education privileges biological approach, resulting in causal relationship between physical activity and health, disregarding social, cultural and economic determinants that exist in this relationship. In this way, there is unique responsibility of individual.

Miranda (2006) explains that only physical exercise doesn't result in health, in linear and deterministic way. He remembers that the individuals who practice physical activities have nutritional support, financial and free time, in other words, a large portion of population, in this case, according to author, is excluded from the practice of physical activity.

Lorena et al. (2016) in their study, claim that older professors, as well as what was collected in the present interview, were formed in courses with technical, sports and health promoter profiles through the physical aptitudes. Those graduated more recently and in other universities, had a training with curricular matrix balanced between biological, sports and human areas, which leads us to bet on professor different from previous ones regarding their formation and, except in some cases, receive new characteristics of area, resulting in differences in the way of understanding and organizing pedagogical practice, providing new opportunities for knowledge, skills and attitudes.

Subcategory of responses is perceived that concept of health linked to that initially put forward by WHO, with the influence of the social determinants for development of physical, constitutes a limited understanding by someone, because it relates acquisition of health in simply performing physical exercises, ignoring other important factors.

It was observed by most of the interviewees that the concept of health for UVA professors goes beyond what the WHO puts forward, addressing physical, mental and social well-being, believing to be the closest to the concept of health promotion (BRAZIL, 2012), which this is linked to social determinants such as housing, purchasing power of person's own understanding of their health.

Health as theme of Physical Education encompasses various subjects such as sedentarism, sexually transmitted diseases, drug control and first aid (FERREIRA, 2011).

Fiorin et al. (2015) dialogue that the understanding of Health through of teaching of Physical Education, should collaborate to state coming from stimuli and corporal actions developed by professors of area, leading the public to understand multifactorial characteristics on biological, cultural, physiological, biomechanical, socio-political and economic determinants.

This concept is also complemented, referring to the same authors mentioned above, in which they explain that concept of health is complex term that involves several humanitarian factors, and lack of understanding entails problems that can only be understood from studies and experiences.

It is worth emphasizing, opposite the professors' speeches, from this questioning, that this conceptualization is not easy, being very subjective, that had several modifications according Lourenço et al. (2012).

The concept of Collective Health, which considers health as possibility of success in acquisition of social determinants, such as housing, leisure, education, culture and employment, and that these are fundamental for attainment of health and influence directly on health promotion of individual (CARVALHO, 2016).

It is understood that the comprehension of Health Teaching in school environments should be related to broad training, with a holistic view to students, that is, to observe them in their totality, taking care of aspects related to psychology, science, external and emotional factors, as part to solve the problem or presented difficulty, aiming at integral formation of them, by means of actions of prevention, promotion and attention to health.

For achievement of found situation change is very important to consider aspects such as: a change of paradigm "applicationist" of initial training; permanent formation assuming a critical-reflexive character.

### **Final considerations**

On the profile of interviewed professors, it was possible to detect that the majority are men, aged between 41 and 50, masters, graduates in Physical Education by UNIFOR, sought a master or doctorate in the area of Health, with 20 to 29 years of experience in Higher Education and have between one and five years of experience in UVA.

Regarding the concept of health, the majority of professors reported an approximation with recommended by WHO definition in a simplified form. It is believed that this concept exerts influence in formation of Physical Education professionals, being necessary other attitudes for the modification of found frame.

In this way, it can be seen that the initial training of those involved did not prepare them to address the health issue in the school, but continued training gave them subsidies. It was understood from the interviews, the influence of masters and / or courses attended in field of Collective Health.

It is proposed to think training in Physical Education for health education in school more broadly, and for this to happen it is necessary to initially be a deployment in the curriculum of subjects that address the principles of Public Health, such as humanization, Universality, integrality, among others. Thus, it is expected that the understanding of health will change through an expansion of knowledge.

Certainly, this preparation will subsidize us to a better performance and to the best state of health possible with minimum of risks, considering particularities and life history, independent of modality of Initial Formation chosen, since as professionals/professors of Physical Education that we are, we need to understand about the processes involving motor learning and its implications to the body on socio-affective development of this subject.

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