

QUILOMBOLA WOMEN AND PAULO FREIRE'S RESEARCH ITINERARY

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ABSTRACT

Objective: to understand the relationship of social determinants in health promotion for women living in a quilombola community, through Paulo Freire's Research Itinerary.

Method: a qualitative study, with a participatory character, developed through Paulo Freire's Research Itinerary. Ten quilombola women aged between 24 and 54 years, living in the Morro do Fortunato Community, Garopaba, Brazil, participated in the study from April to June 2016. During the three-month-period, the thematic research, codification, decoding and critical unveiling were performed.

Results: 20 generating themes were initially investigated which were coded and decoded in eight and unveiled in two significant themes, quilombola women and access, which, when unveiled, deepened the empowerment and the relationship with health promotion in this community.

Conclusion: this study enabled women to be aware of their realities and consequent empowerment and fruitful reflections which provided an increase in self-esteem, appreciation and self-care, as well as the perception of their strengths, often muted by the adversities of the day to day.

DESCRIPTORS: Health promotion. Group with ancestors from the African continent. Women. Empowerment. Search.

HOW CITED: Durand MK, Heidemann ITSB. Quilombola women and Paulo Freire's research itinerary. *Texto Contexto Enferm* [Internet]. 2020 [cited YEAR MONTH DAY]; 29:e20180270. Available from: <https://doi.org/10.1590/1980-265X-TCE-2018-0270>

MULHERES QUILOMBOLAS E O ITINERÁRIO DE PESQUISA DE PAULO FREIRE

RESUMO

Objetivo: compreender a relação dos determinantes sociais na promoção da saúde de mulheres moradoras de uma comunidade quilombola, por meio do Itinerário de Pesquisa de Paulo Freire. **Método:** estudo de abordagem qualitativa, com caráter participativo, desenvolvido por meio do Itinerário de Pesquisa de Paulo Freire. Participaram do estudo dez mulheres quilombolas com idade entre 24 e 54 anos, moradoras da Comunidade Morro do Fortunato, Garopaba, Brasil entre os meses de abril a junho de 2016. No transcorrer desses três meses foram realizadas as etapas da investigação temática, a codificação, descodificação e o desvelamento crítico.

Resultados: inicialmente foram investigados 20 temas geradores sendo codificados e descodificados em oito e desvelados em duas temáticas significativas, mulheres quilombolas e o acesso, que ao serem desvelados aprofundaram o empoderamento e a relação com a promoção da saúde dessa comunidade.

Conclusão: este estudo possibilitou o despertar das mulheres perante suas realidades e consequente empoderamento e frutíferas reflexões às quais proporcionaram a elevação da autoestima, da valorização e cuidado de si, assim como a percepção de suas potencialidades e fortalezas muitas vezes abafadas pelas adversidades do dia a dia.

DESCRITORES: Promoção da saúde. Grupo com ancestrais do continente africano. Mulheres. Empoderamento. Pesquisa.

MUJERES QUILOMBOLAS Y EL ITINERARIO DE INVESTIGACIÓN DE PAULO FREIRE

RESUMEN

Objetivo: comprender la relación de los determinantes sociales en la promoción de la salud de las mujeres que viven en una comunidad de quilombolas, a través del Itinerario de Investigación de Paulo Freire.

Método: estudio cualitativo, de carácter participativo, desarrollado a través del Itinerario de Investigación de Paulo Freire. Diez mujeres quilombolas de entre 24 y 54 años, que viven en la Comunidad Morro do Fortunato, Garopaba, Brasil, participaron en el estudio de abril a junio de 2016. En el transcurso de estos tres meses, se llevaron a cabo las etapas de investigación temática, codificación, decodificación y presentación crítica.

Resultados: inicialmente, se investigaron 20 temas generadores, se codificaron y decodificaron en ocho y se revelaron en dos temas importantes, las mujeres quilombolas y el acceso, que, cuando se revelaron, profundizaron el empoderamiento y la relación con la promoción de la salud en esta comunidad.

Conclusión: este estudio permitió el despertar de las mujeres ante sus realidades y el consiguiente empoderamiento y reflexiones fructíferas a las que proporcionaron un aumento de la autoestima, el aprecio y el cuidado personal, así como la percepción de sus fortalezas a menudo amortiguadas por las adversidades del día a día.

DESCRIPTORES: Promoción de la salud. Grupo con antepasados del continente africano. Mujeres. Empoderamiento. Investigación.

INTRODUCTION

Multifaceted in its various fields and concepts, health promotion is guided by the definition expressed in the Ottawa Charter which considers it as the process of training individuals, families and communities to increase control over social determinants and thereby act to improve their quality of life and health.¹

Thus, the close relationship between health promotion and the social determinants of health (SDH) is emphasized, which are distributed in three levels of care that interact in achieving equity and well-being: structural factors (work, taxation and protection) social and environmental policies; governance; social norms and values) social position and the stratification determinants (social class, gender, race/ ethnicity, education, occupation and income) and the intermediate determinants (the circumstances, behaviors and biological material factors, psychosocial factors, health care system).² The absence of one of these SDH from a particular community, group or individual, is linked to vulnerability as a prerequisite for health.

The term vulnerability can be understood as the condition of risk in which a person finds themselves. In this sense, personal vulnerability is related to behaviors that individuals absorb that may be favorable or unfavorable to self-care and health conditions. The concept of social vulnerability emphasizes that social representations, stigmas and social conditions can be factors that benefit health, also valuing access to means of communication together with the availability to enjoy favorable resources.³⁻⁴

In this context, the “remaining quilombo” population is highlighted, seen as an exploited vulnerable ethnic group. Nowadays, this expression is characterized by the name “quilombo”, which in its Bantu etymology means “warrior camp in the forest”, was popularized in Brazil to represent the mutual support units instituted by the rebels to the slave system and their reactions, organizations and struggles to end slavery. This word also had a special meaning for the freedmen, in their trajectory, conquest and freedom, reaching extensive dimensions and contents.⁵

Violence, racism and its implications for women’s health justify the scope of studies on the vulnerabilities of the black population. The difficulties that these populations have in accessing health services as well as the lack of preventive practices justify the need for interventions in the health area, as it is verified that gender inequality and racism are factors of vulnerability for women, and with a higher risk of health problems for black women. The search for alternatives to face these issues is an ethical duty of all those involved in health, seeking to contribute to the expansion of actions to promote gender equality, better social conditions and the full health of black women.⁶

It highlights the richness and relevance of working with participatory studies, especially reinforcing the thoughts of the educator Paulo Freire, which lead to the emancipation and autonomy of the subjects. In this perspective, dialogue is conceptualized as an affirmation and appreciation of the respect and ideas of the other, producing and reinforcing their autonomy and authorship in their reality. It also highlights the direct relationship of dialogicity with faith, with hope, with humility, with trust and, without fail, with love and unity among peers.⁷⁻⁸

Immersed in this context, this study aims to understand the relationship of social determinants in promoting the health of women living in a quilombola community, by means of Paulo Freire’s Research Itinerary.

METHOD

A qualitative study with a participatory character using the Research Itinerary of Paulo Freire. The Freirean Research Itinerary takes place during the Circles of Culture, where awareness emerges from shared daily life, aims at it, problematizes it, understands it and reinvents it. In this space, different and positive exchanges and knowledge pass through where, through the process of action-reflection-action, everyone advances and “says goodbye” differently from how they enter.⁷

Thus, in a schematic way, Freire’s Research Itinerary consists of three dialectical moments interwoven and arranged in the course of the Culture Circle: thematic investigation, coding and decoding and critical unveiling. It proposes a sequence of steps, which are interrelated, in a movement of construction, which advances and retracts, as indicated by the existential situation experienced in the meetings of the Culture Circle.^{1,7,9}

The research was performed in the Morro do Fortunato community, Macacú neighborhood, Garopaba municipality, state of Santa Catarina (Brazil). Located 8 km from the city center, it is necessary to travel on dirt roads, crossing the dunes and part of Lagoa do Macacú. About 180 residents live in this community, an average of thirty-one families according to the verbal information of a resident, all descendants of the Fortunato slave, who was the son of a slave and a landowner in the Garopaba region.

The Culture Circles took place with the “group of women” that met weekly. This group consisted of ten quilombola women aged between 24 and 54 years old, residents of the community and who were interested in discussing and reflecting on the relationship of the SDH in their daily lives and in promoting the health of the actors involved. This research did not include women residing in other adjacent quilombola communities.

The steps of the Itinerary were performed during the course of six Culture Circles from April to June in 2016. In the course of those three months, the stages of thematic investigation, coding and decoding and critical unveiling were performed

The generating themes were coded and decoded during the dialogic meetings. The themes were highlighted in cards and panels, and twenty generating themes were raised, being reduced to eight themes that were discussed, coded and decoded so that, in the fifth meeting, two were unveiled. The dialogic process allowed a new perception focused on the participants’ reality and, with that, the female empowerment strengthened by the highlighting of the potential of living in community.

To assist in the registration of the themes, a field notebook and an audio recorder, previously authorized by the participants, were used in order to record details and manifestations in full. Two research assistants who were present in the course of the meetings collaborated in this process.

The free and informed consent form was read and explained to all, signed and accepted. To maintain participant confidentiality, they were called codenames chosen by themselves.

RESULTS

Culture Circles

For the meetings to take place, a visit was initially made to the coordinator of the Quilombola Association Morro do Fortunato, presenting the study proposal and the research objectives. From this first contact, the affection and reception of this representative was begun, strengthening the intention of working with this population and intensifying the certainty that the educator Paulo Freire’s theoretical and methodological framework was the guiding principles of this process.

With that, meetings immersed in the unveiling of man in society were proposed aimed at emphasizing dialogue, attentive listening, respect for the other, the bilateral construction of knowledge,

horizontality and autonomy and having culture, awareness, the social/political being, the transformation and, consequently, both individual and collective empowerment of those involved was achieved.

Accepting the Culture Circles

At the first meeting, the research proposal was presented, the “group of women” agreed on the Culture Circles and a dynamic presentation was held, where each participant spoke about themselves and expressed their needs and adversities in their own way.

In the second meeting, the dates and times for the research were agreed on; they were asked about their perceptions regarding the proposed intervention in a circle where the dialogue, in the Culture Circle, was the driver of the narrowing of the relationships that happened in a horizontal and reflective way among all the participants.

From this concern, some opinions differed, but the consensus was reached with Fragrant’s speech:

The circle is much richer ... we listen to each conversation and we analyze it ... the person’s thinking changes ... speaking in a circle is much better than speaking individually ... and you will not even answer what you want ... In a circle like this each conversation goes on and opens the mind ... we talk to each other ... (Fragrant).

Yes ... and soon we stop feeling embarrassed and we start talking ... (Red).

From these testimonies, the intent of this practice was strengthened and the group agreed to return. The launching of the Culture Circles, a collective and dialogical space where the Freirean Research Itinerary was developed, enabled the action-reflection-action movement. Dialogues were held on topics of interest related to the group and the construction of initially naive thinking was encouraged for a path of awareness.

Investigating themes with Culture Circles

The Thematic Investigation stage where the generating themes emerged occurred in the third dialogic circle. With the participation of nine women, through a magazine clipping and pasting activity based on the Dahlgren and Whitehead Model, which represents the SDH² in different layers from the micro to the macro determinant level, visualizing the hierarchical relationships between them.

The participants debated the determinants in a happy, relaxed and reflective way. In addition to participating in the proposed dynamic with the selection of figures, they interacted with each other and shared the images and discussed the theme listed for the debate in small cultural circles.

Some concerns emerged, causing greater interaction and immersion of participants in the Culture Circles. The meaning of health and disease was questioned, the factors that involve being healthy, what it is like to live in Morro, being quilombola, correlating with the figures that were being inserted in the construction of two panels.

With the elaboration of the panels that were discussed and reflected on, twenty generating themes related to the realities of women and linked to the relationship of health and its determinants were raised.

These themes raised during the Thematic Investigation were grouped according to the levels of care that interact in order to achieve equity in health and well-being² such as: Structural Factors: access/transport; healthy eating; sanitation; environmental education; health. social position and stratification determinants: quilombola women; work/employment/unemployment; child labor; education/future; health; intermediate determinants: slavery/suffering/pain; racism; be a warrior; refuge/fleeing poverty; leisure/happiness; love/family; friendship/friends; health systems/saving lives; sport/women in sport; violence: labor struggle/fight/war; preconception; health.

The themes set out in the Structural Factors axis represent macroeconomic issues related to work, taxation, social protection, governance, social and environmental standards and policies which we are immersed in a macro context.

The themes grouped in this axis mention tools that are limited to individual and community management. Although they have a movement towards the government for issues such as access and transport, they still perceive a limitation in the delivery of these services; they know, through the media and courses offered by public management, that healthy eating, environmental education and basic sanitation is essential for the community, but it is nevertheless fragile and they recognize that the infrastructure received is under development.

Regarding the Social Position axis and the Stratification Determinants, they refer to themes related to socioeconomic characteristics such as social class, gender, race/ethnicity, education, occupation and income.

For quilombola women, the tools linked to this axis are a consequence of the Structural Factors that directly influence the socioeconomic issues translated by work, employment and unemployment and education and/or disparity in schooling, limiting their prospects for the future with inclusion and social participation.

Regarding the Intermediate Determinants axis, the themes related to circumstances, behaviors and psychosocial factors in addition to health systems. It is linked to psychological and micro determinant issues. In the themes arranged in this axis, there is a direct interference of both Structural Factors and Stratification Determinants. Women reaffirm and strengthen themselves when it comes to the elements that suggest friendship, love, family. Elements that make them warriors and more resistant to violence and daily struggles. These strengths allow them to experience leisure and happiness.

Coding and decoding themes with Culture Circles

The process of encoding and decoding occurred in the fourth Culture Circle. The 20 generating themes raised during the thematic investigation were presented in the form of cards for the collective visualization of the group and subsequent coding. Each participant was asked to choose a topic of their greatest interest and in which she would like to be discussed in the Culture Circles. From this, they were codified in eight significant themes: quilombola women; leisure/happiness; health; love/family; access/ transport; education/future; racism; be a warrior. Among these themes codified by the participants, two significant themes were decoded, which, when unveiled, deepened the empowerment and the relationship with health promotion in this community.

Curiosity about the Method and empowerment versus the search for their rights and concerns emerged, as highlighted in the following statement:

So, here comes my question ... What we are discussing ... Health, education ... All of this here in the Morro ... Are you taking it there for your course ... For example, are you taking what we need here in the community... We will have some resource ... Any incentive? You will arrive here one day with your teacher ... (Flower).

Based on this statement, we can see the relevance of the dialogue produced within the Culture Circles and the collective responsibility that it provides. The concerns related to quilombola living as well as being a woman/being quilombola in contemporary times are emerging issues that require reflection. In contrast, the methodological structure of the Freirean Itinerary makes these discussions possible. Some examples of the themes that were being worked on and matured, discussed and reinvented are raised.

Thus, when rereading the cards initially proposed, Flower expresses her new and brief interpretation of the Freirean process:

Everything here has to do with us ... Everything focused on our community! I really see that we will be able to talk and discuss about us (Flower).

From now on the eminent need of the group is proposed to deepen the theme “empowerment versus the search for your rights/concerns” in which it continues to be decoded with the most prominent themes “quilombola woman” and “access/transport”, which, after being decoded, were unveiled in the large group. It should also be noted that the themes highlighted are cross-cutting themes that permeate the other discussions and allow the group to cover and understand the close relationship of the DSS and the quilombola living.

Thus, when asked about their identifications as “being a quilombola woman” and what they feel about it, they promptly respond:

Ah, our history comes from the ancestors ... Now we are not so recriminated ... But there are places that we go and they look at us a little strange ... As if we were different from others but we are not right? (Loving).

In relation to this theme, we sought to reflect with the participants on their afflictions and conflicts, seeking to relate to the historical process the strengths achieved in this construction of struggle and search for social, political, land and, above all, citizenship and respect. It emphasizes the importance of the woman who instigates them to apprehend their roles in society and especially, with the community in which they are inserted.

When coding and decoding the theme of “access/transport”, initially represented as a difficulty of access focused only on transport and urban displacement, the participants reported and raised concerns:

Access here is much more complicated ... there are not many schedules and therefore few options and everything is too far away. When it rains then ... We have to bring the students up and down (Flower).

There is no pharmacy here ... Everything is down there ... When there is no bus we have to go up with several bags ... (Honey).

In these statements, the difficulty of access is clearly expressed due to the distance and location of the community overlapped by the neglect and political and social disengagement regarding the new options for trade and especially urban transport that meets and approaches the needs of this community. They reinforce the group’s involvement and, when reflecting in the face of adversity, they begin to realize the transcendence of this issue:

What we talked about most about access was transportation, which is very precarious here for us. But if we think about everything, we have difficulty accessing ... Even to get information (Go-getter).

With this, the participants infer a new perception and understand the importance of strengthening themselves as a community and with that, face and seek alternatives to their demands and adversities, and at the same time realizing their strengths and potentials:

The difficulty of access and racism shows how much we are warriors ... We are going around the difficulties and with a good sense of humor, right ... (Flower).

Participants in dialogue in the Culture Circles highlighted the themes of “access” and “being a quilombola woman” as a priority in the discussions. The theme of “empowerment that seeks to rescue their rights/concerns” still needed to be worked on by quilombola women as a strategy capable of overcoming their difficulties and obstacles. However, as they progressed in the debate, reflections were produced by the group and envisioned their unveiling.

Unveiling the themes with the Culture Circles

The Critical Unveiling took place in the fifth and sixth Culture Circle. The participants immersed and involved in the action-reflection-action process deepened the dialogue on the themes that were being discussed, especially on the theme of empowerment and being a quilombola woman. Thus, in order to achieve the unveiling that coincided with the group's request to deepen the generator theme of quilombola women, dynamics were carried out through a study on this theme. With this, we sought to bring the researchers' experiences closer to the historical and cultural curiosities and health needs of this population.

Thus, to enrich the reflection, in the fifth Circle of Culture, a master's dissertation by anthropologist Miriam Furtado Hartung, 1992¹⁰, was made available by the group. It is an ethnographic research that portrays historical, cultural and land-related issues, providing a comparison with the so-called "Morro" and the "Vale". The dissertation identified as "book" by the group was debated during the Culture Circle, and divided into eighteen topics related to being quilombola women.

The following statements express the appreciation and perception of the visibility of this quilombola community and the unveiling of fruitful reflections:

I consider myself a quilombola woman and I am very proud of our history. Seeing you tell all this there in this book I see how much we have to know and give more value to us (Loving).

When asked why they chose this theme to deepen the group, Batalhadora, in an empowered way, replies:

I think we chose because of our race To talk about us Because we are very important There are a lot of people who come up here and want to know about our history (Go-getter).

The "quilombola woman" theme was being unveiled and concomitantly sought to reinforce their potential, bringing them together and valuing community living, unity and proximity to the group. With this, it is proposed to leverage tools capable of unveiling their weaknesses and, at the same time, to strengthen and promote strategies to fight for their rights and needs. This is revealed in the following statement:

We don't feel that way ... If you value us, we are very happy! For the things we do are normal for us ... The daily lives of us For us it is normal ... Working women For me I think she is more working women than men. ... The women here are very warriors warriors! (Go-getter).

And, soon, when rethinking the discussions proposed by the Circle, they begin to perceive the strength of women and the representative female role:

My mother also went through so much alone...! That's why I see us women as warriors ... When we fall we will shake it off and get up again! Women are very strong! Her mother went up the hill, carried firewood weights, carried feed, weeded, planted ... Her mother is a warrior ... I went to the hill alone! He worked in the fields, fed the cattle! We mirror her! (Fragrant).

In this moment of retrospect and reflection regarding the role and valorization of women, some previous themes, such as health, racism and being a warrior, were returned to the Circle for debate, seeking new reflections and possible problematizations to raise critical awareness and discover the limit situations.

At the sixth meeting of the Culture Circle, a round of knowledge was promoted where health and disease were discussed, promoting curiosity and the exchange of knowledge among the participants. As a possibility to exchange and strengthen the group, controversial issues were discussed, such as women's health regarding taking care of themselves, eminent diseases of the black population, healthy habits, routine exams, among others. The proposal provided an opportunity for the transition from common sense to a critical view regarding health, unveiled in a broader way and based on the

SDH. Emphasis was placed on care, respect for others as well as a new meaning of access, aimed at information and health promotion.

Everything they said I took in... I loved it and made me think more about my health. I see how much we have to take care of and we don't even know it is important (Flor).

Finally, the participants emphasized gratification and learning regarding participating in Dialogic Circles. They emphasized that at the beginning they had some fear which turned into an opportunity for learning, friendship and relaxation, which is reported in the following statements:

At first, I thought "what a boring thing" but I loved it ... I was really happy when the day came and I went home telling everything we learned and discussed here "(Violet).

It's a win for everyone! (Violet).

Because whether we like it or not, we learn, right ... Your research was supposed to be here with us ... Because it would be good for us!!! (Flower).

The Method is also reinforced as a form of learning and knowledge exchange, including sometimes including a course or lecture by the group, which is described below:

Thanks! We really enjoyed it and I was always happy when it was your course day (Red).

We commented among ourselves that next year we want to give a lecture with you to bring the community together ... (Flower).

And, as the evaluation of the adopted method is significant and important, Flower ends with the following interjection:

Remember that at the beginning I stood back? I had asked you, what would this interview be for ... if you would bring us a resource ... if we would have feedback ... I think I shouldn't have even said that in the beginning [...] We learned a lot and let it stay forever and forever! Too bad it's over! (Flower).

In the sixth and final Culture Circle, it was agreed to have a festive meeting with presents. For the closing, all the women were invited to join in a group hug while listening to the song "Te Desejo Vida", composed by Flávia Wenceslau, demonstrating the group's love, union and potential. Values practiced by them, however often entangled and not perceptible.

DISCUSSION

When studying and deepening issues related to vulnerable communities, there is an important need to focus on participatory research, where immersion and horizontal relationship need to be present.

Thus, it is clear that during the meetings in the Culture Circles, the approximation and complicity between the participants grew stronger, allowing the unveiling of the themes and reflections on their history and life and health conditions.

The advent of health promotion suggests a new paradigm that aims to break the fatalistic concept of the disease, based on collective ideas and based on autonomy, co-responsibility of the subjects, and empowerment seen as a way to make people aware of reality.⁸⁻⁹

In this context, complexity is reinforced not only of conceptualizing health or the right that refers to it, but also listing the elements that will allow health to be achieved or not.¹¹

It is important to highlight the importance of interventions in the health area that focus on the adversities experienced by women and, in particular, black women, considering that inequality between men and women is a factor of great vulnerability for women.⁶

The authors above still confirm the weaknesses explained in "being a quilombola woman", as it refers to a historically disadvantaged position by being a black woman from a socially lower class. They often reveal feelings of unhappiness regarding to situations of oppression to which they are subjected and show the differences established between the sexes that are socially legitimized.

Women are educated to care for the home, the family and to be excellent mothers, which reinforces their resignation and conformity to forget about themselves and only take care of others.⁶

Nowadays, the concept of women's health has been expanded, by the inclusion of human rights and citizenship as care needs. Together with the advent of Health Promotion, the world scenario has been emphasizing the integral view of individuals and with this, women are perceived in all aspects and not only those regarding reproduction.⁸

In view of this, the importance of combining Health Promotion strategies in strengthening and empowering women is perceived. In this study, the potential of working with Culture Circles is reinforced, correlating Health Promotion to SDH. Participatory research provided greater clarity to participants and the possibility of envisioning Health Promotion with quality life tools and thus linking to principles such as coexistence, commitment, collaboration, co-responsibility and solidarity.⁸

Another result that emerged from the meetings was related to access and its wide dimensions. When considered an important means of guaranteeing the health care process, access and accessibility are considered fragile and require attention.¹¹

This is clearly reinforced by realizing the vulnerability faced by the Brazilian black population, both epidemiologically and socially, resulting in difficulties in accessing health, information and Health Promotion services.¹²

It should be mentioned that in the start of the Research Itinerary, the thematic access initially related to the difficulty of transportation and urban displacement was unveiled and the participants started to have a new perception regarding adversity and started to understand access as barriers that transcend the geographical issue.

Faced with this, economic and ethnic-racial obstacles stand out among the elements that suggest the production of inequities which results in the vulnerability of different social groups.¹³

The thematic unveiling reveals the naivety that often permeates the daily lives of these women in which they begin to perceive their rights and potential from a new angle. In the course of the research, there was a real overcoming of the limit situations, which represent what is hidden and stimulate a reflection of reality, where access is allusive exclusively to the difficulty of transportation. There is a collective awareness of reality in order to face the adversities that occur in the participants' daily lives, thereby reinforcing the importance of knowledge of their needs and their rights as citizens.

Many studies report the issue of the invisibility of women's work as a recurrent theme and the consequent disqualification of women's work.¹⁴

Women's empowerment versus the search for their rights/concerns appears in this study as revealing their weaknesses. With the possibility of interaction between the participants of the Culture Circle, the participant research allows, in addition to the realization and collection of data, a deepening of the themes that arise during the steps of the Itinerary.

The unveiling of the quilombola woman theme was expanded and the aim was to value the independence of the participants in this community as well as their strengths in the face of adversity, in which they themselves cite their relevance for supplementing income. It is noticed that when they receive their own income and do not depend financially on men, there is a visible increase in their responsibility as a woman. As a result, women felt valued in society and started to have a new perception as citizens.¹⁵

Empowerment is seen as a process that enables decision making and, consequently, the expansion of the critical-reflexive capacity of women to look at the reality where they live, work and relate. This stance that can move them in search of what they want, as protagonists of their life, insofar as they manage to understand and do in the face of a culture whose structure still subjects them to positions of subordination.¹⁶ Women's empowerment is a health promotion tool that should

be explored by society as a whole, seeking to support strategies which can strengthen vulnerable populations and consequently improve the quality of life, citizenship and reduce health inequities.

CONCLUSION

Based on intricate dialogical meetings and the Paulo Freire method, with the intention of understanding the relationship of SDH in Health Promotion of women living in a quilombola community, some points can be underlined. First, it is clear that health promotion is directly linked to the different SDHs, which interfere in the health and disease process of these communities.

SDH are identified as tools not only to explain inequities, but also contribute as a lever that makes it possible to understand social inequalities and the different dimensions of access.

This study, when reporting the experience of the participants in the Culture Circles, highlights the empowerment of women as a tool to fight and care for themselves. It allowed a real meeting between the participants and provided opportunities for real dialogical exchanges. Paulo Freire's Research Itinerary allows constant opportunities for reflection and thus, real action strategies in their realities.

Concerning possibilities and limitations, this study allows collective learning and overcomes research questions which are immersed in the needs of the participants. It allows dialogical exchanges and the unveiling of their realities. However, as it is a research, it requires a limited time, making greater flexibility between meetings impossible at times. It is hoped that in the future extension projects can be developed as a possibility to continue the results of this research.

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NOTES

ORIGIN OF THE ARTICLE

Article extracted from the thesis - Health Promotion of quilombola women: the relationship with Social Determinants, presented to the Postgraduate Program in Nursing at the Universidade Federal de Santa Catarina, in 2016

CONTRIBUTION OF AUTHORITY

Study design: Durand MK, Heidemann ITSB.

Data collection: Durand MK.

Data Analysis and interpretation: Durand MK, Heidemann ITSB.

Discussion of results: Durand MK, Heidemann ITSB.

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APPROVAL OF ETHICS COMMITTEE IN RESEARCH

The research was approved by the Research Ethics Committee of the Universidade Federal de Santa Catarina, under opinion No.1,466,641 CAAE: 53143216.6.0000.0121.

CONFLICT OF INTERESTS

There is no conflict of interest.

HISTORICAL

Received: July 24, 2018.

Approved: November 19, 2018.

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