

CHALLENGES OF ENVIRONMENTAL EDUCATION IN A HOSPITAL INSTITUTION

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ABSTRACT: A study aimed to get to know the challenges of environmental education in a hospital, from the perspective of the individuals involved in its planning and execution. The research used a qualitative approach, case study type, using the workers of the Center for Environmental Education of a hospital group in the Rio Grande do Sul state, Brazil, as subjects. Data were collected, between August 2011 and January 2012, through documental research and interviews, and analyzed by content analysis. The challenges of environmental education include the lack of an institutional environmental policy that works as a financial, legal, human, and structural background for the development of actions focused on this topic. It was also observed that academic graduation does not consider environmental sustainability. It is clear that to work on these institutional challenges and overcome them during the development of environmental education is a prerogative for the construction of knowledge in environmental sustainability.

KEYWORDS: Environment. Nursing. Environmental education.

DESAFIOS DA EDUCAÇÃO AMBIENTAL EM UMA INSTITUIÇÃO HOSPITALAR

RESUMO: o estudo objetivou conhecer os desafios da educação ambiental em um hospital, sob a ótica dos indivíduos envolvidos no seu planejamento e execução. Pesquisa de abordagem qualitativa, do tipo estudo de caso, tendo como sujeitos os trabalhadores do Núcleo de Educação Ambiental de um grupo hospitalar do Rio Grande do Sul. Os dados foram coletados entre agosto de 2011 e janeiro de 2012, por pesquisa documental e entrevista e sofreram análise de conteúdo. Os desafios da educação ambiental na instituição investigada englobam, principalmente, a carência de uma política ambiental institucional que funcione como um arcabouço financeiro, legal, estrutural e humano para o desenvolvimento de ações voltadas ao tema. Destaca-se, ainda, a falta de uma formação acadêmica preocupada com a sustentabilidade socioambiental. Trabalhar esses desafios, e contorná-los durante o desenvolvimento de ações de educação ambiental, é uma prerrogativa para a construção de um saber em prol da sustentabilidade socioambiental.

PALAVRAS CHAVE: Meio ambiente. Enfermagem. Educação ambiental

LOS DESAFÍOS DE LA EDUCACIÓN AMBIENTAL EN UNA INSTITUCIÓN HOSPITALARIA

RESUMEN: el objetivo de este estudio es conocer los desafíos de la educación ambiental en el contexto hospitalario, desde la perspectiva de los individuos involucrados en la planificación y ejecución. Investigación cualitativa de tipo estudio de caso, realizada con los trabajadores del Grupo de Educación Ambiental de un grupo hospitalario del estado de Rio Grande do Sul, Brasil. Los datos fueron recolectados, entre agosto de 2011 y enero de 2012, mediante recolección documental y entrevistas, sometidas a análisis de contenido. Los desafíos de la educación ambiental engloban la carencia de una política ambiental institucional que funcione como un sistema financiero, legal, estructural y humano para el desarrollo de las acciones relacionadas al tema. También se destaca la falta de una formación académica preocupada con la sostenibilidad socio-ambiental. Trabajar estos desafíos durante las acciones de educación ambiental, es primordial para la creación de conocimientos acerca de la sostenibilidad socio-ambiental.

PALABRAS CLAVE: Ambiente. Enfermería. Educación ambiental

INTRODUCTION

In recent years, the continuous daily serving of information about expected and unexpected environmental disasters on ecological problems and their impact on society has been clear and continuous, stemming mainly from the globalization of the world and the cartesian scientific logic dominant in human thought. This process of environmental degradation grows, astonishingly, and its effects are felt in everyday social and work spaces; however, despite this, few measures are taken to rein it in or reduce it.

Part of this question can be explained, perhaps, by resuming the historical and social circumstances, surrounded by its determination, to the extent that this crisis situation focuses on a long history of domination of nature by humans, with philosophical roots settled from the Old Age and reinforced by the cartesian/baconian tonic that man is the master and possessor of the world.¹ Hence the origin and perpetuation of deep anti-ecological attitudes, understanding material progress as unlimited and built on the domination, manipulation, and exploitation of nature.

As a consequence of this notion, the world today can be said to be ecologically dangerous because it introduces risks that previous generations did not have to face. These are threats resulting from human action itself, mediated by the impact of industrialism on the material environment.² In this sense, contemporary sociologists indicate that we currently live in the so-called "Risk Society," because the risks are part of the daily lives of human beings.^{2,3} The environmental issue is not an isolated incident of the social fabric, but the fruit of a complex and delicate web of intertwined relationships with various social actors.¹

In this perspective, Environmental Education (EE) is essential to prepare new attitudes and values, opening doors for a sustainable, equitable, and democratic future.⁴ In a hospital setting, the activities proposed by EE activities may encourage more responsible actions (by the workers) with the environment, reordering social practices,⁵ which has the utmost importance, considering that the hospital has a huge range of activities with environmental impact, generating countless waste and consuming large amounts of environmental resources. Considering the lack of such spaces for reflection, the automation and mechanization of conduct is perpetuated. In this condition, the subjects remain outside participatory spheres, conforming with the reality put to them and with

the lack of prospects that are common to them or assuming banal speeches.^{5,6}

Once we recognize the importance of EE in promoting change, it becomes necessary to discuss the difficulties encountered in carrying out educational processes, particularly in the case of the hospital context; a wide field for its possibilities, actors, and interests. Looking for such difficulties, and understanding them, means facing them as challenges to be overcome in an attempt to make EE a promoter of environmental sustainability. Discussing these challenges can be a way of indicating, to health facilities, (possible) ways to achieve EE, pointing out examples to be considered when thinking about themselves as invested in this area.

Thus, the study's guiding question was, how does EE happen in a hospital through the individuals directly involved in its planning and formal implementation? Therefore, the study is aimed at getting to know the challenges of environmental education in a hospital, from the perspective of the individuals involved in its planning and execution. The results arising from this research contribute to the debate on the subject, especially for nursing, which represents the majority of the workforce in hospitals, and, in many of these institutions, participates directly in environmental management committees.

METHODOLOGY

The research was guided by a qualitative approach, characterized as a descriptive-exploratory Case Study (CS), by proposing a narrative limited by time, space, and the circumstances in which it is inserted.^{7,8} The CS aims to study a social unit in a deep and intense manner within its actual context,⁷ being guided by complex and contemporary problem-issues, of the "how" and "why" type,⁸ which are little known, like the object of this research. For this type of research, it is appropriate to adopt different research fronts and use different techniques for data collection that is characteristic of the CS. Thus, there is a dialog between the evidence found and the assurance of reliability and the thread of the interpretations woven.⁵

The survey and analysis of the data was carried out between August 2011 and January 2012, along with a hospital group in the state of Rio Grande do Sul, which constitutes an important network of public hospitals in the south of the country and an important center for education in

the region. In the vocabulary of this research, the research subject was defined as any individual employee of the hospital group in question who was (directly) involved in the planning and/or implementation of EE in hospitals of that group, which included members of the Center for Environmental Education of the hospital group and key informants indicated by them, totaling nine individuals.

Data collection was based on documentary research and semi-structured individual interviews being closed by empirical saturation. The documentary research sought access to the relevant documents object of the study, among them: institutional reports, newsletters, announcements of courses, minutes of meetings, dissemination of materials used in seminars, meetings, lectures and technical visits, strategic management agendas, and plans for waste management, etc. The interviews, in turn, were pre-scheduled and held in a reserved place, digitally recorded and later transcribed. Furthermore, they were conducted following a script containing guiding questions on the subject under investigation.

The data were analyzed based on the proposed framework for content analysis,⁹ with the aid of ATLAS.ti software (Qualitative Research and Solutions). This software is intended for the qualitative analysis of information in textual, graphical, audio, or video form, offering tools to manage, extract, compare, explore, and reassemble – systematically, rapidly, and practically – significant parts of a large amount of data. The program works similarly to a smart “container,” which stores the trace information generated in the primary document and the materials associated with it, enabling them into a single working entity.¹⁰ Through this process, four themes were built, with one of them discussing the challenges of EE in hospitals, conglomerating six categories, which will be presented in this article.

It should be noted that the research project was submitted for the approval of institutional direction and the Human Research Ethics Committee in Human Beings of the hospital group, with the intention of ensuring the fulfillment of Resolution No. 196/96 of the National Health Council. Only after the processing of all the demanded requirements and the issuance of the letter of approval (Project 11-127 approved on 08/02/2011), the collection of the target information was initiated. The selected subjects participated in the study after having read, accepted, and signed the Terms

of Free and Informed Consent. Anonymity was preserved by identifying the participants with the letter “I” (standing for interviewee) followed by a number (1, 2, 3...).

RESULTS AND DISCUSSION

When viewing the steps taken by the hospital group investigated, in terms of EE, we observe the presence of some achievements in the educational field, although timid, punctual, and fragmented, and therefore insufficient to make the necessary changes faced with the current environmental degradation. These survey results denote that the fundamentals of EE – with the group in question – flourish from the initiative of some passionate defenders of the theme, or they are limited to certain areas of the hospital. Such initiatives were especially connected to the activities of the Center for Environmental Education (existing hospital group in the period 2008–2011) and referred to discussions, lectures, technical visits, seminars, and other actions about waste management, preservation and environmental health.

Of course, the failure of the outcomes of the planned educational activities needs to be analyzed from the point of view of the lack of actions and resources to achieve them, but also from the perspective of the difficulties and challenges encountered by EE within hospitals. Some of these difficulties were brought by the subjects of this research, and they are analyzed in the categories below.

Category 1 “Because there is no institutional policy: the challenge of consolidating EE”, highlights the difficulty of achieving its actions in the context of absence of a political-institutional framework that legitimizes, offering consistency, objectivity, and continuity in the education process. Perhaps this is one of the biggest challenges of EE in hospitals: creating and consolidating this institutional policy. Ethical reflection on the subject and the presence of an institutional policy, linked to the subject, are crucial for effective awareness on environmental issues.⁶

According to the respondents, the formalization of such a framework is the real possibility of structural, financial, and human input, as well as legal support for EE actions. In this situation, the hospital would assume its social responsibility and “would say” to its employees: *look here, we think that this is important* (I_2), that environmental issues cannot be forgotten about. After all, when EE

acquires a formally constituted place, it becomes feasible that existing multiple actions comprise an integrated mechanism for environmental management. Because when the institution takes EE as its responsibility, it says to its worker: [...] *the target is there, you have to see it, you have to do it* (I₅).

Building this framework, and working with it together with employees, is a way of balancing the routine, of cracking that protective cocoon that feeds the routine by looking but not seeing, and seeing without feeling, of seeing without living the environment.² And when the engagement of the whole group is desired with the environmental problems, balancing the routine is essential. Therefore, engendering the necessary transformations takes more than individual changes; the presence of this political dimension, anchored in institutional practices, is imperative.⁵ This condition is predominant for the solidification of an effective space for and from EE in the hospital.

According to the participants of this research, the offer of this structural, financial, legal, and human mote can transform fragmented and punctual actions into those that are contiguous and that emanate from the collective, increasing the range of its reach. "Giving" objective and specific conditions for change to happen means creating conditions that ensure effective and affective dialog, enabling ties of confidence among those involved.¹¹ Such a manifestation is revealed in statements such as: *I think it had to be a policy instituted by the board: 'Well, I want it because I'm the administrator and I understand that, to reduce costs, to implement an environmental management plan, it is necessary! And it will help me fulfill my role, as regards the hospital, to promote health [...]'* (I₁). [...] *So, for us to change this, there would need to be an environmental policy in the institution, a guideline [...], I think the lack of guidance, of an EE policy is a crucial point [...]* (I₂). *Therefore, if the hospital does not embrace it as a goal, as management policy, it is very complicated [...]* (I₉). [...] *This environmental issue should have a single stem! [...]* *Then yes, there would be some continuity; if not, the thing is lost!* (I₆).

In other words, with the endorsement of a local policy, sustainability becomes a reference for the institution, which enables the gradual construction of an institutional commitment and new ways of thinking, believing, and doing. This commitment, to be treated openly and exposed in a structured policy, serves as a powerful mechanism of "pressure" so that individuals think and act in an environmentally correct manner.¹² In

short, when the hospital structures this policy, it commits itself to displaying a character of totality and permanence as regards EE actions, creating an identification with the institution's social and environmental sustainability. Once this commitment is established, there will be a continuous reminder of the need to have a different view of the environment in the institution. Thus, the pursuit of environmental sustainability will become broadly aligned with the systems, integrated to the structures and institutionalized in the corporate processes.¹²

Considering the nonexistence and/or inconsistency of this policy, it is possible that environmental proposals become empty and/or short-term, propagating themselves in occasional and superficial actions that gradually fail in their opportunities since they lack the "forces" for a fuller development. Without regard to this "political" sphere of EE, it is difficult to develop the criticality and reflection necessary for education and collective work, since it is the political dimension that allows for collective participation, through solidarity.¹³

We must politically ensure the conditions for change, which is a "basic duty" of the institution. In the proportion that the organization validates the values of sustainability through the successes achieved, there will be a surrender of its former skepticism to understanding an environmental complexity.¹² Only in this way shall educative actions acquire consistency, sustenance, and support; and *things will progress* (I₂), everywhere. Otherwise, the EE process will break up, and *everything that breaks up does not sustain itself, it ends up dispersing* (I₁). The existence of *people working in any given sector [...]* and *establishing some EE actions, does not actually mean an institutional recognition [...]* (I₉). The existence of these individuals, with their own wills, contributes to the effectiveness of EE. However, it may be that, with the support of an institutional policy, it becomes feasible to maintain a working group to conceive and implement EE projects.

The need for establishing this group is shown in category 2 "There should be a team: it would make a big difference to have people looking just for that". When respondents were in favor of the constitution of a group to work exclusively with EE in the hospital, they recognized that this variable cannot be moved solely by effort and the will of some (although this movement is relevant). The presence of people thinking about the environment and about EE is imperative, and more than

just thinking – acting on it, applying their activities in that particular area. They therefore argue that a “formula” to break the possible fragmentation and specificity of EE is to establish a formal and institutionalized group – connected to and supported by an institutional policy, and recognized as legitimate and permanent to work continuously with this issue and with it alone.

Thus, instead of the juggling and contortions of some in an attempt to stimulate the large group of workers, there will be a network of individuals, institutionally grounded, seeking to involve others in the environmental cause. Furthermore, one should consider that, as the defense of this cultural shift is a pioneer movement in the institution, it is important that it becomes the goal of a group, rather than being the aim of this or that individual alone. Nonetheless, so that this is not just one more group among many others that come and go, it needs the foundation of a sound institutional policy or it will soon succumb.

Therefore, for the respondents, it is essential [...] *to have a group, despite it being small, thinking about and working with EE; and not having to think about EE while also worrying about the work that is waiting on the desk [...] because otherwise, when the work gets heavy [...] you will do that for which you were hired; your function, which is your duty! Because, otherwise, it'll be bad for you, for your sector and, who knows, for the management (I₁); [...] so, this is the way: you need a group, a team that works solely focused on EE [...] (I₇).*

In fact, prior testimony confirms that there is no way to solidify an EE process in health institutions, only through the “heroism” of some. The input of an institutional framework is needed. After all, it is the institutional framework that allows for establishing a local environmental policy, conducting situational diagnoses, searching for alternative solutions to environmental problems, and promoting funds to plan and run educational activities for sustainable actions. Perhaps, in a one or two centuries, these comprehensive actions (of institution-supported groups), leading a new cultural orientation, are no longer needed, because people will have already internalized many of these new ideas, seeing sustainability as “natural.” However, until then, these cultural pioneers will be invaluable to urge people, pro-actively and intentionally, to accelerate this change as much as possible.¹⁴

In this process, it is important (and no less challenging) to involve supervisors/managers in

the defense of environmental sustainability in the hospital, which comprises category 3 “Here in the hospital, nothing is done without the managers’ support”. In fact, working with institutional leaders on the various facets of sustainability alienates any “possible” skepticism they might have around this issue, thus increasing their capacity to withstand the pressures from the dominant paradigms in the market. Sensitizing management is the way to overcome the natural defense reaction of the *status quo* present in these organizations.¹²

The movement to sensitize supervisors will require them to stand against or in favor of sustainability; it will require them to take a stance in this or that direction. Whenever there is a positive response, leadership will take on the role of the messenger (the precursor for defending environmental issues within the institution), preacher (disclosing sustainability), teacher (teaching the EE process), and cheerleader (encouraging environmental values in the institution). When exercising these roles, managers will seek to engage other people in the organization in the construction and defense of that EE support framework.¹²

Therefore, EE actions should have a close connection with the different institutional managers (starting with upper management), garnering support and establishing the necessary arrangements for their enforcement. According to the respondents, the involvement of management is an indication to others that “this is how things are done around here: with sustainability”, “this is how we (the institution) want to act, this is what we want to defend, regardless of our many other problems”. Apparently, without that guarantee, the process of EE does not take hold; it is fragmented, specific, and in the background, and finding structural and human difficulties is weakened by the lack of support.

Nevertheless, this purpose should be considered in this regard (raising awareness), which some of the study subjects refer to as political occupation of leadership positions. For them, this characteristic may (although not necessarily) substantially increase the challenges involved in sensitizing managers to the extent that the “new managers” may be totally uninitiated in relation to the environmental cause, which does not represent, of course, their not being open to the cause, but implies a major expenditure of time to achieve it. This can lead to losses in the continuity of the EE process when coupled with the absence of an established local policy. In this case, further

sensitization would be required; other people need to be “obtained” for the cause; and the work, in a way, would restart, or it would then be at risk of not finding the same input, the same incentive, or even taking different paths. Besides, it is tiring, discouraging, and frustrating to have to go through this process with every new administration. This condition of repeatability may even undermine the energies available for actions of EE or even disintegrate the groups formed.

The following statements show how the occupation and change of management positions may influence the development and continuity of the actions of EE: [...] *the hospital, itself, is managed by people who do not meet the technical criteria; positions are assigned based on politics. [...] These guys take over; [...] in the first year he did not know what had to be done, he is not a technician! In the second year, with a lot of good will, he tries something to see if he has understood, and it is only in the third year that he is able to do something. In the fourth year, he is already worried about re-election by the party. Then another person takes over and everything starts all over again, one more time. [...] it is very frustrating [...] (I₆). So [...] four years from now management changes and then that group is dismantled, because whoever takes over decides, well, this group is no longer needed, no need to work with the environment anymore, it is everyone for themselves, back to their primary function [...] (I₇).*

Undoubtedly, the movement towards EE faces barriers (at other times incentives) in the underlying political motivations to the occupations of management positions, which explains why educational projects present particular policy inconsistency and immediacy. In fact, it is even possible to raise awareness for environmental causes with most managers, in any given X or Y administration. However, until managers become sensitive to the subject and seek to carry out some solid action, they will already be at the end of their term, and it will be the turn for someone else to decide whether to end or to continue with what has been done. In other words, continuity will depend on the motivations that “this other person” shows upon taking up the management position. The only way to break this model and thereby ensure some continuity in actions is to transform EE into an institutional policy that must be followed by all managers, regardless of the motivations that lead them to “be” in a particular position.

The absence of local policies and the lack of (or poor) involvement of the departments (and their managers) to make the policies effective may

wear down the strength of those involved with EE, causing discouragement and demotivation among them. The respondents’ challenge of overcoming the discouragement and wear and tear caused by insufficient results is discussed in category 4 “We lose some of our strength, [we] get worn down”.

This category reiterates that the need for continual research, for positive results in EE, can generate a state of professional wear and tear usually associated with frustrations arising from inadequate, unsatisfactory results. According to the respondents, when the individual tries to “swim against the tide” – the tide of partisan politics, the tide of the lack of a local policy – it is possible that your expectations are not met, which may, over time, trigger a vulnerability to the occurrence of de-motivation. This motivation, in turn, would tend to lead to the development of emotional exhaustion, depersonalization, and low achievement in the work, so that any new effort becomes synonymous with worthlessness. At this point, it is also part of the organization to assess and analyze the possible institutional demotivators and seek effective strategies to reverse this situation. Organizations need to investigate the source of their problems and find ways to solve them; otherwise people will eventually fall ill.

By all appearances, on the path to EE, a lot of the hindrances cause many individuals to become demotivated and gradually “they throw in the towel”. In this condition, keeping yourself motivated and “passionate” for the environmental cause becomes one more of the many “challenges” being faced by respondents. This understanding can be viewed from statements like: [...] *It surprised me when he took the decision of wanting to leave due to not feeling motivated for doing the little that he did [...] (I₂). [...] We lose a little strength, it is kind of tiring [...] (I₃). One can then say, that [...] the people who work, and who believe in that work, are people who are, to some extent, self-sacrificing[...] because they know that the return is slow [...] they know that if you do not have the persistence, you give up [...] you have to know how to live in frustration, if you work with the environment [...] (I₉).*

Given these statements, it is perceived that the creation of an autonomous environmental field within healthcare institutions, as a field of social relations, can help to (re)define the individual and collective experience, from the offer of input to educational activities. On the other hand, the absence of this field, the delay in its formulation, or its excessive heteronomy, tends, over time, to

reduce the strength and morale of those involved in the process, generating wear and tear. The fact is that the environmental field, being emergent, is somewhat fragile and heteronomous, with few defined borders. This condition makes the crossings of various orders (political and other social fields, social demands, etc.) become likely, determining a low definition of its profile and weaknesses that wear it down¹⁵⁻¹⁶ or make it succumb before it really takes off. However, as it is internalized in social spheres and in the consciousness of individuals, it will render a recognition of its legitimacy and the production of an ecological *habitus* capable of effecting other social fields¹⁷ and leaving its mark.

The environmental issue makes not only a political speech become plausible, but it also inaugurates a lifestyle that, individually, leads to the incorporation of habits and attitudes.¹⁸ Nevertheless, even the individual motivated by ideals of environmental sustainability would hardly be able to actualize them or keep them in the totality of everyday situations (much more in the absence of the already-mentioned framework), even if they try to do it. In fact, as they try to live according to these ecological values, this attempt is certainly hampered by several obstacles. Some of the barriers are due to the permanence of a society and institutions with less ecological values than necessary (some even have nothing ecological about them), in such a way that they do not always stimulate policies and environmentally sustainable lifestyles.¹⁹⁻²⁰

Thus, the existence of contradictions, conflicts, and negotiations are not uncommon, even for those who identify themselves with the ecological proposal. There is a permanent intrapersonal, interpersonal, and political negotiation around the day-to-day decisions, which, invariably, can result in some wear and tear and dejection. So, when a person assumes the desire and commitment to maintain a certain consonance between his/her life and cause,¹⁹⁻²⁰ he/she expects that political positions, attuned to the ecological ideals, align with their individual choices and personal and interpersonal attitudes. However, when this does not occur, it is in turn possible that either there is a departure from their own values (which is a cause of depersonalization) or a departure from that (in this case, the institution) which does not fit in with these values. This is the reason why the wear and tear and the motivational factor are among the many other challenges of EE.

Another element that can be included among

these challenges relates to the necessary evaluation of the actions developed, which is discussed in category 5 "Impact, it is difficult for us to measure: evaluation as a challenge". When talking about EE, the maintenance of the participation process is dependent on the continuous renewal of advances and even the links established,¹¹ particularly because the educational activities are deeply marked by their limits and possibilities, as well as by internal and external disputes in the environmental field.²⁰ Accordingly, the evaluation of results, partial and interim, is important to maintain not only a really motivated group (the group of educators and learners), but also the bonds of trust and support created throughout the course.¹¹ Investing time, energy, and efforts in the reflection/evaluation (individual and organizational) about the actions of EE can be a means of establishing the tension needed to drive change and determine the level of commitment essential to keep on going.¹²

However, if there are as many challenges as those already presented for EE to build its place and legitimacy, as regards institutional educational practice, what does that tell us about the evaluation procedures in EE! Of course, in a context of some shortcomings – lack of a local policy, a larger group of individuals working with the issue, resources and time available, the involvement of managers, etc. – evaluating the activities undertaken can be a sizable challenge. This challenge is expressed in the statements: [...] *now, in the long term, I do not know what impacts we had, because we did not quite make that measurement to see if it had changed anything or not. This would already be a second step and we did not have the ability to do it, to see what had changed [...]* (I₄). [...] *This is a great difficulty we found [...]: assessing the impact; we still do not have the methodology for this [...]* (I₅). [...] *Looking at the before and after, we could not see anything [...], because we did not have the ability!* (I₈)

Despite this difficulty, the evaluation is essential to understand whether the action taken (and its methodology) was able to leverage (re) sensitization and significant experiences. The visualization of the results obtained in the activities carried out is essential for the improvement of actions and decisions on subsequent educational processes and may, for example, indicate which awareness methods and techniques would favor the participation of individuals and the most appropriate results in EE actions – or even, what the best paths to take to raise awareness of the

various groups would be, with their peculiarities and differences.

In this context, the evaluation would be a reflective and retrospective movement, capable of showing the direction of the processes, problems, and constraints expressed during the actions, as well as the consequences/results of these activities. This reflective process enables the redesign of educational practices. Nevertheless, it should be noted that the evaluation will only be of any meaning if an institutional policy framework exists that supports the actions and offers the necessary resources as well as the presence of involvement of managers and a group totally dedicated to this type of work.

From all of this, the conclusion reached is that EE needs the support of all these previously raised aspects, but, perhaps, as proclaimed by the interviewees, this question of EE must exceed the workplace and must also be internalized in vocational training institutions. This is the approach developed in category 6 "The training does not offer you the opportunity to discuss the environment". Indeed, the tendency of the training courses is only to incorporate the environmental theme to the curriculum by the addition/sum of the disciplines to the curricular menu, limiting the environmental problems to the lack of knowledge about the subject. Thus, offering information, in theory, would be sufficient to "induce" students to use environmentally sound practices. In this mindset, EE would be transformed into a simple vehicle for communication on environmental impacts, their impact on society, and the measures to remedy them.²¹

This form of incorporation of the environment into formal education tends to highlight some of the most visible problems of environmental degradation, such as the contamination of natural resources, waste management, and disposal of industrial waste, reducing EE to the adoption of little ecological awareness within a traditional curriculum.²² Of course, despite these limitations, some of the students, with a certain propensity to being interested in environmental issues, can find a way to connect with this theme and deepen it in other spaces,²¹ as happened with the respondents of this research themselves.

According to them (the respondents), academic-vocational training has been exempted from the man-work environment, in the complexity that this approach requires, limiting itself to occasional and deficit debates. Hence this examines whether

the various courses, especially those in health care (in the case of the hospital, especially nursing, because it corresponds to the largest workforce contingent) actually prepare for this question: [...] *I question this issue of the actual knowledge of the academy [...] I do not know if these courses prepare people for it [...]. This means that knowledge itself does not put you in place, does not offer you this opportunity to discuss it! [...]* (I₆). [...] *I think they lack guidelines and this is lacking in the training [...]* (I₃). [...] *This had to be more present in all levels of education [...]* (I₉).

However, even though this issue has great importance and should be discussed at various levels of education, formal and/or informal, it is known that there is still little debate in the educational process. It is known, however, that in terms of professional training in health, this aspect is extremely important, considering that the negative impacts of environmental destruction and imbalance affect, directly and indirectly, the condition of health and illness of populations, bringing new demands in care practices for which professionals need to be prepared.²³

Given these statements, it is stressed that training focused on the environment, at any academic level, must contain a dimension that transcends the programmed objectives of "offering" knowledge, thus seeking, before, the formation of a personal and professional identity, focused on the ecological. The knowledge discussed at these sites requires this distinguished character, of a broader view, that maximize a broad/systemic discussion regarding the environment. After all, so that it is possible to deviate from the trend of superficial ecology, EE should direct individuals to a full awareness of their entire relationship with the environment, allowing a process to sensitive development and offering parameters for ethical attitudes in the existential course. In the absence of that, a superficial ecology will be perpetuated, concentrated solely in the control and management of the natural environment, while, on the other hand, the environmental movement, with ethical foundations, would broaden the responsibility with the planetary ecosystem.²⁴

So, if the environmental problems have origins in the way people think, they are, above all, educational problems, relating to the process and essence of formal and informal teaching. Recognizing this fact, in turn, claims the understanding that education can also cause problems, or at least perpetuate them, because by encouraging the educational ideas that only transmit/reproduce

information given, we equally encourage action without critical reflection or the continuity of established routines and the culture of unsustainable patterns. The building of knowledge that promotes the discussion on professional training will, without a doubt, favor the reflective process and the scope, by future professionals, of ecological awareness, providing the construction of values that guide proactive thought and action faced with the demands imposed by the environmental crisis in their "future space" at work.²³

CONCLUSION

The challenges identified in this study for the development of environmental education in hospitals endorse the fact that, only when the institution adopts and raises the "banner of sustainability" – incorporating sustainable thinking into policies and goals of the organization as one knowledge to be built and consolidated locally and not as a normative apparatus – there will be the possibility of a new spectrum of action. In other words, in a scenario of strong institutional policy, there is greater willingness to train full-time with a group to discuss, devise, and implement EE activities.

The presence of a local environmental policy will offer a legal, structural, financial, and human framework for action, bringing together the support of managers and the formation of a group for EE. Therefore, it will be possible to overcome the wear and tear coming from the actual attempts to implement EE actions; it will be feasible to evaluate the impacts and demands, through market logic, that the training worries about the environmental crisis and educates in a logic of environmental sustainability.

Evidently, social and environmental sustainability, from the point of view of the hospital, goes through the institutional capacity to meet the challenges of creating a local policy to involve managers, to provide and gather a group of educators to plan and implement EE, with sufficient resources to carry out the projects, evaluate them, and weave the necessary changes. This will ensure positive results and the willpower to overcome possible discouragement, and it will require training so that new professionals enter the hospital universe with a view to social and environmental sustainability.

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