

<http://dx.doi.org/10.1590/0104-07072018002100016>

THE SECONDARY TECHNICAL-PROFESSIONAL EDUCATION IN THE SUS AND THE TEACHER TRAINING POLICY

Adriana Katia Corrêa¹, Mara Regina Lemes de Sordi²

¹ Ph.D. in Nursing. Professor, Escola de Enfermagem de Ribeirão Preto da Universidade de São Paulo. Ribeirão Preto. São Paulo, Brazil. E-mail: adricor@eerp.usp.br

² Ph.D. in Education. Professor, School of Education, Universidade Estadual de Campinas. Campinas, São Paulo, Brazil. E-mail: maradesordi@uol.com.br

ABSTRACT

Objective: starting from reflection that highlights the importance of secondary technical-professionals' training in health/nursing, express the need for a teacher training policy for professional education, including the health area, in view of its implications for the support of the Unified Health System as a public policy.

Method: reflexive study.

Results: relations and contrapositions are established between the current training context of secondary-level technical professionals in nursing and the construction of the Unified Health System. In addition, we discuss that the historical conformation of professional education in Brazil marks frailties in teacher training, entailing the need for a teacher training policy for this educational modality, including the health/nursing area.

Conclusion: single proposals are not appropriate, neither for nursing nor for the other health areas, but some political-legal understandings about the field of teacher training in professional education are fundamental. The challenge is to structure a policy that considers teaching in the ethical-political dimension and the concrete conditions of the teacher's work.

DESCRIPTORS: Education, professional. Education. Teacher training. Nursing. Health.

EDUCAÇÃO PROFISSIONAL TÉCNICA DE NÍVEL MÉDIO NO SISTEMA ÚNICO DE SAÚDE E A POLÍTICA DE FORMAÇÃO DE PROFESSORES

RESUMO

Objetivo: a partir de reflexão que põe em destaque a importância da formação dos trabalhadores técnicos de nível médio em saúde/enfermagem, explicitar a necessidade de política de formação de professores para a educação profissional, incluindo a área da saúde, tendo em vista suas implicações com a sustentação do Sistema Único de Saúde como política pública.

Método: Estudo reflexivo.

Resultados: são feitas relações e contraposições entre o atual contexto de formação dos trabalhadores técnicos de nível médio em enfermagem e a construção do SUS. Discute-se ainda que a conformação histórica da educação profissional no Brasil demarca fragilidades no que se refere à formação docente, havendo necessidade de política de formação de professores para essa modalidade de ensino, incluindo a área da saúde/enfermagem.

Conclusão: considera-se que não cabem propostas únicas nem para a enfermagem nem para as demais áreas da saúde, mas alguns entendimentos político-legais, sobre o campo da formação docente na educação profissional, são fundamentais. O desafio é estruturar política que considere a docência na dimensão ético-política e as condições concretas de trabalho do professor.

DESCRIPTORIOS: Educação profissionalizante. Educação. Formação de professores. Enfermagem. Saúde.

EDUCACIÓN PROFESIONAL TÉCNICA DE NIVEL MEDIO EN EL SISTEMA ÚNICO DE SAÚDE Y LA POLÍTICA DE FORMACIÓN DE PROFESORES

RESUMEN

Objetivo: a partir de la reflexión que resalta la importancia de la formación de los trabajadores técnicos de nivel medio en salud/enfermería, explicitar la necesidad de política de formación de profesores para la educación profesional, incluyendo el área de salud, teniendo en consideración sus implicaciones Con la sustentación del *Sistema Único de Saúde* como política pública.

Método: estudio reflexivo.

Resultados: se hacen relaciones y contraposiciones entre el actual contexto de formación de los trabajadores técnicos de nivel medio en enfermería y la construcción del *Sistema Único de Saúde*. Se discute además que la conformación histórica de la educación profesional en Brasil demarca fragilidades en lo que se refiere a la formación docente, habiendo necesidad de política de formación de profesores para esa modalidad de enseñanza, incluyendo el área de la salud/enfermería.

Conclusión: se considera que no caben propuestas únicas ni para la enfermería ni para las demás áreas de la salud, pero algunos entendimientos político-legales, sobre el campo de la formación docente en la educación profesional, son fundamentales. El desafío es estructurar política que considere la docencia en la dimensión ético-política y las condiciones concretas de trabajo del profesor.

DESCRIPTORES: Educación profesional. Educación. Formación de profesores. Enfermería. Salud.

INTRODUCTION

The work of secondary technical-professionals, specifically in nursing, focused on in this text, is fundamental to support the Unified Health System (SUS) in Brazil, from the quantitative viewpoint, in view of the significant contingent they represent in numerical terms; as well as from the qualitative viewpoint, considering the importance of their actions in the complex health care process.

In these professionals' training, among other dimensions, the work of teachers is highlighted who almost always lack teacher training and predominantly work in precarious work relations, adverse job conditions and low wages. In recent decades, governmental programs established by the Ministry of Health made investments in the training of technical professionals, including some teacher training programs/courses, initially in nursing, and later involving other professional areas.

The health area, however, which is also part of the field of professional education, and teacher training for this teaching modality lack effective policies that truly value teaching work in professional education. In that context, the objective in this study is to, based on reflection that emphasizes the importance of secondary technical workers' training in health/nursing, express the need for a teacher training policy for professional education, including the health area, in view of its implications to support the SUS as a public policy.

Secondary technical-professionals' training in health/nursing in the context of the SUS: contradictions

Nursing accounts for more than half of all health professionals in the country, equivalent to

1,800,000 out of 3.5 million health workers.¹ Data for 2010 indicate a numerical contingent of 625,863 nursing technicians and 533,422 auxiliary nurses qualified for care practice in Brazil.²

There is a dispute between the public and the private sector in the training of technical workers for the SUS by number of enrollments in these sectors. In professional education, in general, between 2002 and 2006, enrollments in the private sector grew more than in the public sector while, as of 2007, this growth trend is reversed, with more significant growth in enrollments in the public sector, although the larger number of private sector enrollments is preserved: in 2002, enrollments in the public sector corresponded to 32,733, against 115,766 in the private sector; in 2010, the public sector received 105,826 enrollments and the private sector 255,193.³⁻⁵ In the health area, in the first decade of the 21st century, enrollment in public schools grew more than in private schools. Nevertheless, in 2010, the public sector was responsible for less than 1/3 of the enrollments. Thus, in 2002, 22% of the enrollments were in the public sector and 78% in the private sector. In 2010, enrollments in the public sector amounted to 29.3%, against 70.7% in the private sector.³

Data from the Ministry of Education,⁶ which show the ten professional education courses with the highest number of enrollments in the public network, rank nursing in the fifth place (data from the previous year put nursing in the fourth place), preceded by computer science, administration, agriculture and buildings. While enrollments in the nursing course, totaling 32,475, represent 4.3% of the total, computer science represents 12.3% of enrollments. In the private sector, among the ten courses with the highest number of enrollments, nursing ranks first, which corresponds to 121,357

enrollments (17.6%), followed by the occupational safety course with 89,059 enrollments, which is equivalent to 12.9%.

In addition to these enrollment data, it is important to consider that the training of secondary-level technical workers, including those in the nursing area, is based on the Curricular Guidelines for Secondary Technical-Professional Education - DCNsEPTNM.⁷ On the whole, these Curricular Guidelines materialize the directions that have been traced in Brazilian professional education policies, mainly since the 90s, aiming to strengthen the compliance with the logic of the market, in view of the interests of capital.

In the 1990s, a professional education reform was implemented in Brazil, which is linked to the more general, international movement of capital. Agencies such as the World Bank, the Inter-American Development Bank (IDB) and the Economic Commission for Latin America and the Caribbean (ECLAC), among others, have interfered in the development of professional education in the context of the continuity of the reproduction process of capital. This movement is related to the internationalization of capital, to the structuring of the neoliberal state and to productive restructuring, with implications for the relations between work and education.⁸ The proposal to structure the neoliberal state prioritizes the use of public resources in areas with high economic returns, to the detriment of social areas such as health and education, with the market serving as a regulator.

The current National Curricular Guidelines for Secondary Technical-Professional Education⁷ that guide the construction of political-pedagogical proposals and the organization of courses in all professional areas are thus anchored in concepts that help to put into action the neo-liberal ideals: competences, multi-skilled worker, flexible training and employability. These conceptions reaffirm the individualizing logic that transfers to the worker himself the responsibility of getting a place in the labor market or not, being encouraged to stay up to date through flexible training courses that can guarantee multipurpose performance, which is fundamental in a market that increasingly lacks opportunities.

In the restructuring sought by neoliberal ideologues, it is fundamental to link institutionalized education to the goal of preparing for the workplace. Curricular changes imply getting a narrow preparation for the workplace, as well as the student's preparation to accept the neoliberal

"creeds".⁹ The hegemonic logic of training for the market has to counter the conception of education as emancipatory.

The passage through educational spaces should enable individuals to appropriate themselves of the knowledge that qualifies for a more conscious and autonomous social intervention.¹⁰ Historically, even in adverse conditions of exploited work, the worker, depending on the conditions under which he or she performs it, finds elements of education to find ways of liberation.¹¹

The tensions between market interests that transform health into merchandise and the societal project, assumed by the Brazilian Sanitary Reform, in defense of a single, decentralized public system, based on the principles of integrality, universality, equity, popular participation and social control, are always present, however, with substantial advances of the privatization logic in the health system.

The SUS began in Brazil in an unfavorable political and economic context, promoting neoliberal ideology reinforced by international organizations that disagreed from the decision to direct public financing for the constitution of universal health systems. Over the past 20 years, progress has been made in its implementation. With the expansion of private sector participation, however, contradictions and unfair competition are generated, leading to opposing ideologies and goals, such as universal access *versus* segmentation of the market, with negative repercussions for equity, access to health services and health conditions.¹² Research that focuses on the strengths and weaknesses of the family health strategy and the traditional basic health services finds obstacles and challenges for the effective change of the care model.¹³ Another study also points to recent facts that are in line with the universal right to health.¹⁴ It is in this construction context of the SUS, marked by advances and setbacks, that the secondary-level technical workers can act. This work is vital in the struggle to imprint the conceptions and values of the Health Reform.

Considering that training courses for secondary technical nursing workers are also based on the above-mentioned political orientations of professional education in Brazil, and that the market logic predominates in these directions, there is a contradiction: the need for workers with a consistent ethical-political and technical formation, and training that is almost always centered on the instrumental dimension, denying the workers their right to broaden the worldview, gaining fundamental knowledge not only for socially qualified

professional practice but also for their construction as human beings.

The issues raised thus far reaffirm the importance of focusing on the problem of teacher training for professional education, specifically in nursing. That is, the technical training courses in nursing are offered predominantly by the private sector; the understandings on education for the SUS, from the precepts of the Health Reform, are probably weakened; the adherence to the neoliberal ideals related to skills, polyvalence, employability is probably facilitated, considering the logic the private sector already works with, which does not mean that such conceptions are not also present in the public sector; the perspective of human emancipatory education, as a counterpoint to market logic, is undoubtedly distant from this scenario but, at the same time, it is a perspective that can help to put it in the spotlight, questioning it with a view to its transformation.

Teacher training for secondary technical-professional education and its interfaces with health/nursing

In the context of teacher education for professional education, there are particularities related to the very historical conformation of professional education in Brazil that point out certain weaknesses, also related to political-legal guidelines. Professional health education is marked by distinct conceptions, representing different social projects in dispute.

The projects dispute, on the one hand, not adapting the worker to the existing one; on the other hand, constituting the trained, obedient and disciplined worker.¹⁵

Throughout history, specifically concerning teacher training for professional education, political-legal devices indicated some guiding standard, however, almost always permeated by uncertainties, non-compliance, given the distance between what is legally proposed and the concrete context the teaching practices take place in. In addition, at some moments in history, the duality between teacher training for the so-called preparatory courses, aimed at training professionals who are likely to pursue college studies, and the training of teachers for the technical courses destined to students without resources to pursue further education, who are likely to seek early insertion in the job market, in the search for means of subsistence, as well as emergency schemes, as light training proposals. In this context, the performance of "teachers" who possess professional training in a specific area (bachelors

and some practical experience prevails.

In 1996, the National Education Guidelines and Bases Law (LDB 9394)¹⁷ indicates that the training of teachers for basic education, which includes the secondary technical-professional education courses, will take place in a teacher training course at higher education level. Resolution CNE/CP n. 01/02, which establishes the National Curricular Guidelines for teacher training courses for basic education, at the higher education level, in force until 2015, points out guiding principles for professional training, with emphasis on competence, the relation with practice, besides research as an axis. Resolution CNE/CP n. 2/02, in turn, establishes the duration and hour load of teacher training courses at the undergraduate level.¹⁸⁻¹⁹

The teacher training policies, starting with the LDB, including these guidelines, have received criticism related to their adherence to the neoliberal dictates present in the transformations of the productive world and expanded to the service sectors, within the logic of capital strengthening on a global scale, entailing perverse social consequences that are expressed in inequalities, unemployment, exploitation.²⁰⁻²²

In the debate about teacher education policies, there are two movements that intertwine in a contradictory way: the educators' movement, through its organizational entities, such as the *Associação Nacional pela Formação dos Profissionais da Educação* (Anfope), *Fórum Nacional de Diretores de Faculdades e Centros de Educação* (Forumdir), *Associação Nacional de Pós-Graduação e Pesquisa em Educação* (Anped), *Centro de Estudos Educação e Sociedade* (Cedes), among others, in order to reformulate the training courses for education professionals; and the other movement, which is constituted by the process of defining public policies in the educational field, especially in the field of teacher education, most visibly expressed in previous decades in the Curricular Guidelines of 2002, previously commented on.²⁰

In the late 1970s and early 1980s, in the context of the democratization movement of society, the struggle of educators offered significant contributions to the field of education, highlighting the relations of determination that exist between education and society and the articulation between the way society is organized, the objectives of education, and the way the school is organized.²⁰

In the context of the educators' movement, advanced conceptions were evidenced, such as the understanding of the socio-historical nature of this education; the need for a trained professional with critical awareness. These are principles based

on the emancipating conception of education and training. These guiding principles of professional training refer to the understanding of the “national common base”. The conception of an “education professional” who marks his “particularity and specificity” in teaching and in pedagogical work is also present, that is, the teaching considered as the founding element of the training.²⁰⁻²¹

The “national common base” is not a national definition of curriculum or, more narrowly, the resumption of a minimum curriculum. It is a proposal of national guidelines for teacher training that is not related to the curricular standardization.²³ Their relationship with the principles of emancipatory formation is considered essential. Despite the contributions of the movement by organizations representing the educators, the Curricular Guidelines for Teacher Training¹⁸ have maintained conservative positions, with an interest in responding to the market logic, as already discussed, which tends towards training in a technical perspective.

A movement that needs to be outlined in relation to the specific discussions on teacher training for professional education, was commented on by Pacheco²⁴ and refers to meetings held by the Ministry of Education, starting in 2007, constituting a workgroup: “Teacher Training for Professional and Technological Education”, which in 2010 developed, as an end product, a proposal for specific degrees that, however, was not enforced.

It is also important to point out Resolution CNE/CEB n. 2/97,²⁵ in force until 2015, which provides for the Special Teacher Training Programs for the disciplines of the elementary education, high school and professional education curricula at the secondary level. Thus, teacher training is possible for those who already work as teachers but do not have pedagogical training for this purpose. In its pedagogical proposal, 540 hours are proposed, 300 of which are related to the internships.

Thus, representative entities and leading researchers in the field of education have discussed the historical configuration and the problems of teacher education for professional education since the beginning of the year 2000, considering the need for qualified teacher training, predominantly focused on as special training, entailing the risk of complementary, lighter training with less opportunities to solidify the theoretical-conceptual bases that grant the teacher a contextualized and critical teaching performance in workers’ training.

We agree with and reaffirm the idea expressed by Torrez,²⁶ when commenting that these discussions,

however, move away from most professionals who work in professional health education and the degree courses in the area. The question should be raised why critical movements in health and teacher education areas have not met. After all, in the health area, there is the historical nursing degree program, the expansion of subsequent technical courses, the significant demand for places for this subarea in the private sector, in addition to the existence of the technical schools of the SUS, which shows the need for broader representation of the health field in the discussions about teacher training for professional education.

In 2015, Resolution CNE/CP n. 227 was published, which defines the current National Curricular Guidelines for initial training at the higher level (undergraduate courses, pedagogic training courses for graduates and second teaching degree courses) and for continuing education instead of those already mentioned.¹⁸⁻¹⁹ This new Resolution also revokes Resolution CNE/CEB n. 2/9725, which was characterized as an emergency policy that for a long time had provided training to those teachers already working in schools without pedagogical training for this purpose (besides other interested parties), also being used in the health area for teacher training in the field of professional education.

Detailed analyses of this law are not possible at present, but some observations: it is very emphatic in the sense of the “national common basis” for teacher training and is not based on the competency-based framework, which in view of the previous observations can represent a step forward in enabling curricular organization modes that value the sound knowledge of the fundamentals of education and not just immediate achievement in the classroom.

The national common base, without negatively affecting diversified training, is pointed out, in this legislation, based on the conception of education as an emancipatory and continuing process, also acknowledging the specificity of teaching work, leading to praxis as an expression of the articulation between theory and practice.²⁸

Despite revoking Resolution CNE/CEB n. 2/9725, it maintains an emergency proposal. In Article 9, in addition to undergraduate degree courses, pedagogical training courses are offered for unlicensed graduates and second degree courses,²⁷ which are quite questionable from the perspective of solid training.

The option of pedagogical training courses for unlicensed graduates, a situation that is more related to health teachers, explicitly focused as “emergency and provisional”, is similar to Resolution

CNE/CEB n. 2/97.²⁵ While offering to graduates, however, has a higher minimum workload, with a forecast of 1,000 to 1,400 hours, with 300 hours of internship. Unlike CNE/CEB n. 2/97,²⁵ these can only be offered by higher education institutions who already offer degree programs in the intended area, recognized and satisfactorily evaluated by the Ministry of Education and its entities, dispensing new authorizations.²⁷

Another point that also stands out regarding the new Resolution concerns the maintenance, regarding the previous resolution from 2002, of the degree program as a course with its own identity, which, from our viewpoint, is fundamental to avoid the “classic” appendices models, but has entailed some difficulties for the organization of the undergraduate degree programs in nursing, which are historically linked to the bachelor program. In this legislation, however, the possibility of articulation with the bachelor program is made explicit, which will require further discussions and understandings.^{18,27}

Despite the reference to the proposal of a specific degree program for teacher training, in professional education, including the health area, diverse training programs are offered, considering the structural issues and weaknesses of the policies: special programs, postgraduate courses, in-service training and distance education, with a limited supply of degree programs. Nevertheless, degree programs have been identified as essential insofar as they represent the privileged space for initial teacher training.¹⁶

Specifically in health, the professional areas in which teaching diploma programs are offered are nursing, pharmacy, nutrition, biology, psychology and social work, of which only nursing, nutrition and pharmacy have secondary-level technical staff. The other three areas can also work in Secondary-Level Technical Professional Education and biology also in basic education.²⁶ The degree courses in pharmacy and nutrition are extinct, leaving only the nursing area with degree programs for the training of secondary-level technical professionals. This information is highly noteworthy, considering that the large majority of workers responsible for health care are of “technical level”. Who trains the technical workers in the health area?

The degree program in nursing is an undergraduate course intended to train nurses to work in distinct health scenarios and prepare teachers for professional nursing education. The number of degree programs in nursing is small: data from 2015,

taken from the e-MEC Platform,²⁹ from the websites and telephone contacts with universities, indicate the existence of 24 active courses, 18 of which are offered by public universities and six by private higher education institutions. These courses are distributed across all regions of the country.

In recent years, these courses have complied with Resolutions CNE/CP n. 1/2002 and n. 02/2002,¹⁸⁻¹⁹ in force until 2015, which require a configuration that characterizes the degree course as a course with its own identity, which articulates training in the specific area (in this case nursing) with the pedagogical area, which has a minimum workload of 400 hours of internships and the construction of university/school articulation (in this case mainly technical schools), strengthening partnerships, among others. Some difficulties have been experienced in some courses, more specifically with regard to the legal requirement of the degree to be a course with its own identity, instead of a complement to the bachelor program. Along the way, some courses at federal universities have been extinguished, while others from federal and state universities have been broadening their understanding, negotiating with the necessary instances to proceed as bachelor and degree programs. After all, it is still fundamental to state the value these courses have in the university, given that the neoliberal conceptions are also strongly present, with rationalizing perspectives: shorter deadlines, greater investments in technological resources than in reflexive and transformative proposals.

With regard to teacher education policies in the United States, efforts are being made to replace the system in which university teacher training predominates due to free market competition.³⁰

Nursing degrees in the context of health are exceptions and, in the health area as well as other professional areas, often, educational proposals are made in a specific way, through special programs previously foreseen in the CNE/CEB Resolution n. 2/97,²⁵ or even more punctual “activities” through “in-service education”. Anyway, in addition to the legal field, it is necessary to reflect more broadly, in nursing, on the degree programs, as courses that, adding the knowledge of education, from the perspective of preparing nurse teachers, have and/or may have potential to expand the construction of knowledge that permits the construction of a critical vision and commitment to the training of secondary-level technical workers, in a perspective favorable to the consolidation of the SUS, to the extent that the curricula are driven in that direction.

CONCLUSION

It is fundamental to consider the relationship between teacher training in professional education/training of secondary-level technical workers and the SUS that seeks consolidation, confronting the market logic and emancipatory logic as bases that entail diverse implications in health/nursing training and in care. In professional education, including nursing, the discussion about teacher education is complex, since the reality already portrayed shows that the most common is the teacher's performance without any pedagogical training. This means that, in fact, a training policy in that sense is needed. There are probably no single proposals for either nursing or other areas of health. The challenge is to structure policies that go beyond the specific models, offered by an institution with a recognized social commitment, with a political-pedagogical proposal that considers teaching beyond its technical dimension, incorporating the ethical-political dimension and articulating the training policy with the concrete conditions of the teacher's work.

REFERENCES

- Machado MH, Wermelinger M, Vieira M, Oliveira E, Lemos W, Aguiar Filho W, et al. Aspectos gerais da formação da enfermagem: o perfil da formação dos enfermeiros, técnicos e auxiliares. *Enferm. Foco* 2016; 7(Esp): 15-34.
- Fundação Oswaldo Cruz. Pesquisa inédita traça perfil da enfermagem no Brasil [Internet]. Rio de Janeiro (RJ): Agência Fiocruz de Notícias; 2015 May [cited 2015 Aug 20] Available from: <https://portal.fiocruz.br/pt-br/content/pesquisa-inedita-traca-perfil-enfermagem-no-brasil>
- Ministério da Educação (BR). Instituto Nacional de Estudos e Pesquisas Educacionais Anísio Teixeira. Censo escolar. Brasília (DF): MEC; 2012.
- Campello AM. Educação profissional em saúde: fundamentos, desafios e perspectivas [Internet]. Rio de Janeiro (RJ): Observatório dos Técnicos em Saúde/ Escola Politécnica Joaquim Venâncio/Fiocruz; 2015 [cited 2015 Aug 20] Available from: http://www.epsjv.fiocruz.br/upload/d/Ana_Margarida.pps
- Vieira M, Almeida ARM, Campello AMML, Moreno AB, Chinelli F, Lobo Neto FJS. Dinâmica da formação técnica e da ocupação de postos de trabalho em saúde: Brasil anos 2000. In: Morosini MVGC, Lopes MCR, Chagas DC, Chinelli F, Vieira M, organizadores. *Trabalhadores técnicos em saúde: aspectos da qualificação profissional no SUS*. Rio de Janeiro (RJ): EPSJV; 2013.
- Ministério da Educação (BR), Instituto Nacional de Estudos e Pesquisas Educacionais Anísio Teixeira. Censo escolar. Brasília (DF): MEC; 2013.
- Ministério da Educação (BR), Conselho Nacional de Educação, Câmara de Educação Básica. Resolução N. 6, 20 de setembro de 2012: define diretrizes curriculares nacionais para a educação profissional técnica de nível médio. Brasília (DF): MEC; 2012.
- Oliveira R. A reforma da educação profissional nos anos 90. In: Batista EL, Müller MT. *A educação profissional no Brasil: história, desafios e perspectivas para o século XXI*. Campinas (SP): Alínea; 2013.
- Gentili P, Silva TT. *Neoliberalismo, qualidade total e educação: visões críticas*. 12ª ed. Petrópolis (RJ): Vozes; 2002.
- Oliveira R. Por uma educação profissional democrática e emancipatória. In: Oliveira R, Organizador. *Jovens, ensino médio e educação profissional: políticas públicas em debate*. Campinas (SP): Papirus; 2012.
- Ciavatta M. *O trabalho docente e os caminhos do conhecimento: a historicidade da educação profissional*. Rio de Janeiro (RJ): Lamparina; 2015.
- Paim J, Travassos C, Almeida C, Bahia L, Macinko J. O sistema de saúde brasileiro: história, avanços e desafios. *Saúde no Brasil 1* [Internet]. 2011 Mai [cited 2015 Aug 15]. Available from: http://actbr.org.br/uploads/conteúdo/925_brazil1.pdf
- Marin MJS, Marchioli M, Moracvick MYAD. Strengths and weaknesses of the care delivered in the traditional primary healthcare units and family healthcare strategy units in the perspective of users. *Texto Contexto Enferm* [Internet]. 2013 [cited 2015 Aug 15]; 22(3):780-8. Available from: <http://dx.doi.org/10.1590/S0104-07072013000300026>
- Souza GW, Bedrikow R, Santos JA, Terra LS, Fernandes JA, Borges FT. Direito à saúde: o Sistema Único de Saúde (SUS) está em risco? *Interface*. 2016; 20(56):261-6.
- Pereira IB, Ramos MN. *Educação profissional em saúde*. 2ª ed. Rio de Janeiro (RJ): Editora Fiocruz; 2013.
- Machado LRS. Diferenciais inovadores na formação de professores para a educação profissional. *Rev Bras Educ Prof Tecnol*. [Internet] 2008 Jun [cited 2015 Aug. 15]; 1(1):8-22. Available from: portal.mec.gov.br/setec/arquivos/pdf3/rev_brasileira.pdf
- Brasil. Lei N. 9394, de 20 de dezembro de 1996: estabelece as diretrizes e bases da educação nacional. *Diário Oficial da República Federativa do Brasil*, 23 Dec 1996. Seção 1.
- Ministério da Educação (BR), Conselho Nacional de Educação, Conselho Pleno. Resolução CNE/CP N 1, de 18 de fevereiro de 2002: institui Diretrizes Curriculares Nacionais para a Formação de Professores da Educação Básica, em nível superior, curso de licenciatura, graduação plena. Brasília (DF): MEC; 2002.
- Ministério da Educação (BR), Conselho Nacional de Educação, Conselho Pleno. Resolução CNE/CP N. 2, de 19 de fevereiro de 2002: institui a duração e a carga horária dos cursos de licenciatura, de graduação plena, de formação de professores da Educação Básica em nível superior. Brasília (DF): MEC; 2002.

20. Freitas HCL. Formação de professores no Brasil: 10 anos de embate entre os projetos de formação. *Educ. Soc.* 2002; 23(80):136-67.
21. Freitas HCL. A (nova) política de formação de professores: a prioridade postergada. *Educ. Soc.* 2007; 28(100):1203-30.
22. Pereira JED. Os desafios das licenciaturas no Brasil frente à hegemonia da educação mercadológica e empresarial. In: Jardimino JRL, Matos DAS, Silva MD, organizadores. *Formação e políticas públicas na educação: profissão e condição docente*. Jundiaí (SP): Paco Editorial; 2014.
23. Dourado LF. A formação de professores e a base comum nacional: questões e proposições para o debate. *RBPAE*. 2013; 29(2):367-88.
24. Pacheco E, organizador. *Perspectivas da educação profissional técnica de nível médio: proposta de Diretrizes Curriculares Nacionais* [Internet]. São Paulo (SP): Fundação Santillana/ Moderna; 2012 [cited 2015 Aug 20]. Available from: <http://www.moderna.com.br/lumis/portal/file/fileDownload.jsp?fileId=8A8A8A8337ECDC2B0137ED025BFE393C>
25. Ministério da Educação (BR), Conselho Nacional de Educação, Câmara de Educação Básica. Resolução CNE/CEB N. 2, de 26 de junho de 1997: dispõe sobre os programas especiais de formação pedagógica de docentes para as disciplinas do currículo do ensino fundamental, do ensino médio e da educação profissional em nível médio. Brasília (DF): MEC; 2007.
26. Torrez MNFB. Políticas de formação docente para a educação profissional técnica na área da saúde na perspectiva da reforma sanitária [tese]. Campinas (SP): Universidade Estadual de Campinas; 2014.
27. Ministério da Educação (BR), Conselho Nacional de Educação, Conselho Pleno. Resolução CNE/CP N. 2, de 9 de junho de 2015: define as diretrizes curriculares nacionais para a formação inicial em nível superior (curso de licenciatura, formação pedagógica para graduado e curso de segunda licenciatura). Brasília (DF): MEC; 2015.
28. Dourado LF. Diretrizes Curriculares Nacionais para a formação inicial e continuada dos profissionais do magistério da educação básica: concepções e desafios. *Educ Soc.* 2015; 36(131):299-324.
29. Ministério da Educação (BR) [Internet]. Brasília (DF): MEC. e-MEC. Instituições de educação superior e cursos cadastrados. 2015 [cited 2015 Jul 15]. Available from: [//emec.mec.gov.br](http://emec.mec.gov.br)
30. Zeichner K. The struggle for the soul of teaching and teacher education in the USA. *J Educ Teaching: Int Res Pedagog.* 2014; 40(5):551-68.