

The Waiting Room as a Structuring Link for Oral Health Promotion

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Dear Editor,

The ability to understand that health is directly related to the quality of life and extrapolates the absence of disease contributed to the health promotion being discussed and simultaneously introduced into our daily life. Understanding that it can be carried out outside the health institutions, it is still in these places that people are more receptive to discussing issues related to health. Herein, the waiting room is now considered a suitable place for collective activities.

The experience in waiting rooms is always positive in any speciality, besides making the patient more critical and reflective. Moreover, not only the possibility of exchanging experience, knowledge and care from the present community should be considered, but also the opportunity of strengthening the patient-professional bond¹.

It is worth pointing that in this room the chance of reducing idle time, intervening, exchanging knowledge, guiding, instrumentalizing and welcoming the group is observed. The reception appears as an inseparable part of the philosophy of health promotion, with the integrality of care as a subsidy.

Stultz *et al*² reported that this format makes it possible to welcome the public health system (SUS) users and provide comprehensive care to the patient, besides to reframe their beliefs regarding health care³. Successful experiences in an extension project with a waiting room were also highlighted by Mafi *et al*⁴ who sought to demonstrate the importance of theoretical-practical interaction in public health

interventions. Emmi and Pires⁵ add that these activities can give greater autonomy for self-care.

We believe that the activities in waiting rooms should be part of the training of professionals, even during graduation. In this context, considering that continuing education has a fundamental role in the face of the challenge of instrumentalizing the patients, in order to make them co-responsible for their health, professors of the Department of Collective Oral Health of the Dental School of UERJ realized that the users of the Polyclinic Piquet Carneiro/UERJ could have more space for oral health education. Polyclinic Piquet Carneiro/UERJ is a public institution that currently offers outpatient assistance in 20 medical specialities and other areas of health, as it is also a field of practice for the faculties of the Biomedical Center of UERJ.

This opportunity motivated them to use the waiting rooms as a field of intervention in favor of health education through the extension project “Living room experiences: oral health in its context” that has implemented oral health education activities in these waiting rooms in order to provide continuing education in oral health, guaranteeing a welcoming environment and bonding relationship to users. In this project, two waiting rooms are held each week, on alternate days, seeking to contemplate all existing pre-clinical rooms. Composed of two professors and nine students, it has been developed since March 2019 and changing the perspective of everyone involved with regards to welcoming reception (Figures 1 and 2). Approximately 100 waiting rooms have already received the project.



Figure 1. Waiting room in Internal medicine



Figure 2. Waiting room in Cardiology

This performance format, in addition to considering the individual in his bio-psycho-social context, encourages interdisciplinarity and the formation of a better professional concerned about the needs of the community and with all the predicates provided for in the current National Curricular Guidelines.

Many positive factors have emerged from this extension project because these activities have provided the use of time and space to interact with the SUS users; it has been a privileged field of practice for professional training since the beginning of its formation, providing opportunities for

improving listening and the ability to build personal bonds.

Finally, we hope that the exposure of this project and its potentialities now presented can serve as a motivating spring for the best oral health education practices, the possibility of empowering the patients, using tools as simple as effective, in the face of the challenge of really establishing routines favorable to the population and students. Furthermore, we expect that this strategy can be known and recognized as a source of inspiration and replication for many training institutions and/or oral health services that still do not realize the abundance of possibilities in a waiting room.

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Mini Curriculum and Author's Contribution

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