

## **Cinema and interfaces in approaches related to respect for diversity and sexual orientation: Experience report**

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Received: 29 May 2021;

Received in revised form: 18 Jun 2021;

Accepted: 28 Jun 2021;

Available online: 08 Jul 2021

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**Keywords—** *Sexuality. Gender Identity. Gender and Health. Motion Pictures as Topic. Sex Education.*

**Abstract—** *Objective: to report the experience of nursing students related to educational practice through cinema and its interfaces in approaches related to respect for diversity and sexual orientation. Method: experience report that aims to describe aspects experienced in the opportunity of an educational action that was developed by students from the seventh period of the Bachelor's Degree in Nursing, in a private Higher Education Institution in Belém, Pará, Brazil, from September to October 2019. Results: 19 students from the first year of the undergraduate nursing course participated. The experience provided the realization of the importance of actions in Health Education, which must be performed in different scenarios of society. It was evident that a Health Education activity, based on the real needs of the target population, has the potential to cause significant changes in lifestyle habits, promoting health. Conclusion: the intervention proved to be a powerful educational tool to contribute to paradigm shifts in health education. The experience and the thematic approach provided deep reflections on the importance of Health Education and the systematic planning of educational activities that meet the real needs of the population, which was facilitated in this experience by the choice of the methodological strategy.*

## I. INTRODUCTION

For a long time, intimate relationships between people of the same sex were seen, according to prevailing morals, as sin, perversion, deviation or crime. Affective relationships and variants of sexual desire such as homosexuality, bisexuality and transsexuality are often incorporated in society's imagination as evidence of deviation, disease or character flaw, drawing on the involved meanings and disqualifying representations that reinforce prejudices, stigmas and promote discrimination and intolerance<sup>1</sup>.

One of the most controversial issues in recent years has been the struggle for freedom of sexual orientation, which is one of the results of an arduous struggle for official

recognition by the state of same-sex unions, and whose discussion has been expanded to other types of manifestation of human sexuality, what is called sexual diversity “on the different nomenclatures”<sup>2</sup>.

When addressing issues about sexuality, it is understood that it is a fundamental and essential constituent for the existence of an individual, being present and impacting throughout the extension and dimensions of life and in the social networks that are built in it, both in interpersonal relationships, as in intrapersonal relationships that involve the subjectivity of the individual, more specifically, the relationship between them, which ultimately determines the ways of being, seeing, thinking and revealing themselves to society, as sexuality is the

main constitutive element of identity and personality, as it unifies the biological, psychological and social dimensions<sup>3</sup>.

Loving someone of the same sex, and being in love as in any relationship in which we bond, has presented itself in a more challenging way for homosexuals and other representations of human sexuality, since the risks of encounter and mismatch of loving someone symbolize breaking up with the sociocultural world that individuals are inserted in<sup>4</sup>.

In this context, the ways to express sexuality are determined by a complex interaction of factors. They can be affected by the individual's relationships with others, by the circumstances of his life or by the culture in which he is inserted, which denotes, therefore, that the mode of expression of sexuality is something built gradually during growth and psychosocial development, in the face of their relationships with others, reflecting the evolutionary experiences of human beings during their life cycle, delimited by what was commonly chosen to be characterized as performance and gender identity<sup>3</sup>.

Gender as a constitutive element of social relations between men and women is a collective, social, historical, political and economic construction. It is built and fed based on symbologies, norms and institutions that define paradigms of masculinity and femininity. In this way, the sex/gender system operationalizes power relations, initially delimiting and reinforcing patterns of behavior, acceptable or not for men and women, and, more recently, allowing generalizations for the interpretation of new forms of expression of the sexuality of individuals, such as sexual diversity<sup>5</sup>.

Talking about sexual diversity is to rescue elements to understand meanings and make sense of this social construction, which is revealed from a sexual identity. Such sexual identity is defined based on four criteria: biological sex (characterized by the genetic definition); gender identity (the perception of each individual as being male or female); social sexual roles (defined by the socially established characteristics of the female and male, from a gender perspective); and sexual orientation (characterized by the sexual affective desire of a subject in the face of another, be it of the opposite sex or of the same sex)<sup>3</sup>.

Sexuality is variable and multifaceted, taking different forms within each person, from the perspective of genders, in societies and operating through a heterogeneous set of discourses and social practices. As a social result, it differs from gender to gender, from class to class and from society to society. Furthermore, sexuality can also be understood as a human condition that the individual has

since birth and that integrates the natural, inalienable and imprescriptible factor<sup>6</sup>.

Contradicting previous ideas, the construction of sexuality and gender happens throughout life, continuously, and is therefore taught. For the author, the definition of male and female is not made at birth and subsequent biological classification of the body as male or female, being the subject of several discussions and still giving rise to heated debates that do not allow consensus at present<sup>7</sup>.

Throughout history, society has been organized through the voice of the heterosexual man (cisgender). The constructions of social representations are born from this worldview, which holds and regulates cultural spaces such as the media, schools, universities, among other social, economic and political scenarios. Currently, homosexuality is a topic that brings together many theoretical and empirical studies, especially among the human sciences that investigate the different forms of expression of this sexual orientation and the social impact it causes. Such repercussions point to a context that still discriminates against homosexuals and places them on the margins of society. Even so, the struggle of homosexuals to have their rights guaranteed under the Constitution is undervalued by certain social groups. These groups criticize the creation of specific laws with the objective of guaranteeing rights such as legalizing marriage, starting a family, having children, sharing the health plan, among other rights, a privilege only for heterosexual couples<sup>8</sup>.

Therefore, it is essential to debate and develop the democratic right to sexuality and examine, from the perspective of human, constitutional and fundamental rights, the various legal norms, whose scope of protection addresses the various manifestations of human sexuality. These rights are inserted in a context that delimits sociocultural parameters for the sexual orientation of its members and that, for a long time, understood heterosexuality as something obligatory, biologically determined. In this sense, sexuality was reduced to the binary regime of male and female, and was configured as a limit between lawful and unlawful, permitted and prohibited<sup>7</sup>.

Conceived for a long time as a pathology, homosexuality has only recently been removed from the category of disease in classification manuals. Some definitions led to the crystallization of this misunderstanding, as in the case of the World Health Organization (WHO), which considered egodystonic homosexuality as a diagnostic category according to the classification of mental disorders by the American Psychiatric Association, that is, when the individual is

uncomfortable with his sexual orientation, which induces him to seek treatment<sup>9</sup>.

Even though the inspiring model of Western society, the nuclear family, is increasingly becoming a minority experience, given the emergence of distinct family arrangements, the traditional idea of families formed by heterosexual, monogamous and procreative marriage, appears as an installed norm in the collective imagination, with the other family configurations being classified based on this understanding of the “gold standard”. This family configuration tends to be seen as immutable, unequivocal and natural, mischaracterizing the family as a social and historically constructed institution. This is analogous to what happens with heterosexuality, considered natural, according to divine laws, which would justify the prejudice against homosexuality. In this discussion, Brazil has been the stage of recent clashes, debates, and redefinitions about the themes that involve Gays, Lesbians, Bisexuals, Transvestites, among others (GLBTQIA+)<sup>10</sup>.

In this context, the experience, concretely lived or represented, of the moral dilemmas addressed is fundamental in the educational process, as it determines motivation and the active search for knowledge. The images and emotions presented on the screen constitute alternative paths that stimulate rationality. Therefore, cinema can play several roles (pedagogical, interpretive and experimental) in education, which contribute to the reflection and reinterpretation of social dilemmas. It can be a facilitating instrument for communication between educators and students as it is a didactic tool that meets the prevailing cultural pattern today. It ends up optimizing the possibility of seeing, hearing and experiencing something not experienced in reality. Thus, both fictional and non-fiction narratives (documentaries) offer students the opportunity to move from mere abstraction to a portrait cut from the concrete through an artistic representation of the concepts and themes addressed in the theory<sup>11</sup>.

Fictional films make desires, fears, longings and nightmares visible and audible, and express what is, may become or never will be. They can, therefore, indicate infinite ideas and points of view that can make it possible to accept or reject established concepts. On the other hand, documentaries represent aspects of a world that has already been occupied and shared and can therefore provide realities and worldviews to be explored and understood. Indeed, cinema enables the student and educator to reflect, reassess prejudices and re-signify them through the stories and narratives of others. In this sense, cinema allows the student to recreate preexisting humanistic values, which are so important personally and professionally for the benefit of future clients<sup>12</sup>.

Another important aspect is related to the opportunity that cinema creates to establish a varied, complex, multidisciplinary, less formal dialogue, outside the molds and limitations imposed by theory. These dialogues generate discussions capable of expressing the students' personal experiences, stimulating debate and providing a new look from the student to the object of study<sup>11</sup>.

From this perspective, this study seeks to reconcile the insertion of the curricular components of the undergraduate nursing course with the approach to controversial issues, using cinema as an educational tool. Given the above, the following questions emerged: what is the perception of nursing students regarding educational practice as a didactic tool to address issues related to respect for diversity and sexual orientation? And what is the impact that dynamic educational actions, focused on the individual, can provide?

Thus, the objective of the study was to report the experience lived by nursing students related to educational practice through cinema and its interfaces in approaches related to respect for diversity and sexual orientation, in order to promote debate, encourage reflection among participants, and consequently generate, on their part, critical reasoning and intellectual autonomy, thus enabling an expanded assessment of the impact that stimulating educational actions may provide.

## II. METHOD

Experience report that aims to describe aspects experienced by the authors, in the opportunity of an educational action that was developed by students of the seventh period of the Bachelor's Degree in Nursing, in a private Higher Education Institution in Belém, Pará, Brazil in the period from September to October 2019, after prior authorization from the coordination and direction. It is a qualitative approach, which addressed the problem outlined from descriptive, observational and participatory methods in the light of the problematization theory. The experience report is a descriptive research tool that presents a reflection on an action or a set of actions that address a situation experienced in the professional sphere of interest to the scientific community<sup>13</sup>.

The project of this research was not submitted to the Research Ethics Committee because it is an experience report of the authors, with the consent of the place where the action took place and guarantees of confidentiality of the data of those involved. The following data collection techniques were used: field diary, structured observation (participant researcher) and participation in activities (educational action). Personal data were not used, only



those of interest to the study, but without making any mention of data that could identify the participants.

The problematization has as basic axis the action-reflection-action that leads the process and has in Paulo Freire's studies, its origin, when the educator allows the student to perceive himself/herself as being inserted in the world, trying to respond to new challenges. The problems that must be studied start from a real scenario and have their political-pedagogical work marked by a critical posture of education<sup>14</sup>. It is described by an arc, as can be seen in Figure 1, in which there are five steps: observation of the problem, identification of the most important factors about the problem, study of the causes of the problem, development of solution hypotheses and, finally, actions to solve the problem<sup>15</sup>.

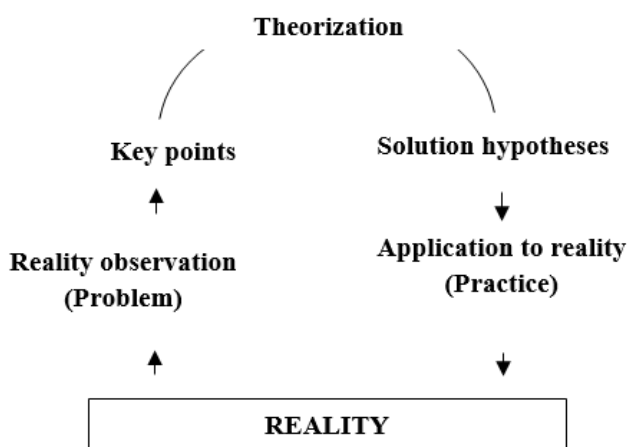


Fig.1: Charles Maguerez's Arch Method. Prepared by the authors, adapted from Miter et al. 2008<sup>16</sup>.

Therefore, problematization was the selected methodology for planning the activities proposed in this experience. During the reality observation phase, the students were instigated by the facilitator, starting from a generator theme "Issues related to respect for diversity and sexual orientation", to identify possible problems of solution abstracted from the dynamic reality, and elaboration of key points. Then, the students proceeded to theorization, with the objective of collecting scientific information in databases in the health area, in order to establish a theoretical-scientific basis and update information, in order to support action planning educational.

The solution hypothesis generated, then, was to elaborate a Health Education action based on the needs of the target population, with the concern to implement and adopt these habits not only in the academic environment, but in everyday life.

The educational action consisted of thematic cinema "SuperCine ESAMAZ", untying the knot of prejudice", using the film "To Wong Foo, Thank you for everything! Julie Newmar". Because it is aimed at the adult audience, which facilitated the approach of the team with the participants, in addition to promoting socialization and facilitating the reception.

After building the action proposal, the desire to convert the film's presentation into something more attractive and meaningful to the participants arose. Therefore, the coordination was consulted about the possibility of offering snacks and gifts during the educational action. Students will raise funds for the creation of gifts. At the end, a conversation circle was held for socialization and feedback.

The development of the activity took place in a single day, in the morning, in the space of the educational institution itself. Students from the 1st period of the nursing course participated in the educational action, totaling 19 participants.

The activity began with the presentation of students, with the objective of socialization. Then, the film was presented, lasting 1 hour and 48 minutes. After the film, a documentary about people (LGBTQIA+ and cisgender) who suffered some type of homophobic and racist violence was presented, lasting 9 minutes.

Thus, there was a round of conversation at the end, in which the participants were asked about the lessons presented in the story and their opinion on the subject discussed. This stage of the activity was of great importance in the Health Education process, as it provided clarification of doubts and feedback. After the conversation round, the gifts were distributed. The activity ended with a snack and socialization among the participants.

### III. RESULTS AND DISCUSSION

The experience provided the realization of the importance of Health Education actions, which must be performed in the most diverse scenarios, including in the academic environment. It is because of the importance of different knowledge that one sees the importance of the nurse's improvement, and one should always think of Article 14 of the nursing professionals' code of ethics, which states that the professional must improve their technical, scientific, ethical knowledge, cultural and humanistic, for the benefit of the person, family and community and the development of the profession<sup>17</sup>.

Health promotion is understood as a combination of educational and environmental support networks that aim

to achieve dimensions of life conducive to health and that involve the construction of attitudes and values that lead individuals to autonomous behavior, reverting to the benefit of self and of those around<sup>18</sup>.

The theme of this educational action was selected from the identification of a problem in the daily life of the target population, which allowed students to understand that Health Education actions are only valid when they meet the population's demands, needs and expectations.

Based on this understanding, we emphasize that health promotion actions should not be limited to just providing knowledge. We need to motivate learning, encourage students to analyze and evaluate information sources and, therefore, enable them to adopt behavioral practices based on knowledge<sup>18</sup>.

The interesting thing about this activity was that the topic addressed, in the first analysis, would not draw the attention of the participants in the context in which it was carried out. The importance of carrying out health actions based on the interests and needs that emerge from people's reality is emphasized. It is noteworthy that to meet this criterion, the authors initially performed a sensitive listening, using the brainstorming technique. It is likely that the impact caused by a previously planned action, without taking into account the interests of the participants, without the researchers having prior contact with the reality of the target population and observing the real needs, was little accepted by those involved.

It is described that, for a long time, health education focused its action on individualities, trying to change behaviors and attitudes, often without considering the countless influences arising from the reality in which people were inserted. It was common for isolated actions aimed at work for health, based on an assistencialist view of education and without discussing the awareness of the health theme and its interrelationships for the dynamic balance of life<sup>19</sup>.

We believe that, if health actions were based only on the expectations of students and teachers, they could result in an action whose theme was related to pathologies and decontextualized from the reality of the participants, causing little impact and timid changes in behavior. However, the experience and previous and dialogic contact with the participants showed that the problem that needed a solution was another, completely different, and not related to diseases.

The feedback provided by the participants of the activity to the organizers was very positive, with acceptance and appreciation of the knowledge built, with deep reflections identified through the speeches. Thus, it was found that a Health Education activity, based on the

real needs of the target population, can cause significant changes in lifestyle habits, promoting health. It is noteworthy that the orientation and planning of the activity from a real problem identified in practical experience were essential to support the action.

Thus, we found that a Health Education activity, based on the real needs of the target population, can cause significant changes in lifestyle habits, promoting health. We also emphasize that the orientation and planning of the activity based on a real problem identified in the practical experience in the field were facilitated by the methodology used, based on the problematization theory.

The action of health professionals in educational practices requires assistance based on the theoretical-practical domain, built from practical experiences and during graduation. We also note the importance of support and guidance meetings, as a bond of trust is needed between the educator and the student together with the family. Thus, the promotion of actions aimed at improving the quality of life tends to be facilitated.

We emphasize that it is not new that the link between health and education is recognized. From the perspective and argument of this intimate connection between the two areas, there is at least a consensus: good levels of education are related to a healthier population, just as a healthy population has greater possibilities to seize knowledge, formal education and informal<sup>20</sup>.

#### IV. CONCLUSION

The Intervention Project proved to be a powerful educational tool to contribute to paradigm shifts in training and in the care model. The development of the Health Educational action in the academic environment, related to the addressed theme, provided the participants with a positive impact, a fact identified through the steps developed during and after the educational action. The way in which information on the topic was addressed enabled everyone to actively participate, facilitating learning.

The experience and the thematic approach provided deep reflections on the importance of Health Education and the systematic planning of educational activities that meet the real needs of the population, which was facilitated in this experience by the choice of the methodological strategy through the problematization theory.

This experience also provided the opportunity to develop skills in students as facilitators of the educational process, in order to promote changes and ensure a healthy life context for the community in their future profession.

Therefore, there is a need for planning, organization and awareness of the team and users to participate in the proposed activities.

Through this action, it was possible to provide a theoretical and practical learning of stages such as the identification of needs, possibility of carrying out the activity, teaching-service integration and evaluation of the activities developed. We understand that health education should contribute to the individual's self-training, in order to teach and promote the quality of life and the human condition, teach how to live and teach how to become a citizen, in addition to being understood as a proposal to develop in the individual and in the group the ability to critically assess their reality, as well as to decide on joint actions to solve problems in their microspace and modify the health-disease conditions, in order to organize and carry out the action and evaluation her critically.

The higher education of health professionals was historically built on the fragmentation of content and organized around power relations, which gave the specialist teacher a central position in the teaching-learning process. This construction was linked to excessive specialization and distancing from the curricular content necessary for the formation of a health professional with a profile capable of meeting the needs of the population.

Teachers must seek strategies to innovate the teaching of practice, with health education being an effective tool in the modern context of health care. The practical moments aim at developing the skills necessary to master competence in the areas of health, management and systematization of care. They are privileged spaces that focus on real health care practices. Students have contact with the dynamic reality, accompanied by a facilitator who will assess the performance of the skills aimed at the profile of the professional to be trained.

All this innovation helps the facilitators to contribute to the excellence of the teaching-learning process, which is increasingly focused on what the job market requires from a professional nurse; thinking, critical, reflective in their doing. At the same time, nursing students begin to think and rethink their training, still seeing in the academy the need to build and develop their technical and scientific skills, and not least, attitudinal.

## REFERENCES

[1] Nascimento Geysa Cristina Marcelino et al. Relacionamentos Amorosos e Homossexualidade: Revisão Integrativa da Literatura. *Temas em Psicologia*. 23(3): 547-563, 2015. Retrieved from:

<http://pepsic.bvsalud.org/pdf/tp/v23n3/v23n3a03.pdf> on 04th April 2020.

- [2] Faro Julio Pinheiro. Uma nota sobre a Homossexualidade na História. *Rev. Subjetividades*. Fortaleza. 15(1): 124-129, abril, 2015. Retrieved from: <http://pepsic.bvsalud.org/pdf/rs/v15n1/14.pdf> 04th April 2020.
- [3] Albuquerque Grayce Alencar et al. Homossexualidade e o direito à saúde: um desafio para as políticas públicas de saúde no Brasil. *Saúde em Debate*. Rio de Janeiro. 37(98): 516-524. jul/set 2013. Retrieved from: <http://www.scielo.br/pdf/sdeb/v37n98/a15v37n98.pdf>. 04th April 2020.
- [4] Molina Luana Pagano Peres. A homossexualidade e a historiografia e trajetória do movimento homossexual. *Antíteses*. Londrina. 4(8): 931-944. julho-diciembre. 2011. Retrieved from: <http://www.redalyc.org/articulo.oa?id=193321417022>. 20th April 2020.
- [5] Rabelo Amanda Oliveira. Contribuições dos estudos de gênero às investigações que enfocam a masculinidade. *Exæquo*. (21): 161-176. 2010. Retrieved from: <http://www.scielo.mec.pt/pdf/aeq/n21/n21a12.pdf>. 04th April 2020.
- [6] Pontes Ângela Felgueiras. Sexualidade: vamos conversar sobre isso? Promoção do Desenvolvimento Psicossocial na Adolescência: Implementação e Avaliação de um Programa de Intervenção em Meio Escolar. [Dissertação]. 282 f. Instituto de Ciências Biomédicas de Abel Salazar da Universidade do Porto. Doutorado em Ciências de Saúde Mental, 2011. Retrieved from: <https://repositorio-aberto.up.pt/bitstream/10216/24432/2/Sexualidade%20vamos%20conversar%20sobre%20isso.pdf>. 20th April 2020.
- [7] Costa Crístofer Batista; Machado Mariana Rodrigues; Wagner Márcia Fortes. Percepções do Homossexual Masculino: Sociedade, Família e amizades. *Temas em Psicologia*. 23(3): 777-788. 2015. Retrieved from: <http://pepsic.bvsalud.org/pdf/tp/v23n3/v23n3a20.pdf>. 20th April 2020.
- [8] Silva Mônica Magrini de Lima et al. Família e Orientação Sexual: Dificuldades na Aceitação da Homossexualidade Masculina. *Temas em Psicologia*. 23(3): 677-692. 2015. Retrieved from: <http://pepsic.bvsalud.org/pdf/tp/v23n3/v23n3a12.pdf>. 21th April 2020.
- [9] Scorsolini-Comin Fabio; Santos Manoel Antônio. Insensatos afetos: homossexualidade e homofobia na telenovela brasileira. *Barbarói*, Santa Cruz do Sul. 36: 50-66, jan./jun. 2012. Retrieved from: <https://online.unisc.br/seer/index.php/barbaroi/article/view/2203>. 21th April 2020.
- [10] Santos Yurín Garcêz de Souza; Scorsolini-Comin, Fabio; Santos Manoel Antônio dos. Homoparentalidade Masculina: Revisando a Produção Científica. *Psicologia: Reflexão e Crítica*. 26(3.): 572-582. 2013. Retrieved from: <http://www.scielo.br/pdf/prc/v26n3/v26n3a17.pdf>. 21th April 2020.

- [11] Dantas Anielle Avelina; Martins Carlos Henrique; Militão Maria Socorro Ramos. O Cinema como Instrumento Didático para a Abordagem de Problemas Bioéticos: uma Reflexão sobre a Eutanásia. *Rev. Brasileira de Educação Médica*. 35(1): 69 – 76, 2011. Retrieved from: <http://www.scielo.br/pdf/rbem/v35n1/a10v35n1.pdf>. 21th April 2020.
- [12] Pinho Ana Carla de Oliveira Mello Costa. O cinema como prática didático-pedagógica no ensino jurídico: quebrando paradigmas. *Cadernos de Educação*. 13(25): jul-dez. 2013. Retrieved from: <https://www.metodista.br/revistas/revistas-metodista/index.php/cadernosdeeducacao/article/view/4957/4162>. 21th April 2020.
- [13] Fernandes Nayara Cavalcante et al. Monitoria acadêmica e o cuidado da pessoa com estomia: relato de experiência. *REME Rev Min Enferm*. 19(2): 238-241. abr-jun. 2015. Retrieved from: <http://www.reme.org.br/artigo/detalhes/1018>. 21th April 2020.
- [14] Xavier Laudicéia Noronha et al. Analisando as metodologias ativas na formação dos profissionais de saúde: uma revisão integrativa. *Sanare, Sobral*. 13(1): 76-83. jann-jun. 2014. Retrieved from: <https://sanare.emnuvens.com.br/sanare/article/view/436/291>. 21th April 2020.
- [15] Sousa Sidinei de Oliveira. Aprendizagem baseada em problemas (PBL-Problem Based Learning): estratégia para o ensino e aprendizagem de algoritmos e conteúdos computacionais. [Dissertação de Mestrado]. 251 f. Universidade Estadual Paulista. Faculdade de Ciências e Tecnologia. Presidente Prudente, São Paulo. 2011. Retrieved from: [http://repositorio.unesp.br/bitstream/handle/11449/96471/sousa\\_so\\_me\\_prud.pdf?sequence=1&isAllowed=y](http://repositorio.unesp.br/bitstream/handle/11449/96471/sousa_so_me_prud.pdf?sequence=1&isAllowed=y). 21th April 2020.
- [16] Mitre Sandra Minardiet al. Metodologias ativas de ensino-aprendizagem na formação profissional em saúde: debates atuais. *Ciência & Saúde Coletiva*. 13(Sup2): 2133-2144. 2008. Retrieved from: <http://www.scielo.br/pdf/csc/v13s2/v13s2a18.pdf>. 21th April 2021.
- [17] Ribeiro Viviana Carla da Silva. Papel do enfermeiro da estratégia de saúde da família na prevenção da gravidez na adolescência. *R. Enferm. Cent. O. Min*. 1(6): 1957-1975, jan-abr. 2016. Retrieved from: <http://www.seer.ufsj.edu.br/index.php/recom/article/viewFile/881/1006>. 21th April 2021.
- [18] Ilha Phillip Vilanova et al. Intervenções no ambiente escolar utilizando a promoção da saúde como ferramenta para a melhoria do ensino. *Revista Ensaio, Belo Horizonte*. 16(3): 35-53, set-dez. 2014. Retrieved from: <http://www.scielo.br/pdf/epec/v16n3/1983-2117-epec-16-03-00035.pdf>. 21th April 2021.
- [19] Gonçalves Fernanda Denardin et al. A promoção da saúde na educação infantil. *Interface comunicação saúde educação*. v. 12 n. 24, p. 181-92. Jan-Mar.2008 Retrieved from: <http://www.scielo.br/pdf/icse/v12n24/13.pdf>. 21th April 2021.
- [20] Casemiro, Juliana Pereira; Fonseca Alexandre Brasil Carvalho; Secco Fábio Vellozo Martins. Promover saúde na escola: reflexões a partir de uma revisão sobre saúde escolar na América Latina. *Ciência & Saúde Coletiva*. 19(3): 829-840. 2014. Retrieved from: <http://www.scielo.br/pdf/csc/v19n3/1413-8123-csc-19-03-00829.pdf>. 21th April 2021.