

Psi Space: A Project to Support the Mental Health of Nursing and Medical Students

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Abstract

The training of health professionals, in the technical-scientific learning process and other dimensions of care, may pose dangerous situations for the health of students. In the Brazilian State of Bahia, a public higher education institution receives individual requests from the population through an extension project called "Psi Space". This article is a case report that analyzes the university extension project. Narratives were developed about the characteristics of the project and the use of therapeutic strategies, namely: welcoming practices, brief psychotherapy and dialogue circles as well as reflections on the relevance and possible paths concerning emotional support for health science students in the university. We take into account the capacity of the extension project to promote health and psychosocial skills in academic environments and in practical contexts of these future health professionals.

Keywords: *Student Health; Students, Health Occupations; Mental Health; Higher Education Institutions, Students, Nursing, Students, Medical*

Abbreviations

HEI: Higher Education Institution; OBP: Operational Brief Psychotherapy

Introduction

During college years, important changes occur in those individuals in training, including the transition from high school to undergraduate education, adjustment to innovative curricula, and high requirements in the learning of technical-scientific and psychosocial skills. In this process the subjective construction of the professional identity is gradually shaped by the interactions between personal experiences and professional practices, and it also requires resilience in the face of challenges and adaptation, especially in the first years of the courses [1,2].

The processes of building scientific knowledge and developing theories and case studies are fundamental in the first stages of these professionals' training as well as those processes focused on experiences in the initial preparations for providing health care.

In general, health science students, especially Nursing and Medical students, perceive the difference at the moment of transition from the classroom to the beginning of practice when they get to know people's suffering, privacy, poverty, violence and even death. In this "rite of passage", they are forced to face their own life, their frustrations, their personal and family conflicts [2].

Chernomas and Shapiro [3] have discussed cases in which nursing students found it difficult to manage situations or felt unable to trust other people. The stress experienced by them highlighted the need to understand the factors that increase the levels of this phenomenon, since students must deal with realities that are often different from their personal experiences and theoretical knowledge.

Thus, these health professionals' training involves the student getting acquainted with aspects of his own subjectivity. Such processes may cause emotions in the individual to such an extent as to interfere in the learning process, generating, among other feelings, anxiety, anguish, insecurity, personal conflicts, questioning of values and problems in interpersonal relationships. Al-Zayyat and Al-Gamal [4] point out to emotions related to interactions with colleagues, fear of making mistakes and problems with family.

When compared to other areas of knowledge, health science students have higher levels of anxiety, and the undergraduate years may become a critical period of vulnerability. When seeking help to solve the problem, medicalization becomes the most used resource (Marchi, *et al.* 2014), with consequences in the learning process.

A pharmacoepidemiological study with health science students from public institutions in Brazil identified a prevalence of 20.3% of psychotropic use after getting into university. Medical students were among those who most frequently used drugs and in 40.7% of cases reported problems such as loss of appetite, loss of concentration, insomnia, drowsiness, loss of libido and poor school performance. The authors highlight the importance of implementing preventive programs to safeguard the psychological state of students [5].

In Southern Brazil, a research which had as subjects nursing students found a prevalence rate of licit drugs of 20.7% and an 83.1% rate of tobacco and alcohol consumption, respectively. As for illicit drugs in general, the prevalence rate was 24.6% (Picolotto, 2010). Another research points out that the number among medical students are higher than among the general public, and an issue arises about them: the non-recognition of their own illnesses, mainly mental disorders [6].

Thus, interest in psychological morbidity research among Medical and Nursing students is growing worldwide. In the face of the difficulties and challenges of academic experiences, there is a high prevalence of burdens related to stress, anxiety, depression, common mental disorders, burnout syndrome, use of psychoactive, among other problems that influence students' performance and learning [7-10]. Chou, *et al.* [11] upheld these findings suggesting that stress influences problem-solving, memory, attention to detail and learning processes.

Students need to expand their knowledge of themselves, especially by observing their own interactions with individuals and the circumstances of their interventions. In turn, teachers will have the unpaired opportunity to oversee the process of students' self-development as well as the construction of their professional identity, creating spaces for prevention of mental disorders and promotion of these future professionals' mental health.

All emotionally supported students have an increase in their ability to cope with anxiety, separation from family environment, stressful events related to college, as well as in the ability to establish new relationships which can contribute to greater integration, academic achievement and healthy construction of their professional identity.

In general, there are gaps regarding the emotional support strategies for students and there are no pedagogical project proposals defined by the Ministry of Education that include this support in an integral perspective of the professional in training in the face of the subjective interactions that will be established when challenged by the professional reality.

Then, the development of practical disciplines should be focused on the preparation of the individual/student/professional, aiming at dealing with real situations, and not techniques and strategies to be applied. Student health is an emerging and polysemic issue to be understood from the interaction between the demands inherent to higher education and social, economic and personal aspects (Oliveira; Padovani, 2014).

Based on these reflections and on the professional daily lives of Psychology and Mental health professors of a public Institution of Higher Education (HEI), this descriptive study of an extension project called “Psi Space” emerged. A space to welcome requests for emotional support of health science students, and to awaken the need of self-care among participants and health science students. These are initial steps, grounded on the university’s relevance as a space for health promotion.

In terms of health proposals, the Ottawa Charter (1986) emphasizes that health is constructed and lived by people within what they do in their daily lives. Students live, in part of their daily life at the university, full of expectations related to the chosen profession. They come with intense repertoires of experiences that make up their life stories and we should consider these aspects in the interventions with undergraduate students.

Thus, this research aims to report the extension project called “Psi Space” in the promotion of care and subjectivity, and in meeting the requests for emotional support of medical and nursing students of a public higher education institution in the state of Bahia.

Project Case Study

This case report analyzes the extension project “Psi Space”, which has been developed through the narrative of the project, field journals, and the reflection of the authors regarding the interactive processes and their contributions as well as possible paths in the implementation of emotional support for Nursing and Medical students of a public university in the state of Bahia, Brazil.

In the context of Brazilian universities, an extension project is defined as a procedural and continuous action of educational, social, cultural, scientific or technological nature, which brings together knowledge and practice, and is part of one of the structuring principles, the extension, considered as one of its greatest aspects. The project aims to provide students with a range of activities that contemplate the harmonious development of the physical, cognitive, affective and social aspects, so that they can consequently obtain success and satisfaction in the chosen professional activity [12].

The project is registered by an HEI, where there are training programs for Health Science Professionals in the Nursing and Medical fields. The Medical course began its activities in 2001 and has an innovative pedagogical project, starting from Problem-based learning (PBL), with a workload of 9,300 hours, with the inclusion of students in scenarios of collective health care in the first year of the course. The 30-year-long Nursing course maintains a conservative curriculum, with some subjects with active teaching-learning methodologies, and has a total workload of 5,160 hours, and practical activities from the second year of the course.

The university is located on a highway between two major cities in the state of Bahia. With the new admission policies in public universities, health science courses receive students from municipalities and states outside the region around the university. In 2019, a total of 487 undergraduate students were registered, 251 (51.5%) of whom were Nursing students and 236 (48.45%) were Medical students. This figure indicates the relevance of this study, which reflects the project for supporting these students.

Implementation of “Psi Space” to support students

The “Psi space” project was established in 2015 and aimed at offering a moderate space that is intended for the expression of health science students’ subjective experiences, its specific objectives are: 1) promoting the reporting and sharing of experiences; (2) encouraging the expression of feelings in their practices, generating thoughts about the constitution of subjectivity of the healthcare professional;

3) promoting the articulation of personal strategies used to cope with conflict; (4) reducing students' anxiety; (5) increasing motivation of students for achievement in the professional practice; (6) promoting the training of professionals in health care and raising awareness of their roles in the community; (7) developing research that comprehends articulation of reports and health science students' experiences

The project's activities are carried out by teachers with training in Psychology. Meetings take place in the psychological care room of the campus, in the training room (suitable place for group interventions) and in the classrooms of undergraduate courses.

In first-year classrooms of Nursing and Medical courses (first semester and first year respectively), a moment of socialization is set, in which the project and its contact e-mail are presented so those students who are interested can get in touch. At that moment, a set of questions is also applied, for students to fill individually, containing questions related to personal life, academic life, adaptation process and mental health.

The development of this instrument was based on the Operational Adaptive Diagnostic Scale (OADS), made by Ryad Simon [13]. In this first instance, the objectives of this collection of information about the students are: 1) to understand the profile of students enrolled at the university and, specifically in these health science courses, to encourage them to think about self-care and seek expert assistance and (2) to get to know the students for future psychological counseling and, if necessary, at other stages of the academic education.

Therefore, from this first moment of disclosure, we began to meet the spontaneous demand of the students for individual psychological care. Most contacts are encouraged by other students who have already been treated, which implies a sense of trust and effectiveness of the support provided. It is a gradual work of raising awareness of self-care and search for specialized help with the assurance of confidentiality and individualized attention for personal and academic problems.

As for the group interventions, these actions are punctually scheduled and advertised in classrooms and university pavilions by means of posters. In this case, the demand is also spontaneous. The number of participants ranges from 15 to 20 on each dialogue circle.

On average, 15 students are individually treated on a weekly basis, through spontaneous demands and, on scheduled time, in the psychological care room. Most of them are single young adults from other cities in Bahia and from other states who live alone or in student housings.

Occasionally, other professors are invited to participate in the project in order to provide redirections to the psychosocial attention network in the municipalities next to the university, and also to participate in events in which there are sharing of knowledge and practices related to mental health care.

Welcoming practices, brief psychotherapy and dialogue circles were initial strategies to attend Nursing and Medical students. These strategies highlight the intertwining of other tools such as listening, connecting and continuously reflecting/acting on the process of caring for the mental health of future health professionals.

Methodological strategies for student support

Welcoming practices

According to Miranda and Miranda welcoming practices [14] are a general part of human relations and supportive relationships in particular. Welcoming is to increase perception, to open up to help the other, to call them by their name. Neves and Rollo [15] point out that welcoming practices express closeness and that being close to someone is an act of inclusion.

Another concept of welcoming practices is that of care, especially if we consider the idea that the subject of the health field is not in fact the promotion and protection of health, but the creation of care to such an end [16].

Welcoming practices enable the creation of bonds among students; it can promote self-care, better self-understanding and co-responsibility. From concept to practice, it is a tool used to improve access and effective assistance, which can represent the interaction between theory and practice with more chances of success in the assistance provided and in the demands of individuals [17].

In the “Psi Space” project, it is possible to understand the relevance of students’ welcoming demands related to the following adaptation difficulties:

- Course methodology (insecurity, competitiveness, anxiety);
- Life changes by getting into university: living in another city and state apart from family and social relations, which generates feelings of insecurity and helplessness;
- Need of affection that impacts on interpersonal relationships and on the search for psychological support as a consequence of the fragility of family ties; conflicts and challenges of reconciling the beginning of academic life with personal care and household tasks without the help of family members;
- Distance from family as freedom for the expression of personality, including personal choices regarding affectivity, sexuality and interpersonal relationships. This process of self-discovery may lead to conflicts and questioning of family, religious and social values.

In this process, there are also fears related to academic failure, motivated by:

- Family demands for high performance, in some cases as a consequence of parents’ unfulfilled achievements;
- Personal demand for high performance as a way to repay family’s investment and expectation;
- Low self-esteem in relation to one’s own potential in terms of academic performance, considering previous frustrations, difficulties in studies and, in some cases, learning gaps from high school that have an impact on the difficulty in understanding the lectures in undergraduate school;
- Insecurity in health practices, reflecting on the performance of specific skills when performing procedures;
- Questions regarding the professional future, generating a perception of oneself as incapable of becoming a competent professional;
- Comparison with classmates’ performance.

Imbalances between investment in studies and investment in affective and family life are also problems among undergraduate students, more specifically, conflicts in interpersonal relationships stemmed from the formation of groups at the university, especially groups of practice, not always formed by affinity.

Therefore, the welcoming practice, which was developed in the project in the first few years of Nursing and Medical courses, has an important role to play, among other things, in promptly identifying psychological distress among students, providing needed support in order to alleviate the vulnerabilities and contribute to the establishment of healthy interactive processes as it has been indicated in the literature about the theme [2].

Brief psychotherapy

Short-term psychotherapeutic practices have emerged to meet the growing demand of the population for focal psychological interventions, aiming to address, more specifically, emerging conflicts presented as the main reasons for the demand for psychological help [18].

In this perspective, they are practices that propose long-term treatment adjustments to the reality of modern society, presenting possible interventions to be carried out in different types of health providing institutions and, as in the case presented here, in higher education institutions. They become more accessible and less elitist because they represent a reduction in costs when compared to long-term psychotherapies [18].

In the individual care in “Psi Space”, the Brief Psychotherapy, which focuses on the Operational Brief Psychotherapy (OBP), based on Professor Ryad Simon’s works, was born out of the adaptation theory as a theoretical reference and the Operational Adaptive Diagnostic Scale (OADS) as a guiding instrument for its operationalization. There were also the psychodynamic theories underlying the situations and problems of the four adaptive sectors: affective relationship, social-cultural, productivity and organic [13].

Based on concepts from the Adaptation Theory and identifying the adaptive sectors in which the student presents inadequacies, the assistance aims to replace inadequate solutions that had been used by the students, which precipitated the solution of problems, with more suitable ones.

OBP has short duration, which facilitates treatment in case of great student demand.

OBP benefits are perceived, especially in times of vulnerability regarding the initial adaptation conflicts of Nursing and Medical students. First-year students’ life is full of novelty. This is a period of transition between high school and university, in which most students are in the beginning of adult life.

The vulnerability in this stage of academic life is common to everyone who gets into university. However, when we devote ourselves more specifically to students of Nursing and Medical courses, another period that requires special attention is the beginning of the practical activities, i.e. when they begin field activities in healthcare services within the community. At this moment, many feelings are ignited and the identity of the future professional begins to take shape.

Dialogue circles

Dialogue circles are possibilities for sharing. Afonso and Abade [19] point out that dialogue circles are used in participatory methodologies, their theoretical references come from the articulation of authors of social psychology, psychoanalysis, and education, to create a space where their participants meditate about everyday life. In the Project “Psi Space”, the dialogue circles were held to meet the students’ need to share opinions and feelings experienced at the University, in the search for dialogue, welcoming and a greater understanding of the impact of the academic life on mental health, without fears and obstacles.

Topics such as “Mental Health at University” and “Mental Health of Health Students” were discussed. From these themes, specific topics were also requested to be worked on in the future, such as anxiety in university students and depression.

The dialogue circles are punctually scheduled and also meet the demands of collegiate organizations from other courses and sectors of the Higher Education Institution, thus becoming spaces produced of subjective exchanges. However, as much as there are demands for interventions like these, pointing to the needs of care and welcoming of new students, it is observed that the priority at the Academy is to meet the demands of the pedagogical programs of the courses, distributed in full and available hours. There is a constant demand for activities, complementary studies, preparation of presentations and text readings.

The scheduling of sports, leisure and/or reflexive activities that provide the expression of experiences and feelings related to academic life, becomes secondary. University students request these spaces to be offered at the university but do not find the time to enjoy them. There is, therefore, a contradiction: if they cease to comply with the program of the course and the extra activities proposed, they may be harmed, with direct or indirect negative consequences for this time “not dedicated to their studies”.

When the dialogue circle on Mental Health is proposed by the students of a course, from a specific situation experienced by a particular class, there is a concession on the part of the teachers to ensure the participation of the students. However, when it is an offer of an intervention aimed at a general public of Health Students as a preventive proposal, we face the difficulty of reconciling date and time that meet the possibilities of students of different courses and semesters.

We realize that there is interest in the subject, but overcoming the obstacles to participation occurs, more effectively, when there is already a clearly installed problem, for example, when there is a suicide attempt among students in a class, becoming a wide-open episode among the students. The repercussion, in this case, covers students, teachers and the coordination.

Future and possible relevance of the extension program

The “Psi Space” contributes to minimizing mental health vulnerabilities of Nursing and Medical students related to moments of intense anguish, anxiety, self-destructive thoughts and behaviors, and suicidal ideation, among other difficulties of adaptation to graduation and transition in learning moments, in scenarios of health care practices.

The listening of some situations of the suffering of students is evidenced by situations external to the academic environment. This occurs when one perceives depression reactive to the loss of family members, making it difficult to continue their studies, especially by triggering intense emotional reactions to some contents studied in Nursing and Medical courses. According to Motta, Soares and Belmonte [2], it is important to remember the impact caused by the loss of a parent in the psychodynamics of the students, at the same time, this moment is crucial for their life cycle: the loss of grandparents.

Mention must also be made for contributions to highlight the needs for change in the pedagogical projects of the courses, since we can observe symptoms of anxiety and difficulties in planning their studies; overload of physical and mental health conditions, including the manifestation of disorders that result from stress and conflict through the gap between the content in the book and their experiences in their practices; fear of making a mistakes during practice, in health care, especially uncertainty of being judged by their teacher.

The teacher-student relationship is fundamental to enhance or minimize the suffering of students, especially when introducing practices in the hospital and contact with sick patients. In the act of caring, the negative attitudes of the teacher that shows lack of affection, tolerance, patience, and ethics with the students, in this early stage of learning, are perceived by the students as not promoting quality of life ([20], p. 258).

And how to produce quality in their path through education, so that future professionals can invest in the quality of life of their patients?

Facing the course’s workload, events such as leisure, which could minimize the stress and vulnerability of students, are compromised. “For the nursing student, regardless of their current semester, leisure represents breaking the routine, the search for moments of pleasure and the break with the tension of their troubled daily lives. Leisure is opposed to the academic context, often exhausting, tiring, and stressful, as a way for the future professional to enjoy moments of expression of creativity, enjoyment, occupation of time windows, playing, celebrating, laughing...” ([21], p. 22).

Thought must also be given about the search for immediate relief and easy access among students to self-medication, and the use of psychotropic drugs. Which makes the demedicalization of mental suffering another challenge in supporting health students.

A limitation of the “Psi Space” project is the almost exclusive attendance of the spontaneous demand, and the organization of this demand is a challenge. In this direction, a research project is now underway, also with the participation of the authors, which investigates psychic suffering and academic experiences, in a representative sample of Nursing and Medical students.

Thus, the challenges and possible realities of the “Psi Space” project are, among other things, the strengthening of the support strategies used, their enlargement, to produce other interaction spaces or other circles that dialogue with the teachers and parents of students, and on actions that aim to articulate the teaching and research on extension, complying with the guidelines of Brazilian universities, regarding the inseparability of these dimensions.

In this sense, the project is part of an university extension, in the Health area, constituting itself in a “differentiated space for new experiences aimed at humanization, care and qualification of health care” ([22]. P. 257) and has potential for learning communication skills and interpersonal relationships. This implies the care/education of students and the way they take care of their future patients [23,24].

Conclusion

The Project “Psi Space” has shown itself as the potential of the extension projects to promote health and learning of psychosocial skills in the academic experiences and contexts of performance of these future health professionals.

During interactive processes developed through the welcoming practices, brief psychotherapy, and dialogue circles, the participants reported a multiplicity of phenomena experienced at the University, with implications for the needs of curricular changes and advances in support of their psychological needs.

The project has been relevant and encourages the authors to think about, on a permanent basis, ways to strengthen and broaden social actions and actors, articulating it to education and research, in an inseparable way. Finally, it is significant to think about the impact of the project on the lives of future professionals and how we are also affected by this process of caring.

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Conflict of Interest

None.

Bibliography

1. Anjos Diego Roberto Lima Dos., *et al.* “Questionário de Vivências Acadêmicas (QVA-R): avaliação de estudantes de medicina em um curso com currículo inovador”. *Avaliação: Revista da Avaliação da Educação Superior Avaliação (Campinas) Sorocaba* 22.1 (2017): 105-123.
2. Motta Isabelle Christine de Moraes., *et al.* “Uma Investigação sobre Disfunções Familiares em Estudantes de Medicina”. *Revista da Associação Médica Brasileira* 43.1-1 (2019): 47-56.
3. Chernomas WM and Shapiro C. “Stress, depression, and anxiety among undergraduate nursing students”. *The International Journal of Nursing Education Scholarship* 10 (2013): 255-266.
4. Al-Zayyat AS and Al-Gamal E. “Perceived stress and coping strategies among Jordanian nursing students during clinical practice in psychiatric/mental health courses”. *The International Journal of Mental Health Nursing* 23 (2014): 326-335.
5. Oliveira Luiza Barbosa de., *et al.* “Increase of binucleated cells in the oral mucosa: a study on the use of psychotropics by students of a Brazilian institution”. *Revista da Associação Médica Brasileira* 65.6 (2019): 870-879.
6. Machado Cleomara de Souza., *et al.* “Estudantes de Medicina e as Drogas: Evidências de um Grave Problema”. *The Revista Brasileira de Educação Médica* 39.1 (2015): 159-167.
7. Ribeiro Christiane Fernandes., *et al.* “Prevalence of and Factors Associated with Depression and Anxiety in Brazilian Medical Students”. *Revista da Associação Médica Brasileira* 44.1 (2020): e021.
8. Oliveira Elias Barbosa de., *et al.* “Transtornos mentais comuns em acadêmicos de enfermagem do ciclo profissionalizante”. *Revista Brasileira De Enfermagem* 73.1 (2020): e20180154.

9. Conceicao Ludmila de Souza, *et al.* "Saúde mental dos estudantes de medicina brasileiros: uma revisão sistemática da literatura. Avaliação (Campinas)". *Avaliação: Revista da Avaliação da Educação Superior Sorocaba* 24.3 (2019): 785-802.
10. Calcides Dâmaris Alejandra Paula, *et al.* "Burnout Syndrome in medical internship students and its prevention with Balint Group". *Revista da Associação Médica Brasileira* 65.11 (2019): 1362-1367.
11. Chou WP, *et al.* "Association of stress coping strategies with Internet addiction in college students: the moderating effect of depression". *Comprehensive Psychiatry* 62 (2015): 27-33.
12. Menegon RR, *et al.* "Projetos de extensão: um diferencial para o processo de formação". *Colloquium Humanarum* 10 (2013): 1268-1274.
13. Simon R. "Psicologia Clínica Preventiva". São Paulo, Vetor (1983).
14. Miranda CF and Miranda ML. "Construindo a relação de ajuda". 10th edition. Belo Horizonte, Crescer (1996).
15. Neves C and Rollo A. "Acolhimento nas práticas de produção de saúde". 2nd edition. Brasília: Ministério da Saúde/Secretaria de Atenção a Saúde/Núcleo Técnico da Política Nacional de Humanização (2006).
16. Ramos Priscila Freitas Danielle Abdel Massih. "Construção de um projeto de cuidado em saúde mental na atenção básica". *Psicologia Ciencia Profissao* 30.1 (2010).
17. Penna Cláudia Maria De Mattos, *et al.* "Acolhimento: triagem ou estratégias para universalidade do acesso na atenção à saúde?" *Revista Mineira de Enfermagem* 18.4 (2014): 815-822.
18. Braier EA. "Psicoterapia breve de orientação psicanalítica". São Paulo: Martins Fontes (1997).
19. Afonso ML and Abade FL. "Para reinventar as rodas: rodas de conversa em direitos humanos". Belo Horizonte: Recimam (2008).
20. Oliveira RA and Ciampone MHT. "A universidade como espaço promotor de qualidade de vida: vivências e expressões dos alunos de enfermagem". *Texto and Contexto Enfermagem Florianópolis* 15.2 (2006): 254-261.
21. Beuter M, *et al.* "O lazer na vida de acadêmicos de enfermagem no contexto do cuidado de si para o cuidado do outro". *Texto Contexto Enfermagm* 14.2 (2005): 222-228.
22. Hennington Éida Azevedo. "Acolhimento como prática interdisciplinar num programa de extensão universitária". *Cadernos de Saúde Pública* 21.1 (2005): 256-265.
23. Zazula Robson and Appenzeller Simone. "Evaluation of a Psychoeducational Intervention in the Development of Social and Communication Skills for Incoming Medical Students at a Bilingual University. Trends Psychol". *Ribeirão Preto* 27.3 (2019): 749-762.
24. Grether Eduardo Otávio, *et al.* "Prevalência de Transtornos Mentais Comuns entre Estudantes de Medicina da Universidade Regional de Blumenau (SC)". *Revista da Associação Médica Brasileira* 43-1-1 (2019): 276-285.

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