

Working in the street clinic: use of IRAMUTEQ software on the support of qualitative research

Trabalho no consultório na rua: uso do software IRAMUTEQ no apoio à pesquisa qualitativa Trabajo en Consultorio en la Calle: la utilización del software IRAMUTEQ para apoyar la investigación cualitativa

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ABSTRACT

Objective: This study aims to know, through basic lexicography, the most recurring vocabulary on a report from a typical work week lived by professionals from the teams of the Street Clinic in a city located in the South of Brazil. Method: It is an exploratory qualitative research, which was attended by health professional members of the Street Clinic. Data were obtained through interviews, which were processed in IRAMUTEQ software and analyzed by the word cloud. Results: The most common word was "people", in the sense of "us - team". Conclusion: The software allowed insightful look on the material collected, describing the categorization process and consequently the results of the study enhancing qualitative research. This study revealed the importance of teamwork, reinforcing the importance of the subjects to share with one another responsibilities and defining collective care strategies.

Keywords: Primary Healthcare; Homeless People; Patient Care Team; Qualitative Research; Software.

RESUMO

Objetivo: Conhecer por meio da lexicografia básica, o vocabulário mais frequente no relato de uma semana típica de trabalho vivenciados pelos profissionais das equipes de Consultório na Rua de um município sul brasileiro. Método: Trata-se de pesquisa qualitativa exploratória, na qual participaram profissionais de saúde integrantes das equipes de Consultório na Rua. Os dados foram obtidos por meio de entrevista, os quais foram processados no software IRAMUTEQ e analisados pela nuvem de palavras. Resultados: A palavra mais frequente foi "gente" no sentido de "nós - equipe". Conclusão: O software permitiu olhar criterioso sobre o material coletado, qualificando o processo de categorização e, consequentemente, dos resultados do estudo potencializando a pesquisa qualitativa. Este estudo revelou a importância do trabalho em equipe, reforçando a importância dos sujeitos de compartilhar entre si responsabilidades e definição de estratégias coletivas de cuidado.

Palavras-chave: Atenção Primária à Saúde; Pessoas em Situação de Rua; Equipe de Assistência ao Paciente; Pesquisa Qualitativa; Software.

RESUMEN

Objetivo: Identificar, a través de la lexicografía básica, el vocabulario más frecuente en la narración de una semana común de trabajo de profesionales de los equipos de los Consultorios en la Calle, de una ciudad al sur del Brasil. Método: Se trata de una investigación cualitativa exploratoria, en la cual participaron profesionales de los Consultorios en la Calle. Los datos fueron obtenidos a través de entrevistas, procesados por el software IRAMUTEQ y analizados por la nube de palabras. Resultados: La palabra más frecuente fue "gente" en el sentido de "nosotros - equipo". Conclusión: El software ha permitido analizar cuidadosamente el material recogido, calificando el proceso de categorización y de resultado del estudio, potencializando así la investigación cualitativa. Este estudio reveló la importancia del trabajo en equipo, fortificando la relevancia de los sujetos en compartir las responsabilidades y definiendo estrategias colectivas de atención.

Palabras clave: Atención Primaria a la Salud; Personas sin Hogar; Grupo de Atención al Paciente; Investigación Cualitativa; Programas Informáticos.

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INTRODUCTION

The condition of the person on the street is one of the most extreme examples of inequality and social exclusion in the world and historically they do not access health systems¹⁻³. The Street Clinic, established by the National Policy for Basic Care - NPBC⁴, is a proposal that seeks to expand people's access in the streets and provide, more opportunely, comprehensive healthcare through teams and services of basic attention. The Clinic teams in the streets are formed by professionals from various fields who perform activities to ensure care, defense and protection of people in situations of personal and social risk. These teams conduct educational and cultural activities, make the dispensation of health protection inputs and referrals to health and intersectoral services and monitor the care of people on the streets.

Given the specificities of the population in the street, the Street Clinic teams act towards the different problems and health needs as active search and care for users of alcohol, crack and other drugs, and having harm reduction strategy as the axis across all the health actions carried out.

Harm reduction brings the construction of health production strategies from the uniqueness of each subject, shifts the look of health from the focus on the drugs to focus on the subject's life, in which the care considers the user's experience with the drug as a real and existing factor, without seeking to eliminate it immediately⁵.

Studies on the theme of the Street Clinic are scarce, the materials found are directed to the training of professionals through decrees and ministerial regulations requiring more studies to elucidate this phenomenon.

Based on the above, this study aimed to understand through the basic lexicography, the most common vocabulary in the story of a typical work week experienced by professionals from the Street Clinic's teams.

METHODS

This is a qualitative research with exploratory focus, about the purposes and case study on the means, held in a city in the South of Brazil. The theoretical framework was anchored in the Praxis Intervention Theory of Public Health Nursing - PITPHN, which proposes to interpret reality in constant transformation⁶.

Participated in the study 20 health professionals that integrated Street Clinic teams in the city studied, registered in the National System of Health Establishments. Were excluded the professionals who were on vacation or on medical leave at the scheduled time for the interviews.

Data collection occurred in the period from January to February 2015, through interview with partially structured roadmap *in situ* and on the work shift of health professionals, by appointment, in private areas, with an average duration of 25 minutes, consisting of two blocks of questions, being the first block referring to professional category, additional training and

time of work; and the second block sought to know in detail a typical work week at the Street Clinic, allowing the interviewee to freely discuss the issue of study.

The speeches were recorded on digital equipment and fully transcribed by the researcher, and the participants were randomly encoded (P1 to P20) to guaranteed anonymity.

The ethical aspects were respected according to the regulations for research involving human beings - National Health Council Resolution, No. 466, of December 12th of 2012. The approvals were obtained in the opinions 742,589 of the Ethics and Research Committee of the Universidade Federal do Paraná - Health Sciences sector/HCS and 767,679, of the Ethics Committee of the Municipal Secretariat of Health of Curitiba.

The use of IRAMUTEQ software in data analysis

To support the data analysis of this research, it was used the software IRAMUTEQ (Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires). It allows different processing and statistical analysis of texts produced. Among the advantages, the software is free in the open source logic. It is anchored in the R Software and in the python programming language. In 2009, Pierre Ratinaud⁷ developed it in French, but currently has full dictionaries in other languages. In Brazil, its use began from 20138 and the health area has appropriated this tool 9-10. The IRAMUTEQ provides five types of analysis: classic text statistics; specificities of research groups; descending hierarchical classification; similitude analysis and word cloud8. It is noteworthy that the use of software is not a method of data analysis, but a tool to process them, therefore, it does not conclude this analysis, since the interpretation is essential and is the responsibility of the researcher¹¹.

In this study, for the data processing it was used the word cloud, in this way, the words are grouped and graphically arranged according to the frequency, which easily enables its identification as a single file called the *corpus*, which gathers the texts originated from interviews⁸. Thus, each interview featured a text, and all these texts constituted the corpus of analysis of this research.

From the most frequent words given in the text segments, lexical analysis was performed. This analysis overcomes the dichotomy between quantitative and qualitative research, as it allows to employ statistical calculations on qualitative data, the texts¹¹. The vocabulary is identified and quantified in the frequency and, in some cases, also in relation to its position in the text, that is, subjected to statistical calculations for later interpretation, being one of the differences of content analysis, in which the researcher interprets and then systematizes¹².

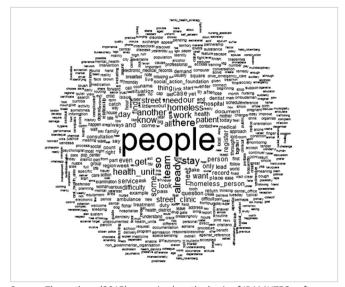
RESULTS AND DISCUSSION

The results will be presented in two aspects: characterization of the participating professionals and lexical analysis - cloud of words method.

As to the characterization of the participants, of the 20 professionals interviewed, the majority (80%) were female. Regarding the professional category, two were nurses, four were psychologists, four were social workers, two were dental surgeons, two were assistants in oral health and six were nursing assistants. The time of work experience in the municipality studied ranged from 3 to 27 years, predominantly the time between 6 and 10 years (45%), with an average of 7.05 years. As to additional training, all professionals with higher education reported having attended one or more postgraduate courses in the following areas: public health, management, mental health and chemical dependency.

By the word cloud method, which groups the words and graphically organized them according to their frequency, the word "people" was the one most frequent in the corpus - 950 times -, followed by the word "team" - 230 times (Figure 1).

Figure 1. Word Cloud.



Source: The authors (2015), organized on the basis of IRAMUTEQ software.

It is noted in the figure that the words are randomly positioned in such a way that the most frequently used words appear larger than the others, thus demonstrating its prominence in the *corpus* of the research analysis.

For the purposes of this study, after the processing steps, it were interpreted the meanings of words in the professionals speeches, in this way the word "people" had the sense of collectivity which is often synonymous with team.

- [...] we only have a frustration at the time you place an expectation on another person. And working with the street person teaches us that no one gives besides what it has, so what can I expect from you is what you have to give (P1).
- [...] we have patients of various levels of education, we have found people with higher education to illiterate, so it

is also very varied the type of guidance that we must do, completely different, quite interesting... (P12)

[...] we are the ones who need to insist, call and see how the person on the street that we have forwarded (...) (P20)

The professional who works with health, always works in the collective, being that health work is always done by a collective worker. There is need for change in medical-hegemonic model, because the work potential of all staff can be used in the direct care of the user, thus increasing the response capacity of services¹³.

The word "team" refers to the teamwork, as can be observed in the following segments:

[...] with respect to approaches, it is usually the team that approaches the person who is on the street, but it also has happened of the person on the street coming up many times for various reasons: tell the difficulties, tell that fought with the companion (P2).

The multidisciplinary teamwork was considered a potentiator element of the work process in the Street Clinic. The presence of a multidisciplinary team as a facilitator in the care with the person on the street has also been reported in studies in other municipalities¹⁴⁻¹⁶.

Teamwork is a potentiality for solving health intervention when aims to promote integration between professionals and those with users¹⁷.

In the Street Clinic, teamwork refers to the ability of subjects to share among themselves the responsibilities and composition of collective strategies of care and reception, highlighting the differences and learning to deal with the present conflicts in labor relations³.

The professionals interviewed stressed the importance of teamwork, posing as one of the facilities to be acting in the Street Clinic.

- [...] the ease that we have to act in the Street Clinic is the team, the people, we are a very cohesive team in our actions, it is a team well-centered on attitudes, we just need to look at one another (P10).
- [...] Another facility is to work as a team, one strengthens the other because we are a team with many professional categories, sometimes you are going to a line of thought, the other makes a speech and you think: Whoa! This way is easier! Interdisciplinarity! (P18).

Interdisciplinarity consists of an articulatio between various disciplines focusing the object, the problem or the complex theme, for which the response of a single area ins't enough¹⁸. Work in team aims changes that impact on the health-disease process of a population. The interdisciplinary

action presupposes the possibility of the practice of a professional to rebuild itself on the practice of another, both being transformed for the intervention in the reality in which they are inserted¹⁹.

The multidisciplinarity of the team can increase the range of action that starts at the tip all the way to the interior of the network of health and in other sectors, from the existing community resources in the area of activity of the Street Clinic, by accessing health equipment also as Basic Health Units, Psychosocial Support Centres and intersectoral approach as to the Secretariat of Social Welfare, Ministry of Justice, Ministry of Justice, Ministry of Labour and Public Defender's Office²⁰.

The comprehensive care is provided by multidisciplinarity, which with their looks and plural knowledge can accommodate the demands of physical, mental and social order of the homeless people²⁰.

However, in another text segment, other professional stresses that teamwork is a challenge:

[...] I still see that the work in the Street Clinic, the teamwork is one of the most difficult to accomplish, I think. Most professionals are formed by the "specialness" (...) many professionals have worked their whole life in places where their practice was given in a solitary way, without much integration with the other members of the team (...) one of the requirements for successful interventions with homeless people is that it is presented an integrated team. (P1).

For teamwork to be made possible, there is a need of an interactive relationship between workers, mediated by the exchange of knowledge and articulation of a "care production field" common to all²¹. In this sense, educational institutions have been based to develop changes in the training process and in the way they relate to society. The modifications to the New Curricular Guidelines still are slow with regard to the training of human resources that transform biomedical paradigm in another faced to the changes required by the new health system and by society²².

CONCLUSION

This research provided the knowledge through basic lexicography, of the most common vocabulary in the report of a typical work week experienced by professionals from a Street Clinic of a town in the southern of Brazil. The word "people" in the sense of us-team, was the most frequent. Thus, the software IRAMUTEQ showed itself as an important tool for this study, since it revealed from the collected material, such vocabulary.

The study pointed out that, in the perception of professionals, teamwork in the Street Clinic is crucial in healthcare among the street population which with its singularities and complexities require an articulated attention between different knowledge, practice and subject, in order to develop interventions that, in any case, relate to all that are on the scene.

The interrelation between these professionals is the basis of the work process, even with the conflicts present in their work routine. It is worth mentioning that the training of health professionals to the Unified Health System should be within a logic based on the integration of knowledge and comprehensive practices.

The IRAMUTEQ software allows insightful look at the collected material, describing the categorization process and, consequently, the results of the study enhancing qualitative research. The number of articles that disclose the use of this software in Brazil in health is still limited, specifically, those that describe the results from the option - word cloud, so this study helps to promote the use of this tool in the analysis of qualitative data.

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