



Health education for women: experience report on mental and gynecological health experiences in a community

Educação em saúde para mulheres: relato de experiência sobre vivências em saúde mental e ginecológica na comunidade



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Abstract

Introduction: Integrated educational interventions are important for addressing topics that remain taboo regarding the physical and mental health of women. **Objective:** To share knowledge and reinforce health-promoting behaviors among women, especially from gynecological and psychiatric perspectives. **Methodology:** This experience report described an educational intervention focused on the mental and gynecological health of women conducted by medical students from the Academic League of Psychiatry and Mental Health in partnership with the Academic League of Gynecology. **Results:** The initial perception of the participants was marked by beliefs and terminology related to women and mental health that were often associated with stigma. **Conclusion:** Combining academic expertise with community participation was effective in promoting health among women.

Keywords: Gynecology; Comprehensive health care; Psychiatry; Health promotion; Health education

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Resumo

Introdução: Abordagens educativas integradas são importantes para esclarecer temáticas que ainda são consideradas tabus na saúde física e mental das mulheres. **Objetivo:** Compartilhar conhecimentos e reforçar comportamentos benéficos à saúde feminina, sob o enfoque ginecológico e psiquiátrico. **Metodologia:** Estudo descritivo, do tipo relato de experiência, sobre a implementação de uma ação educativa em saúde mental e ginecológica da mulher, realizada por acadêmicos de Medicina da Liga Acadêmica de Psiquiatria e Saúde Mental em parceria com a Liga Acadêmica de Ginecologia. **Resultados:** A percepção inicial das participantes foi marcada por crenças e termos da saúde feminina e mental, associados a estigmas. **Considerações finais:** A expertise acadêmica e a participação comunitária mostraram-se eficazes na promoção da saúde feminina.

Palavras-chave: Ginecologia; Assistência integral à saúde; Psiquiatria; Promoção da saúde; Educação em saúde.

INTRODUCTION

Women's health was included in the Brazilian national health policies in the early 20th century. However, it initially focused on pregnancies and childbirth, ignoring other important aspects¹. In 1984, the Brazilian Ministry of Health established the Comprehensive Women's Health Care Program, an important shift as it expanded the care beyond pregnancy and childbirth¹. The program presented an integrated approach, encompassing family planning, obstetric care, chronic diseases, sexually transmitted infections, and breast and gynecological cancers, while also implementing a model of care for mental health using a gender-based approach¹.

Sex or gender is an essential factor for understanding mental health. They influence the prevalence of certain disorders, the manifestation of symptoms, the progression of diseases, and the search for treatment². Gender studies have helped explain two key aspects of mental disorders: the epidemiology and the etiology². For example, depression is two or three times more common in women than in men². This difference may be explained by two theories: hormonal factors or social, cultural, material, and existential factors².

Women face multiple mental and physical health challenges throughout their lives. Some prevalent conditions include premenstrual dysphoria, depression during or after pregnancy, and menopause, mood and anxiety disorders related to infertility or miscarriage³. Women are also more likely to experience eating disorders, generalized anxiety, and post-traumatic stress disorder³.

In this context, academic leagues engaged in teaching, research, and community outreach activities may play a crucial role in promoting women's health, particularly when gynecology and

psychiatry are combined⁴.

Thus, an educational intervention focused on women was conducted through a partnership between the Academic League of Psychiatry and Mental Health and the Academic League of Gynecology, aiming to share experiences and strategies used by medical students during an event held in the city of Olinda (Pernambuco, Brazil).

METHODS

This experience report described the implementation of an educational intervention focused on the mental and gynecological health of women. The activity was conducted by the Academic League of Psychiatry and Mental Health in collaboration with the Academic League of Gynecology.

The activity occurred in a church located in the city of Olinda, Pernambuco, to provide information on gynecological and mental health to the local female population, promote awareness, and clarify topics considered as taboos. The intervention was structured in two main stages. In the first stage, a “myths and facts” exercise was conducted. The medical students presented statements related to specific topics of mental and gynecological health, such as the importance of preventive screenings, emotional impacts of the menstrual cycle, depression, anxiety, and menopause.

Participants were encouraged to discuss and identify which statements they believed were true or false, creating an interactive space to evaluate their prior knowledge. Then, an open discussion circle was held, allowing participants to express their doubts and guide the conversation based on their questions.

The questions included themes, such as intimate hygiene, the relationship between physical diseases and mental disorders, and the effects of stigma surrounding the mental health of women. This experience provided a space for sharing and support, in which participants received clear and accessible information. The students addressed misconceptions and explained the implications of each topic, emphasizing the importance of self-care and seeking qualified medical support.

RESULTS

The “conversation circle” methodology employed in this report provides a more participatory space for the target audience, as it eliminates hierarchy or a single holder of knowledge. Instead, this method uses open dialogue and attentive listening to the experiences lived by participants. This format enables everyone to learn from the stories of one another while promoting autonomy and critical thinking, free from judgment⁵.

During the “myths and facts” activity, the participants showed high levels of interest, active-

ly engaging by sharing personal stories and experiences from their families related to the topics. This involvement revealed that many of their initial perceptions were based on misconceptions, especially regarding depression, bipolar disorder, and other mental health issues. The activity highlighted a lack of understanding of these topics and reinforced the need for awareness-raising interventions.

The conversation circle also highlighted issues in how participants understood and interpreted concepts related to health. Terms, such as “depression”, “bipolarity”, and “sexuality” were often associated with stigmas, reflecting the impact of prejudice and misinformation regarding mental and gynecological health.

This moment of open conversation enabled mutual learning, allowing participants to clarify their doubts and challenge myths, reinforcing an accurate understanding of psychiatric issues. Furthermore, the participatory format helped to create a welcoming environment in which women felt comfortable sharing their experiences and supporting one another. This collaborative aspect contributed to building a support network among the participants, fostering a sense of belonging and trust, which proved essential for their continued engagement in self-care and in seeking reliable health information.

CONCLUSION

Based on these findings, academic leagues may be important for knowledge production and mutual benefit, as students and the community benefit from this extension-based practice. The activity conducted with women from a religious community in the city of Olinda was needed from a holistic health perspective, as it addressed questions about physical health and mental well-being, emphasizing the complexity and harmony of the human body.

Overall, this type of initiative has shown positive outcomes, promoting shared learning, health improvement, the development of communication skills, and in improving the quality of life within the community. This experience highlights the potential of academic leagues to share technical knowledge and to foster a collaborative and empathetic learning environment.

CONFLICT OF INTEREST

Nothing to declare.

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AUTHOR CONTRIBUTIONS

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