Open Minds

Internacional Journal

ISSN 2675-5157 vol. 1, n. 2, 2025

ARTICLE 8

Acceptance date: 29/10/2025

PREVENTION AND PROMOTION OF CHILDREN'S HAIR HEALTH

Enrico Cichetto Bergonso

Alisson Yudi Namihira

Ana Beatriz Borges Baldo

Bárbara Henschel Alves

Bruna Oliveira Boleratzki

Gabriela Lisboa Mantovani

Jaqueline Borges Correa de Almeida

Joao Vitor Nogueira Bezson Fabri

Laura Messias Valim

Maria Laura Rocha Bacon

Santiago Bueno Cardoso

Viviane Angélica de Souza Slobodticov Paulucci

Maria José Caetano Ferreira Damaceno

Pediculosis, commonly known as lice infestation, is one of the most recurrent health problems in Brazilian schools, significantly affecting preschool children and those in the early years of elementary school. Although it is a condition of low clinical severity and does not pose a risk of death, its social, psychological, and educational impacts are wide-ranging, directly affecting the quality of life, school performance, and interpersonal relationships of affected children. It is, therefore, an often neglected disease, but one that takes on great relevance when analyzed from the perspective of public health, health promotion, and the reduction of vulnerabilities in child populations.

Pediculosis is not limited to being a biological condition. Its occurrence is strongly related to social determinants of health, especially in areas marked by economic inequality, limited access to information on personal hygiene, weak public health promotion policies, and poor sanitation conditions. Epidemiological studies indicate that lice infestation is more prevalent in overcrowded school settings, low-income communities, and families facing resource constraints for basic care. In this scenario, pediculosis should be understood not only as a parasitic disease but as an expression of social and cultural inequalities that manifest themselves in children's daily lives.

Historically, the fight against pediculosis has been guided by curative strategies, often centered on the prescription of topical medications and the exclusion of infested children from the school environment. This reductionist view, which sees the problem only as an individual issue, neglects the collective impact of infestation and contributes to the perpetuation of stigma.

Children with lice often suffer discrimination, isolation, and bullying, which aggravates psychological distress and compromises self-esteem. In this sense, the approach to pediculosis requires a broader view that goes beyond clinical treatment, incorporating educational, preventive, and health promotion practices that mobilize schools, families, and communities in an integrated manner.

In the context of Brazilian public policies, the **National Health Promotion Policy (PNPS)** and the **School Health Program (PSE)** reinforce the importance of integration between education and health, recognizing schools as strategic spaces for the formation of healthy habits from the earliest years of life. **The National Common Core Curriculum (BNCC)**, in turn, guides pedagogical work with cross-cutting themes such as health and well-being, promoting responsible attitudes and care for oneself and others from childhood. Thus, the prevention of pediculosis should be inserted in a broader context of health education, where children's protagonism is valued and knowledge is constructed in a participatory manner.

Inspired by this perspective, the extension project developed at the Professor João de Castro Municipal School of Early Childhood and Elementary Education in Assis (SP) represents a concrete experience of articulation between teaching, service, and community. Led by medical students from the Assis Municipal Educational Foundation (FEMA), in partnership with the Family Health Strategy (ESF) and the school team, the project sought to respond to a real demand identified in the territory: the high incidence of pediculosis among students in grades 1 to 5. A total of 145 children aged between 6 and 11 participated, 76 boys and 69 girls. This need emerged from active listening to teachers, school administrators, and health professionals, who identified pediculosis as one of the main difficulties faced in everyday school life.

The starting point for the work was the understanding that pediculosis, despite its apparent simplicity, is a complex problem that involves issues of health, education, and citizenship. To address it, it was not enough to prescribe ready-made solutions: it was necessary to involve children in the learning process, encourage autonomy in body care, promote dialogue between school and family, and create playful, meaningful, and inclusive learning environments. In this sense, the extension practice was consolidated as a pedagogical opportunity for future doctors and as a transformative strategy for the school community.

The theoretical basis of the project was supported by references from collective health and popular health education, especially Freire's ideas of collective construction of knowledge. For Paulo Freire, teaching is not about transferring knowledge, but creating possibilities for the production and construction of knowledge, a concept that dialogues directly with the project's proposal, structured around participatory workshops, role-playing, games, and dynamics, always valuing the children's experience and prior knowledge. Instead of treating students as passive recipients of information, the intervention sought to foster active learning, in which hair care and pediculosis prevention were incorporated in a natural and enjoyable way, while addressing the stigmas historically associated with infestation.

The literature shows that exclusionary practices, such as removing students with lice from the classroom, reinforce prejudices and contribute to the marginalization of children, which is why health education must go beyond the transmission of information, cultivating values of solidarity, respect, and collective care. By discussing the topic openly, creatively, and without judgment, the project helped reduce prejudice and fostered the creation of a more inclusive school environment.

This outreach experience is part of a medical training context guided by the National Curriculum Guidelines, which value early contact with social reality and the integration of teaching, service, and community. By experiencing health education in the school environment, medical students broadened their understanding of the health-disease process, exercised accessible communication skills, and developed interprofessional competencies that are fundamental to their future practice. At the same time, they offered a concrete response to a problem experienced by the community, strengthening the link between the university, school, and health service.

The development of the extension project, which focused on the prevention of pediculosis in the school environment, began with a dialogical and participatory process. Unlike vertical proposals, in which health or education professionals impose predefined themes, the experience developed at the Professor João de Castro Municipal School of Early Childhood and Elementary Education arose from actively listening to the school community and coordinating with the Family Health Strategy (ESF) in the territory. It was in this process of engagement that pediculosis was identified as the most urgent and significant demand for students and teachers.

At a meeting held with the school principal and teachers, several issues related to children's health were raised, including mental health issues in the post-pandemic context, vaccination coverage, school meals, and contagious diseases. However, among all the topics, lice infestation was identified as the most recurring challenge, causing discomfort, embarrassment, and harm to children's learning. Although there were already records of specific campaigns to combat pediculosis conducted by the ESF team, there was still a need for more structured, educational, and continuous action.

Once the central theme had been defined, the planning phase began, involving medical students, teachers, health professionals, and the school's teaching staff. This stage was marked by the collective development of strategies that sought to reconcile scientific rigor with the cultural and social reality of the children. Inspiration came from active teaching methodologies and Freirean pedagogy, which advocates the valorization of popular knowledge and the joint construction of knowledge. The idea was to transform a stigmatized theme into an opportunity for meaningful learning, without reinforcing prejudices or blaming families.

The choice of methodologies favored playful, visual, and participatory resources appropriate for the age group of the students, who ranged from 6 to 11 years old. For example, a "hairy doll" with long, voluminous hair was created and used as a teaching resource to simulate the presence of lice and demonstrate proper hygiene practices. This strategy allowed children to learn in a concrete way how to identify signs of pediculosis, how to use a fine-toothed comb, and how to wash their hair proper-

ly. Role-playing with the doll proved to be highly effective, as it aroused curiosity, engagement, and laughter, transforming learning into an enjoyable experience.

In addition to the doll, enlarged images of lice were used in macroscopic view, which allowed children to visualize the parasite realistically and better understand its life cycle. This step was important to demystify fears and clarify that pediculosis is not related to "lack of hygiene" or "dirtiness," but rather to the ease of transmission in close living environments, such as schools. In this regard, the educational approach played a crucial role in combating stigmas that have historically associated lice with parental neglect or carelessness.

Practical activities included simulating washing the doll's scalp with shampoo and conditioner, using a basin and water to represent the hygiene process. The children participated actively, taking turns to brush the hair, apply the fine-toothed comb, and remove the "lice" made of paper. This sensory experience, which involved touch, sight, and even humor, encouraged the internalization of basic hair hygiene care.

Children's participation was constantly encouraged. Instead of simply listening, students were invited to share their personal experiences with pediculosis. Many reported having had lice at some point, which served as a starting point for discussion groups, in which they discussed symptoms, forms of transmission, and prevention strategies. This space for exchange valued the children's experiences and created a welcoming environment in which learning was built collaboratively.

Family participation was also considered essential. In addition to classroom activities, informational pamphlets were prepared for parents, containing guidelines on preventive measures, identification of signs of infestation, and safe forms of treatment. These materials sought to broaden the scope of the project, encouraging continued care in the home environment. As a symbolic and practical gesture, fine-toothed combs were distributed to students and teachers, reinforcing the importance of collective care.

From an organizational standpoint, the group of students was divided into two subgroups in order to serve different classes simultaneously. Each student assumed specific responsibilities, such as introducing the topic, conducting the activity with the puppet, explaining the images, reporting the children's statements, organizing the materials, and systematizing the evaluation of the activity. This division of tasks fostered teamwork, interprofessional cooperation, and experimentation with different pedagogical roles by future doctors.

The implementation schedule included preliminary planning with the ESF and school teams, meetings for theoretical grounding, the actual activity, and a subsequent evaluation stage. On the day of the intervention, the activities were conducted in the afternoon, beginning at 1:40 p.m. and ending at 3:00 p.m. The warm welcome from the principal and teachers reinforced the intersectoral partnership that supported the project. At the end, in addition to the classroom activities, there was a collective meeting in the courtyard, where impressions were shared, photographs were taken, and a preliminary assessment of the results was carried out.

The evaluation sought to measure not only content assimilation, but also the impact on children's autonomy, critical thinking, and attitudes toward pediculosis

prevention. Simple tools were used, such as post-activity discussion groups, participant observation, spontaneous reports, and written records by students. Among the indicators observed were the children's ability to cite forms of prevention, correctly demonstrate hair hygiene, and report changes in habits of sharing personal items.

The initial results were positive: the children participated enthusiastically, showed themselves capable of recognizing the modes of transmission of pediculosis, and demonstrated interest in applying the care they had learned. There were reports that some had already experienced the problem at home, which generated identification with the topic and reinforced the relevance of the intervention. Teachers and administrators also highlighted the students' engagement and the importance of addressing pediculosis in an educational, rather than punitive, manner.

Alisson Yudi Namihira; Ana Beatriz Borges Baldo; Bárbara Henschel Alves; Bruna Oliveira Boleratzki; Enrico Cichetto Bergonso; Gabriela Lisboa Mantovani; Jaqueline Borges Correa de Almeida; Joao Vitor Nogueira Bezson Fabri; Laura Messias Valim; Maria Laura Rocha Bacon; Santiago Bueno Cardoso; Viviane Angélica de Souza Slobodticov Paulucci.

References:

ALVES, Stênio Nunes; OLIVEIRA, Taciany Roberta de; SOUZA, Géssica Cristina de; SILVA, Adriana Ferreira. Ações de educação e saúde relacionadas à pediculose na educação infantil. Em Extensão, Uberlândia, v. 14, n. 1, p. 126–133, jan./jun. 2015.Disponível em: https://seer.ufu.br/index.php/emextensao/article/view/30464. Acesso em: 20 maio 2025.

ANDRADE, Edinéa da Silva. A pediculose em escolares da rede pública: aspectos epidemiológicos, clínicos e psicossociais. 2006. 92 f. Dissertação (Mestrado em Ciências) – Instituto Oswaldo Cruz, Fundação Oswaldo Cruz, Rio de Janeiro, 2006.

BALDIVIA, Guilherme Cristianini; NETO, Erasmo Assumpção; AGUIAR, Janaina Marques; MORETO, Graziela. Projeto Hospital Ursinho como estratégia educacional para desenvolvimento de habilidades de comunicação durante a formação médica. Archivos en Medicina Familiar, v. 20, n. 2, p. 49–58, 2018.

BORGES-MORONI, R.; JUSTINIANO, S. C. B.; MORONI, F. T. Conhecendo o piolho humano: uma proposta de intervenção lúdica no contexto das metodologias ativas de ensino para estudantes do ensino fundamental. Revista Estudos Aplicados em Educação, v. 6, n. 11, p. 317-328, 2021. DOI: https://doi.org/10.13037/reae.vol6n1.7508.

BORGES-MORONI, R. M. et al. Infecção por piolhos em escolares: aspectos clínicos e epidemiológicos. Revista Brasileira de Medicina, v. 63, n. 6, p. 313-317, 2021.

BRASIL. Base Nacional Comum Curricular (BNCC). Brasília: MEC, 2018.

BRASIL. Ministério da Saúde. Caderno de Atenção Básica: Saúde na Escola. Brasília: MS, 2021.

FREIRE, Paulo. Pedagogia da autonomia: saberes necessários à prática educativa. São Paulo: Paz e Terra, 1996.

MALTA, D. C. et al. Bullying entre adolescentes brasileiros: evidências das Pesquisas Nacionais de Saúde do Escolar, Brasil, 2015 e 2019. Revista Latino-Americana de Enfermagem, v. 30, supl. esp., e3679, 2022. Disponível em: https://www.scielo.br/j/rlae/a/4JGXvg5rJcjcZkv6PqYR8gM/. Acesso em: 20 maio 2025.

MARCONDES, Edson. Pediatria básica. 12. ed. São Paulo: Sarvier, 2021.

MARINHO, M. T.; ROSAS, M. A.; CORREIA, R. L.; GONTIJO, D. T. Inter-relações entre envolvimento ocupacional e percepção de saúde na perspectiva de adolescentes. Cadernos Brasileiros de Terapia Ocupacional, v. 32, e3684, 2024. DOI: https://doi.org/10.1590/2526-8910.ctoAO283136841.

MARTINS, M. M. F. et al. Ações intersetoriais e o reconhecimento de uma fonte de cuidado da atenção primária por adolescentes brasileiros. Cadernos de Saúde Pública, v. 40, n. 10, e00195923, 2024. DOI:https://doi.org/10.1590/0102-311XPT195923.

OLIVEIRA, F. A. de et al. The child's view of the territory: perspectives for child development. Cogitare Enfermagem, v. 29, 2024. DOI: https://doi.org/10.1590/ce.v29i0.95825.

ORIANI, Angélica Pall. Higiene para as escolas primárias: a produção escrita de Antonio Ferreira de Almeida Júnior (1922-1939). Educação & Pesquisa, São Paulo, v. 48, e238999, 2022. DOI: https://doi.org/10.1590/S1678-4634202248238999.

PIERI, A. S. Higiene e saúde na escola. Revista de Formação e Prática Docente, n. 3, p. 44-53, 2020. Teresópolis: Editora UNIFESO.

SBP – SOCIEDADE BRASILEIRA DE PEDIATRIA. Manual de orientação: higiene na infância. São Paulo: SBP, 2021.

SILVA, K. L.; SENA, R. R.; BELGA, S. M. A. Educação em saúde nas escolas promotoras de saúde em Portugal. In: OLIVEIRA, D. C.; SÁ, C. P. (org.). Literacia em saúde: desafios contemporâneos. Rio de Janeiro: Editora Fiocruz, 2022. p.551–565. Disponível em: https://books.scielo.org/id/jnj37/pdf/silva-9786586545722-32.pdf. Acesso em: 20 maio 2025.

SILVEIRA, João Luiz Gurgel Calvet da; KREMER, Maira Marina; SILVEIRA, Maria Elisa Ugarte Calvet da; SCHNEIDER, Ana Célia Teixeira de Carvalho. Percepções da integração ensino-serviço-comunidade: contribuições para a formação e o cuidado integral em saúde. Interface (Botucatu), v. 24, p. e190499, 2020. Disponível em: https://doi.org/10.1590/Interface.190499. Acesso em: 20 maio 2025.