

Year V, v.2 2025 | Submission: 11/17/2025 | Accepted: 11/19/2025 | Publication: 11/21/2025 Cultivating the field of Interprofessional Education and Training in *Health* 

**Rosimeire Angela de Queiroz Soares -** Specialist in Health Education from the 1st class of CEES-CEDEM-FMUSP, Professor at FCMSCSP. PhD in Sciences from EEUSP, Nurse specializing in Cardiology Nursing at Incor-HCFMUSP. (advisor, professor at FCMSCSP)

Maria Clara dos Santos Adriele Neves Sena Rafaela Queiroz Carvalho Soares

#### **SUMMARY**

The text discusses the contemporary challenges faced by healthcare systems and the urgent need to reform professional training models so that workers are prepared to respond to the increasingly complex demands of society. Traditional training, marked by fragmentation and the isolated development of specific skills, has produced professional silos that hinder teamwork and compromise the quality of care. In this context, international documents from the WHO and PAHO, along with the Sustainable Development Goals, reinforce the importance of strengthening collaborative practices and investing in the preparation of professionals capable of working in an integrated manner. Interprofessional Education (IPE) emerges as a fundamental strategy to overcome the historical incoherence of separately training professionals who will necessarily work together. By promoting shared learning from undergraduate studies onwards, IPE contributes to the development of collaborative skills, the reduction of rework, increased patient safety, and the optimization of healthcare resources. From its first initiatives in the United Kingdom in the 1960s to the WHO's theoretical framework published in 2010, Interprofessional Education (IPE) has established itself as a structuring axis for the reorientation of curricula and the strengthening of interprofessional practice. The National Curriculum Guidelines also point to this need by stipulating that health training should prepare professionals for teamwork. Thus, Interprofessional Education is configured as an indispensable path to improve the quality of care, align services with the needs of the population, and promote more integrated, effective, and safe practices.

**Keywords:** Interprofessional Education; Health Training; Collaborative Work; Interprofessional Practice; Health Systems.

#### **ABSTRACT**

The text discusses the contemporary challenges faced by health systems and the urgent need to reform professional training models so that workers are prepared to meet the increasingly complex demands of society. Traditional training, marked by fragmentation and the isolated development of specific competencies, has produced professional silos that hinder teamwork and compromise the quality of care. In this context, international documents from the WHO and PAHO, together with the Sustainable Development Goals, reinforce the importance of strengthening collaborative practices and investing in the preparation of professionals capable of working in an integrated manner.

Interprofessional Education (IPE) emerges as a fundamental strategy to overcome the historical inconsistency of training separate professionals who will necessarily work together. By promoting shared learning from the undergraduate level, IPE contributes to the development of collaborative competencies, reduces rework, increases patient safety, and optimizes health system resources. From its early initiatives in the United Kingdom in the 1960s to the theoretical framework published by the WHO in 2010, IPE has been consolidated as a structuring axis for reorienting curricula and strengthening interprofessional practice. The National Curriculum Guidelines also highlight this need by emphasizing that health education should prepare professionals for teamwork. Thus, Interprofessional Education stands out as an essential pathway to improve the quality of care, align

Machine Translated by Google fic Journal The Knowledge. ISSN: 2675-9128. São Paulo-SP.

Year V, v.2 2025 | Submission: 11/17/2025 | Accepted: 11/19/2025 | Publication: 11/21/2025

services with population needs, and promote more integrated, effective, and safe practices.

**Keywords:** Interprofessional Education; Health Training; Collaborative Work; Interprofessional Practice; Health Systems.

#### INTRODUCTION

The current global scenario presents several challenges for healthcare, highlighting the...

The need for adjustments so that health services and professionals are able to meet these needs. demands.

Nevertheless, a reform of the training process is necessary.

A healthcare professional, focused on strengthening healthcare systems, faces significant challenges. In this new century, faced with the urgency of addressing the complex and dynamic needs of society, such This movement needs to be accompanied by a solid process of reorienting the training model. suitable for teamwork (PAHO, 2017).

Corroborating this, the global goals for sustainable development written in 2015 have

The third objective is the priority goal of promoting the health and well-being of the population. To achieve this...

To achieve this goal, it is imperative to invest in training professionals for the job.

collaborative (Mendes, Kroner, 2016).

Starting from the need to train healthcare professionals who are more capable of collaboration and with The skills needed to effectively perform teamwork are what Interprofessional Education (IPE)

It is beginning to be valued and encouraged in various services (Baar, 2015).

The first initiatives in this area took place in the United Kingdom in the 1960s and later with a group of experts from the World Health Organization (WHO), at the beginning from the 1980s with the launch of the program: "Learning together to work together", having as The objective is to empower professionals to work in teams, from a collaborative perspective (PAHO). 2017).

In 2010, the World Health Organization (WHO, 2010) proposed a global agenda of health, guided by the "Theoretical Framework for Interprofessional Education and Collaborative Practice" Disseminating the principles of EIP and providing highly relevant information for its strengthening. the topic through recommendations in the training policies for new health professionals. worldwide.

The initial efforts were spurred to consider ways to address a major problem. Inconsistency: professionals who necessarily needed to work together were being trained. in a fragmented way, that is, separately (Peduzzi, 2013).

The trend in training professionals, with an emphasis on skills development.

In particular, it has managed, throughout history, to legitimize what literature defines as silos. professionalism or tribalism of professions (Frenk et al., 2010).

Machine Translated by Google fic Journal The Knowledge. ISSN: 2675-9128. São Paulo-SP.

### Year V, v.2 2025 | Submission: 11/17/2025 | Accepted: 11/19/2025 | Publication: 11/21/2025

This training process is characterized by highly fragmented health practices.

with the user being exposed to repetitive actions, and due to the intense rework performed by healthcare professionals, leading to work overload, dissatisfaction among professionals and users, compromising the patient safety, in addition to increasing healthcare costs (Frenk et al., 2010).

Within this paradox, it was observed that the much-sought-after collaborative practice would need to be...

It began by addressing the core issue, which was precisely the fragmented and individualized nature of the training.

of professions focused on a single objective: assisting human beings.

In an attempt to effectively respond to these challenges, the concept of EIP, based on training students capable of learning and working collaboratively, with one of the pillars in conducting professional training, contributing to patient safety and optimization of resources in health (WHO, 2010).

Thus, interprofessional education (IPE) and interprofessional practice are current topics in the field of health. recognized for enhancing the effectiveness of health actions in the face of ever-increasing demands. complex population dynamics on a global scale and various initiatives based on collaborative work. (WHO, 2010; Frenck at al, 2010).

As advocated in the various National Curriculum Guidelines (DCNs) for the professions of health, also constitutes one of the main strategies for training professionals capable of Teamwork. First, it is necessary to understand what type of education we are dealing with. speaking and in what professional context (Batista et al., 2018).

Therefore, let's first get to know the terrain where we are (or intend to be). to walk...

## Understanding the soil in EIP: what kind of education are we talking about?

The Interprofessional Education Collaborative Expert Panels (IPEC) defined IPE as a a learning process based on interdisciplinary education and collaborative work with the community, in order to serve children, families and communities, offering skills in collaboration with other professionals (IPEC, 2002).

According to the WHO, interprofessional education (IPE) occurs "when two or more professions learn about each other." with others and among themselves for effective collaboration and improvement of health outcomes" (WHO, 2010, p.7).

To consider this type of education as a training strategy in health, the most... current proposal by Reeves et al (2013, p.2):

"Interprofessional education (IPE) is defined as an intervention in which..." members of more than one health or social care profession, or both



They learn interactively together, with the explicit purpose of improving... interprofessional collaboration or the health/well-being of patients/clients or both.

In this sense, EIP requires planned strategies so that members (be they) students (professionals) from more than two professions learn together, interactively, with the deliberate objective of improving interprofessional collaboration or the health-well-being of users.

Based on this concept, EIP should not be an option, but an emerging condition for to develop practices aimed at training professionals capable of working in teams and responding to meet the demands of society.

Nevertheless, it is considered an educational strategy to develop the practice. collaborative, continuously incorporated into training programs for health professionals, aiming to to prepare the student for teamwork, in collaboration with different professions (Agrelli, Silva, Peduzzi, 2016; Batista et al, 2018).

The guidelines from the World Federation for Medical Education (2015) indicate that among the The fundamentals of medical (health) education include the integration of theories and practices. medicine, biomedical, behavioral and social sciences, combined with communication skills and interprofessional collaboration.

Barr (1998) cites three domains of necessary competencies that should be considered for To train students to work interprofessionally:

- •Specific: These are knowledge, skills, and attitudes considered basic, fundamental requirements for professionals in each area, and learned through specialized education.
- Common (constitutes a set of skills common to all professions or that broaden their scope of action and
  may create overlaps between different areas, such as notions of asepsis and antisepsis) that are also
  common among the different areas of health.
   Collaborative: represented by the set of
  knowledge, skills and attitudes that will allow involvement between different areas, enabling patientcentered care.

Studies have proven that the use of collaborative learning methodologies, which
They promote integration and socialization among students from different courses, enabling these students
They would learn about the specific skills of each profession, allowing them to get to know each other.
with its specificities and potential and the development of collaborative skills, in
in favor of patient care, and training for collaborative practice (IPEC, 2016, Lima, Antunes,
Lemos (2019).

Thus, collaborative skills have been identified as essential for...
interprofessional learning, and that this learning should be based on experiences.
collaborative approaches that enable integration between other competencies (common and specific)
(IPEC, 2016).



As we can see, the evidence points to fertile ground, but there are still...

There is a lot to be done.

# Where to begin... preparing the land

Before planting begins, the soil needs special preparation: the earth

The chosen variety must be suitable for the type of plant you wish to grow. Then it will go through...

A process as painful as it is transformative. It will be necessary to plow, to make small furrows so that only then receive the fertilizer that will strengthen it and make it ready for planting.

For EIP to be implemented, a preparation period is essential and planning.

The development of EIP requires a collaborative process, based on three levels of support that is fundamental: micro (involves the articulation and relationship between students, teachers and professionals); meso (relationship and articulation between educational and health institutions) and macro (systems (political, socioeconomic and cultural). The importance of these initiatives being highlighted is emphasized. documented and shared (D'amour, Oandasan, 2005).

Since any transformation process can also be challenging, planning is essential. curriculum from this perspective, with the necessary engagement of all involved: teachers, students, institutions (educational and health), political bodies and the community.

In this sense, the creation of learning spaces is configured as capable of...

To foster integration between curricula, students, and professionals from different areas, activities of Practical training and outreach, as well as faculty development, can contribute to the education of students and Professional development, to foster collaborative practice, is the core of the work. interprofessional. (D'amour, Oandasan, 2005).

Even though the community does not always actively participate in this process, it should be protagonist, and it is important to consider their health needs, since the work Interprofessional practice advocates for patient-centered practice (Freire et al., 2019).

Thus, after preparing the ground, collaborative skills become the main focus. an ingredient to make EIP germinate in this arid, yet fertile ground of health education.

Canada pioneered the dissemination of its EIP experience and collaborative practices, with the publication of the report that served as a benchmark and training tool in healthcare competencies. collaborative. This document provided evidence on the skills needed for training. of health professionals in this perspective (IPEC, 2010).

Produced by a consensus of experts from different areas of health, this report

It describes collaborative competencies in six domains: interprofessional communication, attention



Year V, v.2 2025 | Submission: 11/17/2025 | Accepted: 11/19/2025 | Publication: 11/21/2025 patient-centered, role clarification, team dynamics, leadership collaborative and interprofessional conflict resolution (IPEC, 2010).

More recently, it was reviewed by a group of American experts.

Interprofessional Education Collaborative Expert Panels (IPEC, 2016). This group analyzed the set based on the skills acquired in their different areas and classified them as competencies. collaborative in four domains: ethical values for interprofessional practice, classification of Roles and responsibilities, interprofessional communication, team and teamwork.

In the context of practice, concern for the teaching-learning process requires a perspective. paying attention to how the training process takes place in order to devise strategies that promote the training of health professionals capable of working in an interprofessional manner.

Ceccim (2018) points out that the production of knowledge occurs through interactions with other professionals and involves unique collaborative attitudes and skills, requiring a new way to rethink the teaching-learning process, with teamwork being an essential practice for comprehensive care.

While Peduzzi (2018) suggests the incipient state of national studies on the subject,

On the other hand, there are WHO reports and manuals that make it possible to understand the theoretical assumptions and

Practical guidelines for implementing IPE in training initiatives for students and healthcare professionals.

(WHO, 2010; PAHO, 2017).

Several strategies have been studied to stimulate learning and contribute to... training of health professionals and teamwork, based on experience and in developing skills in reflection, communication, and teamwork in a way interprofessional (Macías et al., 2020).

In practice, interprofessional training is a complex process that involves engagement. of teachers, willing to face various challenges.

Frenk et al. (2010) cite the following as the main obstacles: skills that are incongruent with the needs of the population, incipient training for teamwork, unequal relationships between health workers (gender, social), valuing learning focused on acquiring technical skills, prioritizing a hospital-centric model over primary care, fragmented work, quantitative and qualitative imbalances in the professional labor market, Leaders with limited ability to propose and improve service performance.

These challenges largely relate to the education of students based on a curriculum. fragmented, which further accentuates the fragmentation of labor, favoring the formation of silos. professionals (Peduzzi et al., 2013).



# Year V, v.2 2025 | Submission: 11/17/2025 | Accepted: 11/19/2025 | Publication: 11/21/2025 | Sowing the good seeds: Inspiring practices in EIP in Brazil

Although recently implemented and in its early stages, interprofessional education (IPE) in healthcare has been gaining prominence. in the Brazilian context, since it contributes to the training and qualification of students and professionals. from the most diverse areas, contributing to improving the quality of health care in the SUS (Peduzzi) et al., 2013).

In Brazil, programs such as Pró Saúde I and II, due to their educational focus, and the PET- program...

Health professionals have proven innovative in promoting curricular changes in various courses.

(medicine, nursing and dentistry). In addition, curricular reforms are mentioned; advances in

Integration between academia, health services, and the community; adoption of active learning methodologies.

learning and diversification of practice settings, which includes primary care as one of its components.

more productive fields (PAHO, 2017).

In this sense, the need to implement strategies that guarantee the is highlighted.

ensure the continuation of these initiatives so that they can overcome the numerous related challenges.

In relation to health education, the efforts in this endeavor are justified in the pursuit of achieving transformations.

Real-world examples in professional work relationships, adapted to the context of educational and healthcare institutions.

capable of effectively responding to the demands of society (Silva et al, 2015; Macías et al, 2020).

In the national context, the Education through Work Program (PET) is cited, which focuses on...

Primary education has been highlighted as an innovative educational practice that makes it possible to raise awareness among involved in a patient-centered care project. Enabling shared learning, highlighting effective results as spaces for education.

interprofessional, based on the intertwining of different professions (Batista et al, 2015).

Furthermore, these programs propose a break with fragmented and individual knowledge. encouraging the promotion of knowledge built during the learning process, stimulating Continuous learning based on critical analysis of reality, constituting a space for research. and the construction of interdisciplinary and interprofessional knowledge (Batista et al, 2015).

The importance of learning scenarios, capable of fostering the Integration between curricula, students, and professionals from different areas; carrying out activities of practical and extension programs; and teacher training that can contribute to the education of students and Professional development, to foster collaborative practice: the core of the work. interprofessional. (D'amour D, Oandasan, 2005; Agrelli, Peduzzi, Silva (2016).

More recently in Brazil, initiatives based on articulated EIP predominate. primarily in primary care. These are innovative initiatives in teaching processes, carried out through the creation of shared learning spaces, capable of strengthening the Interprofessional education, made possible through curricular changes in courses.



undergraduate and postgraduate programs from higher education institutions across the country are based on the integration of academia and service. community (Barr, 2015).

Although studies and publications on EIP in Brazil are incipient (Peduzzi, 2016),

There are currently internationally validated documents that point to the assumptions.

Theoretical and practical aspects for implementing EIP in student and professional training initiatives. of health (WHO, 2010; PAHO, 2017).

In accordance with the methodological rigor required by EIP, in 2017, in light of the recommendations...

According to PAHO, the Ministry of Health has included EIP actions in its strategies to strengthen the policy.

professional training in health (Brazil, 2017).

The national EIP plan was developed through joint actions with the Ministry of Education (MEC), Higher Education Institutions and the Brazilian Network for Interprofessional Education and Work in Health (ReBETIS). This planning was carried out based on a survey of the main initiatives. ongoing educational programs in the country with potential for applying the theoretical assumptions and Methodological aspects of EIP, focusing on: teaching (training faculty), EIP strategies. (develop and improve IPE initiatives); research (increase knowledge in IPE) and education permanent (to empower professionals for interprofessional work). (Brazil, 2017).

# Fortalecimento da EIP como dispositivo para a reorientação da graduação em saúde Levantamento das iniciativas de EIP no Brasil Desenvolvimento docente para a EIP Fortalecimento dos espaços de divulgação e produção do conhecimento em EIP EIP nos espaços de Educação Permanente em Saúde

Linhas de Ação PLANO EIP - BRASIL

Source: Brazil. Ministry of Health. Final Report of the Conceptual Alignment Workshop on Education and Interprofessional Work in Health. Brasília, DF: Ministry of Health; 2017. of the SUS (Brazilian Unified Health System).

The WHO (2010, p.36) in its report warns health professionals that in the face of the current

Demand for healthcare attention: "Being a professional is no longer enough. In the current global context, the professional

"Healthcare also needs to be interprofessional."

In this sense, many work and coping strategies with Covid strengthened the Teamwork and a sense of collaboration between different professions were key objectives. primary focus: patient-centered care (Barbosa et al., 2020; Caneppele et al., 2020).

In the current health context, the care provided has highlighted the power of the work in teamwork in addressing the pandemic, to the detriment of highly fragmented work where Professional niches and classes prevailed.



While at first glance the landscape of EIP may seem barren and challenging, successful initiatives around the world exist.

All of this points to fertile and fruitful ground, ready to receive the good seeds of collaborative practice. envisioning the flourishing of a new breed of professionals who "learn together and from each other." yes, "with a focus on addressing the current health needs of human beings and society (Reeves et al,

2013, p.2). This is the essence of EIP!

#### References

BARBOSA, LAS et al. *Interprofessional collaboration project in a pandemic: reflections of professionals from the Unified Health System (SUS) on teamwork.* RSD, 9(10): e2739108476, 2020. Available at: https://www.rsdjournal.org/index.php/rsd/article/view/8476.

Accessed on: July 18, 2021.

BARR, H. Competent to collaborate: towards a competency-based model for interprofessional education. Journal of Interprofessional Care, vol. 12, no. 2, p. 181-187, 1998.

BARR, H. *Interprofessional education: the genesis of a global movement.* United Kingdom: Center for the Advancement of Interprofessional Care, 2015.

BECKER, HS et al. *Boys in white: student culture in medical school.* New Brunswick: Transaction Publishers, 2009. Accessed on: 21 Feb. 2018.

CANEPELLE, AH et al. *Interprofessional collaboration in emergency and urgent care teams during the Covid-19 pandemic.* Escola Anna Nery, v. 24, spe, e20200312, 2020. Available at: https://doi.org/10.1590/2177-9465-EAN-2020-0312. Accessed on: August 18, 2021.

COSTA, MV; PATRÍCIO, KP; CÂMARA, AMCS et al. *Pró-Saúde and PET-Saúde as spaces for interprofessional education*. Interface, 19(suppl. 1): 709-720, 2015.

D'AMOUR, D.; OANDASAN, I. *Interprofessionality as the field of interprofessional practice and interprofessional education: an emerging concept.* Journal of Interprofessional Care, vol. 19, suppl. 1, p. 8-20, 2005.

FREIRE, JR et al. *Interprofessional education in policies for reorienting professional health training in Brazil.* Saúde em Debate, v. 43, n. spe1, p. 86-96, 2019. Available at: https://doi.org/10.1590/0103-11042019S107. Accessed on: August 12, 2021.

FRENK, J. et al. *Health professionals for a new century: transforming education to strengthen health systems in an interdependent world.* The Lancet, vol. 376, no. 9756, p. 1923-1958, 2010. Available at: https://www.thelancet.com/action/showPdf?pii=S0140-6736%2810%2961854-5. Accessed on: February 21, 2018.

KORNER, M. et al. *Interprofessional teamwork and team interventions in chronic care: a systematic review.* Journal of Interprofessional Care, 30(1): 15-28, 2016.



MACÍAS, IL et al. *Training in interprofessional education in nursing and medical students globally: scoping review.* Research and Education in Nursing, 38(2): e06, 2020. DOI: https://doi.org/10.17533/udea.iee.v38n2e06.

MATUDA, CG; AGUIAR, DML; FRAZÃO, P. *Interprofessional cooperation and the Health Reform in Brazil: implications for the health care model.* Health and Society, 22(1): 173-186, 2013.

MENDES, EV. Health care networks. Ciência & Saúde Coletiva, 15(5): 2297-2305, 2010.

WORLD HEALTH ORGANIZATION. Framework for action on interprofessional education and collaborative practice.

Geneva: WHO, 2010.

PAN AMERICAN HEALTH ORGANIZATION. *Interprofessional education in health care: improving human resource capacity to achieve universal health. Report of the meeting (Bogota, Colombia, 7-9 December 2016).* Washington, DC: PAHO. 2017.

PEDUZZI, M. The SUS is interprofessional. Interface (Botucatu), 20(56): 199-201, 2016.

REEVES, S. et al. *Interprofessional education:* effects on professional practice and healthcare outcomes (update). Cochrane Database of Systematic Reviews, 28(3): CD002213, 2013.

REEVES, S. Developing and delivering practice-based interprofessional education. Berlin: Verlag Dr. Müller, 2008.

REEVES, S. Why we need interprofessional education for effective and safe care. Interface (Botucatu), 20(56): 185-197, 2016.

SANT'ANNA, L.; DIAS, H.; LIMA, TM. The trajectory of the national policy for reorienting professional health training in the SUS. Ciência & Saúde Coletiva, p. 1613-1624, 2013.

SHRADER, S. et al. *Interprofessional education and practice guide no. 7: development, implementation, and evaluation of a large-scale required interprofessional education foundational program.* Journal of Interprofessional Care, 30(5): 615-619, 2016.

SILVA, JAM; PEDUZZI, M.; ORCHARD, C. et al. *Interprofessional education and collaborative practice in Primary Health Care.* Revista da Escola de Enfermagem da USP, 49(suppl. 2): 16-24, 2015.

SILVA, RP; BARCELOS, AC; HIRANO, BQL et al. *The experience of PET-Saúde students with indigenous health and the Mais Médicos Program.* Interface (Botucatu), 19(suppl. 1): 1005-1014, 2015 / 2019.