

206 - EDUCATION AREA AND POSSIBILITY OF PHYSIOTHERAPIST ACTION

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INTRODUCTION

The ontogeny of human describes the origin and development of an organism from the fertilized egg to its adult form. This is built by integration of body and brain, motor and psyche (FONSECA, 2004).

It is necessary to observe, study together physical changes that occur in body structures with aspects of development such as cognition, speech and language, emotional and social changes, posture and movement.

Each child has its characteristic pattern of development, since their characteristics are influenced by a constant chain of transactions that pass between the child and its environment (BURNS and MACDONALD, 1999).

The first two years of life is a time when dramatic changes occur in the growth and development of the child (BURNS and MACDONALD, 1999). At this stage the child reacts to tactile sensations, taste, smell and sound to the movements and the visual images.

During this period the progress of normal psychomotor development (DNPM) tend to conform to an ordered sequence, a fact which allows an estimate according to age, because there are characteristics that allow an assessment which determines the normal development (BURNS and MACDONALD, 1999).

The education of children aged 0 to 6 years, according to Figueiredo (2002), plays an important social role, from the time that mothers needed to work outside the home. However, the nursery can not be regarded as surrogate mother, which would result in a confusion of roles on the basis of early childhood education. First, it causes, according to the author, a devaluation of the professionals who work at this level of education, considering that these teachers do not have a solid theoretical and practical training is sufficient to know adequately care for the physical well-being of children, avoiding dirt, disease or mess.

Physiotherapy can contribute in this way, not only in terms of ergonomic and vertical as it is today, but also in the focus of continuing education for educators. They need, above all, have a great view of this path and know the DNPMN. The physiotherapist has skills to answer questions about the DNPM normal and to exchange experiences with educators so that they can perform various activities in the classroom. This assertion is based on the assumption that states that only knowing the individual and his condition is possible an effective and permanent action. But always remembering that there is no one who knows and one who does not know, but they know two different things (BRICEÑO-LEON, 1996).

The importance of this research investigative also implies the possible contribution of physical therapy educators and the integration of physical therapy in promoting health through continuing education.

MATERIALS AND METHODS

Field research of a theoretical and practical and analyze their data exploitative character, quantitatively and qualitatively.

This study was submitted to the Committee Ethics in Research (CEP), University of Vale do Itajaí (UNIVALI), obtaining assent to its implementation, the advice no. 464/2007.

The field study consisted of the Childhood Education Center Pioneiros, in the city of Balneário Camboriú, Santa Catarina, about 4 years old. This institution currently serves 176 children, aged zero to six months.

Choosing this daycare occurred due to the high number of professionals have no training in education (although at the present time, most professionals are studying) and are considered educators, as well as the configuration of that institution, having large numbers of children as previously shown in the above description.

This research range the areas of Physical Therapy in Pediatrics and Preventive emphasizing the knowledge of educators in relation to child DNPM normal institutionalized children in the Childhood Education Center Pioneiro of Balneário Camboriú - SC.

The twenty-nine educators who work with children aged zero to six years in the institution, twenty-three agreed to participate by expressing their agreement by signing the Consent Form. Furthermore, the exclusion criteria were: teachers who did not accept and sign the FICT who were absent during the study. Six educators were excluded because of Holiday.

The first stage of the research was the creation of a link between physical therapists and educators.

The second step was data collection, held from April to May 2008. As the procedure used was elected the application of semi-structured individual, using a previously elaborated with open questions, allowing greater freedom of response from the respondents, while not imposing a strict order of questions (LUDKE and ANDREW, 1986).

Each question which delineates the object so that the conversation be directed to form and content, to expand communication and does not cut it (MINAYO, 2002).

Crepaldi (2000) states that "interviews" with open questions get more precise information from the questionnaires with closed questions.

The data were analyzed using the qualitative approach, using content analysis. They were followed fully the steps used by Minayo (2002) in his research, which was based on Bardin (1979).

RESULTS AND DISCUSSION

Was performed first, the research profile of educators in age, sex and educational level. And in order to preserve the anonymity of the sample was defined for each teacher a flower name that would identify the study.

Regarding the profile of educators in terms of age, the study revealed that the age group of educators vary from 23 to 59 years. The abandonment of other careers for such persons to devote themselves to teaching this age implies generally authentic and mature in vocational choice, coupled with the belief that they can effectively exercise their new tasks. (SISTO et al., 2000).

Also met the profile that all teachers are female. This finding is in agreement with the statistics in this area, because 94% of workers who work in teaching, in Brazil, are women (CAMPOS, 1991).

The level of education, two respondents did not have higher education, both students at the teaching: eleven teachers were already formed and the ten other educators were doing graduation in Pedagogy.

Although no comprehensive information on the professionals who work directly with children in nursery and infant schools in the country, several studies have shown that many of these professionals still do not have appropriate training (MEC, 2001).

Regarding working time in kindergarten, the majority of educators have been working for over five years with early childhood education.

The study by Oliveira and colleagues (2003) assessed 850 teachers and found they were at work in long day care: 81%

worked between 11 and 20 years, 15.7% were older than 20 years of service and only 2.3 % worked less than 10 years in the area.

According to this study, the majority of educators do not have more than four years of work in the nursery today. Only two exceed the working time of five years. Verissimo and Fonseca (2003) in his study of the second child care child care workers showed that working hours in day care centers in the study ranged from 2 to 10 years, and only two were less than 4 years and the other (7) above 5 years of ties.

When investigating the career path of former educators, the most common responses were that: worked in shops with sales, they were only servants or were students.

The age ranges of children and the corresponding class with which educators operate, it was observed that five teachers working with the nursery, ten work with kindergarten and five with the garden. But add to these numbers, two educators who work with the other three classes and working with the nursery and garden relay.

It was noticed an expression of dissatisfaction three educators related to the age group of children, over which plays a part in the nursery today, as reported below:

«(...) I do not like much of this age group because I always work with 4 to 5 years, so it got used and still want to change "(Acacia).

The ergonomic study carried out in a group of educators showed: a dissatisfaction with work in more than one school, work overload and too many students (GASPERINI, 2005).

Upon investigation on the role of teachers in kindergarten, 16 teachers reported that their function is to monitor, and six reported that their function is as a teacher. If the nursery school, there is still a small fraction of professionals considered lay, day care is still a significant number of professionals with no formal education whose minimum denomination is varied: nursery workers, child development assistant, nanny, page, monitor, recreation, etc. (MEC, 2001).

In questioning why the professional choice in education, eleven teachers report that they have chosen the profession because they like to teach, eight responded by having high affinity with children and the other five said they chose the area of education by encouraging others.

The relation of choice of profession as an educator taking into account the maternal experience or the fact that like children was also evident in the studies of Oliveira et al, (2003); Vitta and Emmel, (2004) and Kishimoto, (1997).

The issue of physical space of the nursery is a constant for these teachers, as well as the number of employees disproportionately to the number of children. As will be seen then they indicate a lack of space as something that influences the performance of his work:

"Depending on where you work you feel the need for space (...)" (Jasmine).

According to Santos (2006) children, when encouraged and allowed to free environments, large, pretty place to progress in their motor skills during this period in the nursery.

When questioned about what activities the educators offer the children, there were various categories of activities, which are basically painting on paper, reading, playing and hygiene. Six educators choose to paint on paper, two for toys, varied activities for seven, five children's stories and activities for two with music.

Brodin and Rivera (1999) present the play as an opportunity to stimulate child development, facilitating the emotional bonds between children and their caregivers (parents and educators, for example) and also as a means for learning to occur. Was also investigated, the design of educators and the normal psychomotor development (DNPMN). Fifteen teachers reported knowing the DNPMN and eight of them reported not knowing. The participants showed a superficial knowledge on this subject relating motor skills, but there is a need to deepen this knowledge. The phrase "more or less" was seen in a few lines:

"More or less, I do not understand very well. I understand the basics that is their age, which is to walk, crawl, feed "(Begonia).

«More or less I know, you know, that with so many months she has to crawl and such" (Poppy).

From these reports, it is observed that the teachers have no training to deal with the issue of developing babies, although most of them have a background in teaching or in education, psychology or even higher in the normal course.

In agreement, Vitta (2000) searching for a doctoral thesis on the issue of including children in nurseries, also noticed the lack of knowledge about child development and the fact that teachers commit their activities to personal experiences.

In every age the movement takes significant features and the acquisition or appearance of certain motor behaviors has important implications in the development of the child. Each purchase influence in the former, both in mental and motor, through experience and exchange with the environment (FONSECA, 1988).

The educator must be sensitive to see the style and pace of learning of each child, as they occupy the physical space, they are encouraged to examine, explore and construct meanings (MAIONE and TOMÁS, 2005).

The interest of educators to improve the educational area, seven reported no wish to improve, seven reported that they intend to improve in the area of early childhood education, three in Psychology and six in Special Education.

Training is a key factor for the teacher. Not only the university undergraduate or graduate school, but the ongoing training, broad, updates and improvements (SANTOS, 2006).

The institution shall provide for all professionals involved in moments of formation of various kinds such as meetings, lectures, visits, updates through films, videos, etc. (MEC, 2008).

The proposed inclusive education must be understood as a value, whose implementation is done for the restructuring of schools at all levels (Early Childhood Education Higher Education), so that they can meet the special needs of all students in the regular education (MRECH, [nd]). The school we're stuck in positivist values, which has the consistency, standardization, classification, labeling, comparison, selection and, consequently, the exclusion (FIGUEIREDO, 2002).

The specific qualifications to work in the range of zero to six years includes the knowledge of the scientific bases of child development, production of learning and the ability to reflect on practice, so that it becomes increasingly a source of new knowledge skills and education of children. In addition to prior academic background, it requires continuing education, the work included teaching, nursing him and constantly renewing it (MEC, 2001).

The inclusion of students with cognitive impairment in a mainstream school would be guaranteed the right of everyone to education. Living with difference is to form a citizen differently than it has today, with many prejudices. Believe in the possibility of inclusion requires different positions, a curriculum and a school for the development of the competence of the student, not for cognitive training. An inclusive school is one that will also facilitate the experience and experience with other children, that they understand in themselves, how to be social (HOLANDA, 2003).

REFLECTION ON THE IMPORTANCE OF PHYSIOTHERAPY PERFORMANCE IN NURSERY.

Farias (2003) believes that "training is the first step towards inclusive education work. In general, it is assured that the progress, quality and maintenance of all students in school because the teacher will have prepared the competence to assess how students can be encouraged or not inclusion, the type of care that will promote their development is a combined effort helps or not, the impact of inclusion on the parents if there are changes in beliefs and attitudes in students, parents and the community if there are changes in the performance of children's learning.

Gesell (1999) points out that no stage or acquisition of the child is superfluous, given that development occurs in a sequence of transformations. Thus, every step gained at any given time is a result of all previously obtained and will prepare the basis

for subsequent steps, says Brandão (1992).

The physiotherapist should be observed and try to learn what the hopes and expectations of children and their parents, that facilitates the development of a more relevant, stimulating the movement in the classroom, in the courtyard or physical education. This program can be better prepared with the ideas of teachers. It should be kept a pleasurable contact between the child's parents, therapists and teachers, to get a better response to the work (KAVALCO, 2003).

That's why the professionals working in the nursery must have a clear conception of the child and, especially, early childhood education and development processes and learning to stimulate the growth of the same (DURCE et al, 2006).

The physiotherapist with a team of different health professionals can participate in school guidance, may be identifying the barriers that the child will face in the school environment as well as the expectations and demands for it to operate in this environment, intended to improve a child's learning (PRADO, 2001, CROKER et al, 1999).

The practice of physical therapy in schools and day care is provided by the code of professional ethics. This code decides the fundamental responsibilities of the physiotherapist. Attention physiotherapy enables the development of preventive primary, secondary and tertiary (DURCE et al, 2006).

The nursery is very important for the child and has a fundamental role in proper child development. The physiotherapist, to work proactively with health conditions, can provide a repertoire of knowledge about infant motor development professionals of this institution (VITTA et al., 2000).

CONCLUSION

Through this study we have shown the importance of interdisciplinary physiotherapist working with other professionals, in this case, the educators of the school, but also in primary care, which calls for prevention, which now has won in a slow and gradual, a wider space health, gradually, suggesting a focus on levels "primary and secondary.

We conclude that the role of a physiotherapist in that daycare would be important to provide these children appropriate incentives for good normal psychomotor development, and provide guidance to employees, especially teachers, to be encouraging these children to conduct their activities daily living almost independently.

The therapist then seeks, through its global vision and their knowledge about the normal psychomotor development, facilitate the purchase and improvement of certain skills and concepts necessary prior to the acquisition of literacy, through lectures, guidance and exchange of experiences with educators.

School inclusion is important, but is not taking due care. Many children are being "included" but without the proper preparation of the whole society, government, family and the child. For inclusion in school, be true, there is still a long way to go.

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EDUCATION AREA AND POSSIBILITY OF PHYSIOTHERAPIST ACTION

ABSTRACT

To identify the profile of educators in age, sex, education, time in daycare and in current institution; know the professional pathway, the reason for career choice and the educators function; learn about the proposed activities of educators and their conception about Neuropsychomotor Normal Development (DNPMN); identify the interest of educators in continuing education and discuss the possibility of physiotherapist action in educational areas. The sample was about 24 educators of 0 to 6 years old children of the Child Educational Center's Pioneers in Balneario Camboriu city. Was applied an individual semi-structured interview using a voice recorder, which basically consisted of 14 questions of personal identification and the conception of the educators about child DNPMN. For the results analysis was used the Bardin scale. All the educators were female, mean age 30 years and 10 of them still with incomplete higher education. Was found educators uncertainty about their professional identity and function. For most, the career choice was made by a hasten to teach. There was educators uncertainty about their DNPMN conception, do not understand in which stage the children are, do not able to identify delays in DNPMN and do not offer activities for children emphasizing the DNPMN. With this result we observed a lack of information from educators about the DNPMN and, therefore, is expected to continue the study to be possible the inclusion process of the physiotherapy in daycares to successfully empower the educators.

KEYWORDS: education; physiotherapy; dnpmn

EDUCATION ESPACE ET LE ROLE DE LA POSSIBILITÉ DE KINÉSITHÉRAPEUTE

RESUMÉ

Ce travail a pour but identifier le profil des éducateurs en ce qui concerne l'âge, sexe, scolarité, temps en crèche et dans l'institution actuelle; connaître la trajectoire professionnelle, le motif de la choix et la fonction des éducateurs; connaître les activités proposées par les éducateurs et leur conception sur le Développement Neuropsychomoteur Normal (DNPMN); identifier l'intérêt des éducateurs à la formation continuée et discuter la possibilité d'actualisation du professionnel de physiothérapie dans les espaces de l'éducation. La montre a été de 23 éducateurs d'enfants de l'âge de 0 à 6 ans du Centre d'Éducation Infantile Pionniers de la ville Balneário Camboriú. On a utilisée une interview individuelle semi-structurée, avec l'emploi d'un enregistreur de voix, qui se composait de 14 questions basiques d'identification personnelle et sur la conception des éducateurs sur le DNPMN infantin. Pour l'analyse des résultats a été utilisée l'Échelle de Bardin. Tous les éducateurs sont du sexe féminin, avec l'âge moyen de 30 ans, et 10 entre ils ont l'enseignement supérieur incomplet. On a trouvée incertitude des éducateurs en ce qui concerne sa identité professionnelle et sa fonction. Pour la majorité, la choix professionnelle s'a due a l'afecction pour enseigner. On a trouvée incertitude des éducateurs sur leurs conceptions sur le DNPMN, parce qu'ils ne perçoivent en quelle étape les enfants se trouvent. Ils ne peuvent identifier les délais en le DNPMN e ne proposent activités aux enfants de manière à remarquer le DNPMN. Selon le résultat s'a observée une manque d'informations du côté des éducateurs sur le DNPMN, e pour cela on espère continuer l'étude pour qu'il soit possible le procès d'inclusion de la physiothérapie dans les crèches pour augmenter la capacité des éducateurs.

MOTS CLÉS: Éducateur; Physiothérapie; DNPMN

ESPACIO EDUCACIONAL Y LA POSIBILIDAD DE ATUACIÓN DE LA FISIOTERAPEUTA

RESUMEN

Identificar el perfil de los docentes como la edad, sexo, educación, tiempo en la institución actual, conocer la trayectoria profesional y las razones para la elección y el papel de los educadores, conocer acerca de las actividades propuestas de los educadores y la concepción acerca de lo desarrollo psicomotor normal (DNPMN), identificar el interés de los educadores en la educación continua y discutir el posible papel del fisioterapeuta en las actividades educativas. La muestra constaba de 23 educadores de los niños de 0 a 6 años del Centro Educación Infantil Pioneiros de la ciudad de Balneário Camboriú. Se aplicó una entrevista individual semi-estructurada utilizando una grabadora de voz, que constaba de 14 preguntas básicamente de identificación personal y el concepción de los educadores acerca de la DNPMN. Para el análisis de los resultados se utilizó la escala de Bardin. Todos los profesores son mujeres, edad media de 30 años y 10 de ellos con educación superior incompleta. Se encuentra incertidumbre en la parte de los educadores cuanto a su identidad profesional y su función. Para la mayoría, la elección profesional fue por el gusto en enseñar. Se encuentra incertidumbre en la parte de los educadores cuanto a su concepción acerca de lo DNPMN no dar cuenta de lo que los niños paso no son capaces de identificar los retrasos en DNPMN no proponer actividades a los niños haciendo hincapié en DNPMN. Con este resultado se observa una falta de información de los educadores sobre la DNPMN y por lo tanto espera que continúe el estudio para su posible inclusión en el proceso de Fisioterapia en las institución de niños de manera que pueda permitir a los educadores su formación y entrenamiento.

PALABRAS CLAVES: Educador, Fisioterapia, DNPMN.

ESPAÇO EDUCACIONAL E A POSSIBILIDADE DE ATUAÇÃO DO FISIOTERAPEUTA

RESUMO

Identificar o perfil dos educadores quanto a idade, sexo, escolaridade, tempo em creche e em instituição atual; conhecer a trajetória profissional e o motivo da escolha e a função dos educadores; conhecer as atividades propostas dos educadores e sua concepção quanto ao Desenvolvimento Neuropsicomotor Normal (DNPMN); identificar o interesse dos educadores na formação continuada e discutir a possibilidade de atuação do fisioterapeuta em espaços educacionais. A amostra foi de 23 educadores de crianças de 0 a 6 anos de idade do Centro Educacional Infantil Pioneiros da cidade de Balneário Camboriú. Foi aplicada uma entrevista individual semi-estruturada utilizando um gravador de voz, que constou de 14 perguntas basicamente de identificação pessoal e a concepção dos educadores sobre o DNPMN infantil. Para a análise dos resultados foi utilizada a Escala de Bardin. Todas as educadoras são do sexo feminino, com idade média de 30 anos e 10 delas com ensino superior incompleto. Encontrou-se incerteza por parte das educadoras quanto à sua identidade profissional e a sua função. Para a maioria, a escolha profissional deu-se por um apresso em lecionar. Encontrou-se incerteza dos educadores quanto à sua concepção sobre DNPMN, não percebem em qual etapa às crianças se encontram, não conseguem identificar atrasos no DNPMN e não propõem atividades às crianças enfatizando o DNPMN. Com esse resultado observamos uma escassez de informações por parte dos educadores a cerca do DNPMN e por isso, espera-se dar continuidade ao estudo para que seja possível o processo de inclusão da fisioterapia nas creches de forma que se possa capacitar os educadores.

PALAVRAS-CHAVE: Educador; Fisioterapia; DNPMN.

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