

Integrative and Complementary Practices in Professional Health Education

Práticas Integrativas e Complementares na Educação Profissional em Saúde

Prácticas Integrativas y Complementarias en la Educación Profesional en Salud

RESUMO

A inserção das práticas integrativas e complementares na educação profissional em saúde tem sido discutida como uma estratégia para aprimorar a formação dos profissionais, promovendo um cuidado mais humanizado e holístico. Essas práticas, reconhecidas pelo Sistema Único de Saúde (SUS), incluem terapias como acupuntura, fitoterapia, ioga e reiki, e têm sido gradativamente incorporadas nos currículos de cursos da área da saúde. Este estudo teórico analisa os impactos dessas práticas na formação profissional, destacando benefícios como a ampliação da visão interdisciplinar e a valorização do autocuidado, além de desafios como a resistência institucional e a necessidade de regulamentação. Conclui-se que a adoção das práticas integrativas e complementares contribui significativamente para a qualificação profissional, exigindo diretrizes pedagógicas claras e formação continuada dos docentes.

DESCRIPTORES: Práticas integrativas; Educação profissional; Saúde; Formação interdisciplinar; Humanização.

ABSTRACT

The inclusion of integrative and complementary practices in professional health education has been discussed as a strategy to enhance professional training, promoting more humanized and holistic care. These practices, recognized by the Unified Health System (SUS), include therapies such as acupuncture, herbal medicine, yoga, and reiki, and have been gradually incorporated into health education curricula. This theoretical study analyzes the impact of these practices on professional training, highlighting benefits such as an expanded interdisciplinary perspective and the promotion of self-care, as well as challenges such as institutional resistance and the need for regulation. It is concluded that the adoption of integrative and complementary practices significantly contributes to professional qualification, requiring clear pedagogical guidelines and continuous teacher training.

DESCRIPTORS: Integrative practices; Professional education; Health; Interdisciplinary training; Humanization.

RESUMEN

La inclusión de prácticas integrativas y complementarias en la formación profesional en salud se ha debatido como una estrategia para mejorar la formación profesional, promoviendo una atención más humanizada y holística. Estas prácticas, reconocidas por el Sistema Único de Salud (SUS), incluyen terapias como la acupuntura, la fitoterapia, el yoga y el reiki, y se han incorporado gradualmente a los planes de estudio de las carreras de salud. Este estudio teórico analiza el impacto de estas prácticas en la formación profesional, destacando beneficios como la expansión de la perspectiva interdisciplinaria y la valoración del autocuidado, así como desafíos como la resistencia institucional y la necesidad de regulación. Se concluye que la adopción de prácticas integrativas y complementarias contribuye significativamente a la cualificación profesional, lo que requiere directrices pedagógicas claras y formación docente continua.

DESCRIPTORES: Prácticas integrativas; Formación profesional; Salud; Formación interdisciplinaria; Humanización.

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INTRODUCTION

Integrative and complementary health practices (IHP) have gained ground as strategies that broaden the traditional approach to medicine, promoting more holistic care focused on the individual's overall well-being. These practices include therapies such as acupuncture, herbal medicine, homeopathy, reiki, yoga, among other

approaches recognized by the Ministry of Health in Brazil. In the context of professional health education, the incorporation of PICS has become increasingly relevant, contributing to the training of professionals capable of offering expanded and humanized care¹.

The inclusion of integrative and complementary practices in the training of health professionals seeks not only to diversify therapeutic approaches but also to stimulate an interdisciplinary and interprofessional view of health care. According to recent studies, these practices promote a greater understanding of the role of professionals in comprehensive patient care, strengthening the relationship between prevention and health promotion². However, the implementation of PICS in professional education still faces challenges, such as resistance from some traditional institutions and the need for continuing education for teachers³.

The literature indicates that the inclusion of PICS in health course curricula can contribute to the construction of a more comprehensive care model, aligned with the guidelines of the National Policy on Integrative and Complementary Practices (PNPIC). Created in 2006 by the Ministry of Health, the PNPIC has encouraged the appreciation of these therapies in the Unified Health System (SUS) and in educational institutions, promoting more humanized and preventive care⁴.

Given this scenario, there is a need to reflect on the impact of integrative and complementary practices on professional training and how they can contribute to the qualification of future health workers. Thus, this study proposes to answer the following research question: "How can the incorporation of integrative and complementary practices in professional health education contribute to a more holistic and humanized training?" The objective of this theoretical essay is to analyze the in-

clusion of integrative and complementary practices in professional health education, identifying their benefits, challenges, and impacts on the qualification of professionals.

DEVELOPMENT

This study is a theoretical essay, which consists of a critical analysis of existing concepts, theories, and research on the topic, without collecting primary data. The theoretical essay allows for a reflective approach, exploring integrative and complementary practices (ICP) in professional health education, considering their impacts on the training of professionals and health care⁵.

The research was based on a literature review, selecting articles published between 2020 and 2025, available in academic databases such as SciELO, Google Scholar, and Capes Journals. The inclusion criteria were studies that addressed PICS in the educational context and their applicability in professional health training. Studies that dealt exclusively with the clinical use of PICS, unrelated to professional training, were excluded from the analysis.

The impact of integrative and complementary practices on professional health training

The introduction of integrative and complementary practices in the training of health professionals has been advocated as an innovative approach to improving student qualifications, promoting a more comprehensive and patient-centered model of care⁶. According to the National Policy on Integrative and Complementary Practices (PNPIC), these practices encompass therapies such as acupuncture, herbal medicine, homeopathy, yoga, meditation, and reiki, promoting both physical and emotional benefits to patients and health professionals themselves⁶.

The adoption of PICS in profession-

al education provides students with a broader view of healthcare, enabling the articulation between different areas of knowledge and encouraging interdisciplinary practices⁷. Some educational institutions have incorporated specific subjects on PICS into their curricula, while others choose to offer extension courses, internships, and extracurricular activities, allowing students to have direct contact with these practices in the healthcare context⁷.

Research indicates that students who undergo this training have greater listening skills, empathy, and a more humanized view of health and disease processes⁸. In addition, knowledge of PICS enables professionals to integrate complementary strategies into conventional treatment, providing more diversified and personalized therapeutic approaches for each patient⁹.

Thus, it is clear that the inclusion of PICS in professional training not only enriches the education of future health professionals, but also promotes more comprehensive care, in line with the guidelines of the Unified Health System (SUS) and the needs of the population.

The relationship between integrative and complementary practices and interdisciplinarity and humanization in teaching

Interdisciplinarity is one of the fundamental pillars for teaching integrative and complementary practices in professional health education. The construction of health knowledge requires an approach that goes beyond the limits of traditional disciplines, promoting teaching based on collaboration between different areas⁸.

Teaching PICS promotes integration between different health specialties, such as medicine, nursing, physical therapy, and psychology, promoting a broader understanding of the processes of illness and healing. This is because complementary therapies involve phys-

ical, emotional, social, and spiritual aspects, requiring a multidimensional approach for their proper application⁹.

Another essential point is the relationship between PICS and the humanization of teaching and healthcare. Studies show that students who have contact with these practices during their professional training show greater empathy, more efficient communication, and a greater ability to adapt to patients' needs⁹.

In addition, some practices, such as meditation and reiki, have been used within educational institutions to reduce academic stress and promote the well-being of students themselves. This approach not only improves the quality of learning but also strengthens self-care awareness among future health professionals¹.

Therefore, the introduction of ICMPs into professional health education curricula can play a key role in training professionals who are better prepared to deal with the challenges of care, promoting more humane and patient-centered care.

The challenges and prospects of implementing integrative and complementary practices in professional education

Despite the obvious benefits, the implementation of integrative and complementary practices in professional training faces several challenges. One of the main obstacles is the resistance of some institutions and teachers, who still view these practices with skepticism, mainly due to the lack of robust scientific evidence in some therapeutic modalities¹¹.

Another challenge is the lack of specific training for teachers, who often do not have the skills to teach content related to PICS. To address this issue, some universities have promoted training courses for teachers, ensuring that they can incorporate integrative approaches into teaching in a qualified

manner^{1,2,3}.

In addition, there is a need for clearer regulations on the teaching of PICS in health curricula. The PNPIC has already established guidelines for the practice of therapies in the SUS, but there are still few regulations on how these practices should be taught in technical and higher education courses^{1,2,3,4}.

Another relevant aspect is the impact of these practices on reducing the use of medications and promoting the well-being of health professionals. Studies indicate that the introduction of therapies such as meditation and reiki in the hospital environment not only improves patient recovery but also reduces stress and emotional overload among professionals^{1,2}.

Thus, it is clear that, although there are still challenges to be overcome, the implementation of ICMP in professional training represents a significant advance in the construction of a more humanized and comprehensive teaching model, aligned with contemporary healthcare needs.

The adoption of integrative and complementary practices (ICP) in the training of health professionals has been progressively debated, mainly due to the positive impact that these approaches can have on teaching and clinical practice. However, challenges still persist regarding the academic acceptance, regulation, and curricular structuring of these practices within professional health education.

Although the National Policy on Integrative and Complementary Practices (PNPIC) has strengthened the inclusion of these practices in the Unified Health System (SUS), resistance from some academic and professional institutions is still an obstacle to the expansion of ICP teaching in professional education¹.

In addition, there is constant questioning about the lack of robust scientific evidence for some integrative practices. Although practices such as acupuncture and meditation have

broad scientific validation, other approaches, such as aromatherapy and flower essences, still lack more in-depth studies to prove their effectiveness in treating specific conditions¹¹.

Another point of difficulty is the low acceptance among professionals trained in traditional biomedical models, who often consider PICS to be a complementary practice without sufficient basis to be incorporated into care⁸.

The regulation of PICS teaching is not yet fully structured, which creates obstacles to its full integration into health courses. The PNPIC has established guidelines for the provision of integrative practices in the SUS, but there is still little clarity on how these practices should be incorporated into technical and higher education. On the other hand, postgraduate courses in PICS have expanded in recent years, reflecting a growing interest among trained professionals in complementing their work with integrative approaches.

To ensure that PICS are included in a structured and scientifically based manner, experts recommend the adoption of active teaching methodologies, such as clinical simulations, case studies, and problem-based learning. These methods allow students to understand PICS in a critical and integrated way, favoring an approach based on scientific evidence and not just on individual perceptions or personal beliefs^{1,8,9}.

Despite the challenges, the incorporation of PICS into professional health training presents promising prospects. The growing demand for more humanized and holistic approaches to care has led several universities and institutions to rethink their curricula to include courses on PICS¹². In addition, public policies aimed at regulating and researching these practices can strengthen their acceptance in both academic and healthcare settings.

Therefore, despite institutional and academic barriers, expanding the teaching of PICS in professional health

training has great potential to transform health care, promoting more humanized, interdisciplinary practices that are aligned with the contemporary needs of the population.

FINAL CONSIDERATIONS

The incorporation of integrative and complementary practices into professional health education represents an innovative strategy for training professionals who are better prepared to offer holistic and humanized care. This theoretical study demonstrated that these practices not only broaden students' view of the health and disease process, but also encourage interdisciplinarity and promote an approach centered on patient well-being.

The introduction of integrative prac-

tices into health course curricula enables the articulation between different areas of knowledge, promoting a more complete education that is aligned with the guidelines of the National Policy on Integrative and Complementary Practices (PNPIC). In addition, it is evident that these practices strengthen the bond between professionals and patients, favoring more empathetic and respectful care. However, the implementation of PICS still faces challenges, such as institutional resistance, lack of specific regulations, and the need for teacher training.

Thus, it is essential that educational policies be developed to expand the presence of PICS in the training of health professionals, ensuring clear pedagogical guidelines and encouraging research that consolidates the scientific basis of

these approaches. In addition, it is essential that teaching programs encourage practical and interdisciplinary experience, preparing future professionals to integrate complementary therapies into the conventional model of health care.

It can therefore be concluded that the adoption of integrative and complementary practices in professional health education can contribute significantly to the qualification of professionals, promoting more humanized and effective care. For this transformation to occur in a broad and sustainable manner, it is necessary for educational institutions, regulatory bodies, and health professionals to work together to build a more inclusive and innovative educational model that is aligned with the contemporary needs of society.

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