

Experiences of learning about nursing care*

VIVÊNCIAS DE APRENDIZAGEM DO CUIDADO NA FORMAÇÃO DA ENFERMEIRA

VIVENCIAS DE APRENDIZAJE DEL CUIDADO EN LA FORMACIÓN DE ENFERMERA

Luciana Spinato De Biasi¹, Eva Neri Rubim Pedro²

ABSTRACT

The objective of this qualitative-exploratory study was to learn about the process of developing knowledge in nursing care in terms of the experiences of the students who attend the seventh semester of a Nursing Course located in the State of Rio Grande do Sul, Brazil, from April to June/2007. Data collection was performed using the focal group technique and the information was analyzed using the thematic content analysis, which revealed one theme with three categories: Reflecting upon nursing education: the nurse's view; the knowledge of the profession; the process of education: learning about nursing care; and Expectations regarding the end of the course. The results showed that the care theme permeated the students' experiences, both implicitly and explicitly, although without a consistent philosophical and theoretical background.

KEY WORDS

Nursing.
Nursing care.
Nursing, education.
Teaching

RESUMO

Estudo qualitativo, exploratório-descritivo, com o objetivo de conhecer o processo de aprendizagem do cuidado em relação às vivências dos alunos do sétimo semestre de um curso de Enfermagem no interior do Rio Grande do Sul, no período entre abril e junho de 2007. A coleta de dados foi realizada pela técnica do grupo focal, e a análise das informações, pela análise temática de conteúdo. A análise evidenciou um tema, refletindo sobre a Formação, e três categorias: Visão da Enfermeira: o conhecimento da profissão; O processo de formação: a aprendizagem do cuidado; e Expectativas com a finalização do curso. Os resultados apontaram que a temática do cuidado permeou as vivências dos alunos, de maneira implícita e explícita, porém sem uma fundamentação teórica e filosófica consistente.

DESCRIPTORES

Enfermagem.
Cuidados de enfermagem.
Educação em enfermagem.
Ensino.

RESUMEN

Estudio cualitativo exploratorio descriptivo con el objetivo de conocer el proceso de aprendizaje del cuidado en relación a las vivencias de los alumnos del séptimo semestre de un curso de Enfermería en el interior del Rio Grande do Sul, en el periodo entre abril y junio de 2007. La colecta de datos fue realizada por la técnica del grupo focal y el análisis de las informaciones por el análisis temático de contenido que evidenció un tema y tres categorías: Reflexionando sobre la Formación. Visión de la Enfermería: el conocimiento de la profesión; El proceso de formación: el aprendizaje del cuidado y Expectativas con la finalización del curso. Los resultados apuntaron que temática del cuidado ha traspasado las vivencias de los alumnos, de manera implícita y explícita, pero, sin un basamento teórico y filosófico consistente.

DESCRIPTORES

Enfermería.
Atención de enfermería.
Educación en enfermería.
Enseñanza.

* Based on the thesis "A Transversalidade (In)Visível da Temática do Cuidado na Formação da Nurse" School of Nursing, Federal University of Rio Grande do Sul, 2008. ¹ MSc. in Nursing. MSc. in Human Health Sciences. Faculty at Universidade Regional Integrada do Alto Uruguai e das Missões. Erechim, Rio Grande do Sul, Brazil. lucianadb@uri.com.br ² PhD. in Education. Adjunct Professor at School of Nursing, Federal University of Rio Grande do Sul. Porto Alegre, Rio Grande do Sul, Brazil. evaneri@terra.com.br

INTRODUCTION

By observing several students in their journey throughout the nursing undergraduate course, it was possible to observe that, as they begin the course, a great majority of them search for an immediate solution to the health problems of an individual; in other words, they have a biological and technical point-of-view, the same view that seems to be demonstrated by the population in general. They perceive the nurse^(a) as the person who takes care of sick patients, handling only health problems or some variation of suffering, expecting to solve the problem as quickly as possible through the use of procedures, placements, and concise teaching, and without the use of appropriate communication, among other less technical tools.

On the other hand, several nursing professors base their teaching on the care to be given in its different dimensions; for instance, temporal, emotional, social, cultural and relational, among others. Based on these findings, which our practice has allowed us to experience, the following question presented itself: What experiences have undergraduate students demonstrated regarding the care thematic?

The authors decided to develop this study due to the fact that students in the final semesters of the course have the opportunity to reveal their expectations and experiences regarding their care teaching-learning processes. Thus, the educational process was considered as the relationship that takes place between professor and student, in which both of them learn and teach, mutually enriching the other, based on their experiences.

Teaching is an intentional and interpersonal process that primarily uses verbal communication and the finished dialogical discourse as a means to trigger, favor and make the learning process successful in a specific situation⁽¹⁾. Thus, the latter will happen based on the verbal communication in class, as well as experienced interactions, relations and actions in each situation. It happens in singular ways for different students and in each intervention.

When getting close to the end of their qualification as nurses and to starting their professional journey in care, it is important to perceive nursing as a thoughtful profession and to be aware of the aspects beyond technique, in order to practice nursing in a humanized and supportive way, encompassing the several aspects that involve the care. In other words, concerning oneself with the historical, social, cultural and economical context of the person, family or community, focusing on human relations based on solidarity, sensitivity and on respect of the human being.

Care learning must be the target of concern and reflection, both for professors and students, so that the professional care quality may be improved and implemented.

The authors believe that if the care teaching-learning process is occurring effectively, at a period close to the end of the course professors may have a broader point of view of the care process, which will then be translated through the way they act, reflect and make decisions.

In this aspect, the care learning process is a concern that has followed us. By focusing on different approaches related to care, is the discourse of the professors being assimilated and experienced by the students?

In nursing, care has been the target of broad discussions, in all of its dimensions. The goal is that the nurse may see the patient beyond his disease, respecting his culture, beliefs and values, as well as his expectations towards the disease; in other words, that the patient may be seen in a comprehensive way, in his totality as a being.

Through daily practice, it is possible to perceive that the emotional, philosophical, ethical and social aspects of care are as important as the technical-scientific ones; besides, they depend on them. From this perspective, it is understood that, whenever a professional is able to assimilate all these requisites, she gains the respect and consideration of the patient and the multi-professional team she works with.

Professors, together with their students, must identify care as a value, exploring its meanings, and provide a care environment that accepts changes, being available to learn with students and exchange experiences in order to arouse the potential of each one of

them, so that they may become sensitive, creative and conscious care professionals. Therefore, at the moment everyone feels involved in the care learning process, they will be encouraged towards new discoveries and the construction of new knowledge. Thus, in the true teaching-learning process, the person who teaches learns, and the person who learns also teaches⁽²⁾.

In nursing, specifically in the care teaching-learning process, there is a need for the professor and the student to act together, striving to discover, define and execute new ways of teaching, in order to make real the action of apprehending it. The term teaching^(b) is used to indicate a complex social practice between professor and student, taking into account both the action of teaching and learning performed by both of them in the construction of the school knowledge, derived from actions developed inside and outside the classroom⁽³⁾.

The goal is that the nurse may see the patient beyond his disease, respecting his culture, beliefs and values, as well as his expectations towards the disease.

^(a)This study will refer to the nurse(s) as *her*, aimed at the professional graduating from nursing, regardless of her/his gender, since it is about a professional group in which the female gender prevails, as well as for the reason that it is the most common use in the nursing literature.

^(b)Word used to refer to a teaching situation from which learning necessarily derives, having the partnership among professor and students as a fundamental condition for facing knowledge, necessary for the education of the student during the undergraduate course⁽³⁾.

The authors believe it is also necessary to develop the teaching process in terms of the care concept, keeping in mind that in order to do this, a work environment that allows students to *savor* the knowledge in question is needed. In order for students to experience this *taste*, the professor must also *savor*, in his professional routine or in research, what he wishes to teach; in this case, everything that refers to care. The involvement of the subjects in their totality is fundamental to this process.

Nursing education has been developed in a social environment connected to the health system, in which the pedagogical practices are performed among the professor, the student and the patient. This construct means that the professor requires something more, in addition to the technical and scientific education, such as the inclusion of an ethical education⁽⁴⁾. Similarly, the search for knowledge about nursing approaches the practices of both nursing and education, given that the nurse, as an educator, uses the teaching-learning process in her care, aimed not only towards the patient and his family, but also to the other students, the nursing team and the technical procedures⁽⁴⁾.

Recognizing the care perspective as a humanizing aspect that encourages bonds between the caregiver and the patient is beyond the approach of techniques, theories or methods. It assumes (or may assume) a different dimension from the one seen in the closed space of the classroom. By leaving the walls of the university space, there is a world waiting for the nurse: varied, unusual, challenging. This is the moment in which theory and good sense in the search for solutions cross each other, in the praxis of the care act, which infers that it is not unilateral, but multifaceted.

Bearing in mind these facts, this study aimed to discover the learning process of care from the perception of students from the seventh semester of the nursing undergraduate course of the Regional Integrated University of the Upper Uruguai and Missions (URI), Erechim - RS, regarding their experiences.

METHOD

An exploratory, descriptive and qualitative study was developed with nine professors involved in the seventh semester of the nursing undergraduate course of the Regional Integrated University of the Upper Uruguai and Missions - URI - Erechim, located in the north of Rio Grande do Sul, in the period from April to June of 2007.

Data collection occurred through the focal group technique. This technique is socio-qualitative, collective and dynamic, and promotes a simultaneous action among the components of the studied group, valuing the knowledge of the social actors and recognizing them as *experts* of their own reality⁽⁵⁾. At the same time as it allows the researcher to obtain data for his studies, the use of this technique guarantees the studied subjects a space for the reflection of their own conceptions and for self-evaluation, which allows

for a possible change in behavior⁽⁶⁾ or in their understanding; in other words, a way to think about their experiences, as in the studied case.

There were two meetings with this group, in which different strategies were developed, such as the exhibition of movies and the use of multimedia resources with the exhibition of pictures of nursing academics in different care situations, in order to motivate the subjects towards a reflection on the several ways to provide nursing care, and therefore uncover the perception of students about the care teaching-learning process. The meetings happened at the university and took around an hour and a half. They were recorded on cassettes so that, later, they could be transcribed with the greatest authenticity.

The study was approved by the Committee for Ethics in Research of the mentioned university, and the authorization of the nursing course coordinator was requested for entering the field. (Protocol CEP n.003/PPH/07; CAAE - 0003.0.232.000-07). The academics signed the Term of Free and Clarified Consent, which assured their anonymity, the confidentiality of personal data and the strict use of information for scientific purposes, observing the resolution 196/96 of the National Health Committee⁽⁷⁾.

In order to keep their anonymity, the subjects were coded with the letter S followed by a numerical number to differentiate one from another: for instance, S1 (Subject 1), S2 (Subject 2) and so on. The meetings were identified as M1 and M2, respectively.

PRESENTATION AND DISCUSSION ABOUT THE RESULTS

After reading and re-reading the material, groupings and the transposition of data grouped by similarities, one theme and three thematic categories became apparent, and will be presented as follows.

Subject: reflecting on the education

This theme evidenced the comprehension of the academics from the seventh semester regarding the nursing profession; in addition, it emphasizes the way the studied subjects perceived the care learning during their educational process, and their experiences and expectations related to the proximity to the end of the course.

Category 1 - Nurse's Point of View: knowledge of the profession

Even though at this point they have already built a new understanding of the profession, when questioned about what they thought about nursing as they entered the academic life, compared to the way they see it today, they stated,

When I got here I did not know much about nursing, I had no idea. I discovered that, besides this theoretical part, you

would also have this other side focused on providing care to the patient, but at the same time you provide this care you have this idea, you must understand the reason why you are doing that (S5; M1).

[...] besides [care] there is the administrative part (S7; M1).

It was rewarding to observe the changes in the understanding of the students regarding their profession throughout their academic journey, seeing that their comprehension regarding this matter transcends the development of a technique, or a procedure. In a different perspective from when they started the course, the students demonstrated through their speeches that the nurse's attributes are not only about techniques, but transcend the direct care provided to the patient, including activities related to the administration of nursing services as well.

This administrative part, including dealing with people [...] when I got here I had no idea, I did not imagine that behind the technicians there was a nurse, and that this kind of nurse was the same one from the course I had chosen to take, and then I would have to deal with this team of technicians. And not only with the technicians, but also with a broader environment, the other professionals (S5; M1).

These statements indicate, besides the understanding of the students regarding the service and the nursing care, the broadening of the concept of what they considered to be care. The maturing expected during the educational journey and that which arose matched the purposes of the course's advice.

The perception that the care provided to the patient is not only about the technical procedures, the scientific knowledge, or the behavioral attitudes, but also includes managing and administrative functions performed by the nurse, shows that the academic sees the nurse's attributes as a caregiver during her educational process. The care thematic was so present in their educational process that there was a significant change in their way of seeing, understanding, acting and reflecting about nursing. The gradual appropriation of the studied contents provides academics with a broad point of view of nursing and the nurse's many roles. However, it is not possible to infer that the students see the care thematic as a guiding and integrating axis of the disciplines, which may identify its transversality throughout the entire educational process. We are aware of the complexity involved in the educational process and the uniqueness and individuality of professors and educational administrators, which may arrest or interfere in the development of a compatible professional education.

Category 2 - The Educational Process: care learning

When thinking about nursing care learning, it is not possible to disregard the experiences shared by students during this process. The reality experienced by the academics in the theoretical-practical classes in laboratories, hospitals, basic health units, nurseries and other places where

teaching may take place allows the view of the unexpected and the new, which generally causes the insecurity that often permeates new experiences.

As educators, we are aware that the student does not leave the university completely qualified and able to enter the work market; instead, we understand that she continues in her knowledge construction process and, only with professional practice and constant update, she will be able to build the necessary knowledge to administer effective and quality care.

The authors perceive care learning as the situation in which appropriate and compatible health actions are developed with and for the man in his totality, and health practices are not disconnected from the routine of patients.

The search for different learning opportunities, as in the study of the course contents or in voluntary practices that some of them develop during their academic journey, based on their perception of the need to acquire more knowledge, ability and experience, in our opinion, indicates their effort to prepare themselves for the work market. The interest, engagement and personal effort involved in qualifying their learning is the manifestation of the commitment that, somehow, reflects the importance given by the academics to the care process.

In the previous statement, it was also observed that this is an aspect in which the professor plays a fundamental role, in terms of promoting the reflection about what is being observed during the theoretical-practical classes, and about what the academics perceive in the nurse's attitude regarding the execution of her work. Based on this observation, it is the responsibility of the professor to promote a discussion in which students may exercise their criticism capability and develop a line of argument for the positive or negative situations they may find themselves in. These situations that are found in practice, in the context of the professional performance, are timely moments for learning in which it is possible to develop, together with the students and according to the recommendations of the National Curricular Guidelines for Nursing Courses, Resolution CNE/CES no. 03/2001⁽⁸⁾, real opportunities for the development of a critical, reflective and humanist professional, with technical, ethical, political, social, ecological and educative competencies, also according to the PPC⁽⁹⁾.

The ability to exercise critical reflection regarding what is experienced, read, observed and acted upon demonstrated the student's development, which is even more evident when she is able to visualize, discuss and point out possible ways or solutions to transform or improve a reality.

Besides showing the student how to provide care, the professor must become involved with her in the cooperative practice, leading by example, conversation and practice⁽¹⁰⁾. In this context, the authors understand that the professor is complying with his role as an educator, in the process of learning and care experiences.

Category 3 - Expectations at the end of the course

In this thematic category, the feelings and expectations of the academics aroused as they reached the end of the course, the anxiety in the face of the responsibilities of this new coming stage and the duality of not feeling able to enter the work market at the same time they feel prepared for their new role becomes evident, as was discovered in the following extract,

We feel unprepared but we also feel able because everything is new for us now, and leaving the university is another stage and then it is only going to grow. And this feeling we have, like *Oh my God, I think I do not know anything, I think I am not prepared* this is an expectation that everyone shares (S9; M1).

Students present, as previously discussed, insecurity due to the fact that they are finishing their academic life and moving towards the uncertainty of the professional life. The caregiver, as a professor, has two fundamental tasks: to broaden the student's world and to work cooperatively with her in her struggle towards becoming competent in this world. As a major priority, the professor must cultivate the student's ethical ideal⁽¹⁰⁾. The broadening of the students' world is cultivated as the professor develops research and extension projects and gives them the opportunity of insertion as research assistants or voluntary scholars, paid or not, in these projects, which aims to provide them with a kind of knowledge that transcends the walls of the university. In addition, by encouraging their participation in extracurricular activities such as courses, conferences and similar events in nursing or related areas, as well as in scientific initiation, extension programs or internship monitoring, the professor is cooperating with the student's professional development, as recommended by the CNE, in the National Curricular Guidelines for Nursing Courses⁽⁸⁾.

Regarding the development of the student's ethical ideal, the professor has a great responsibility, as he becomes a model to be followed, besides being a professor, since there are several circumstances in which the student sees the professional she would like (or not) to become in her instructor. Besides having a responsible ethical attitude, the professor must also emphasize, both in theoretical and practical classes, the importance of such precepts as respect, confidentiality, commitment and responsibility in the care of the patient.

The authors are aware, however, that professors often may not meet these purposes due to several situations or factors that also involve and contribute to the development of how to be and act as a professor. Therefore, reflecting on our commitment to the education of students leads us to reflect upon our own professional practices.

It is important for us to be able to understand that our responsibility is not limited to the education of nurses aimed at responding to the market's demand. We must bear in mind that our work is substantially important for the edu-

cation of nurses who are concerned about transforming the realities found in the work fields that are sometimes cruel or unfair.

CONCLUSIONS

At the end of the study it was possible to see that the care thematic was present in the experiences related by the students, both implicitly and explicitly, throughout the educational process in this course.

There is still a lot to be done in order to reach the level of excellence required in terms of the care teaching-learning process, but we are aware of this fact, since nursing has been a caring profession intensely connected to technical and procedural issues for a long time.

The effort to change this profile and make the exercise of care a constant at all levels of service is not unitary, but is a practice that, in a timid way, has changed paradigms and allowed this care to incorporate humanistic aspects into the nursing routine.

The perception that people, in general, have about nursing will only be modified with the effort of the nurses to develop the highest quality of work, both in the technical-scientific meaning and in the humanistic-behavioral realm.

The academics surprised us with their statements, since they demonstrated that, despite their anxieties and uncertainties regarding their graduation, they feel prepared to develop their work aimed at responsible and committed care, which comprehends all dimensions of the human being.

The insecurity and apprehension due to the proximity of the end of the course and the start of a new stage in their lives is a constant. Nevertheless, we know that there were several challenges during this journey, both for the professors and for the students, in order to acquire the necessary tools to develop the attributes for which they are responsible.

The authors are also aware that each student and each professor or educational administrator has unique qualities and characteristics which influence and contribute to the visualization of the profession, both positively and negatively.

The study findings lead us to infer that there are indications that the Nursing Course of the URI-Campus of Erechim is trying to perform its role, but we realize that there is still a lot to reflect on and discuss in terms of professional education. There is a lot to do in order to reach the expected level of excellence in the quality of the education we offer. The purpose of our study indicates the importance we give to meeting this goal and our commitment to offering the community a course in which the student may find more than a set of disciplines related to health practices. We strive to create a course in which professors are engaged in developing committed, critical and reflective students who are able to make changes towards a differentiated nursing,

aimed at technical and scientific knowledge, but also concerned with the integral care of the human being.

Care learning is not something that can be imposed, but must be achieved, since the behavior and attitudes of the professor are, in practice, the execution of the care teaching itself. Thus, the whole team of professors must be committed to this ideal, since the individual efforts will add results that may be observed by the studied community.

The study did not cover the entire thematic; instead, we hope it has aroused interest in it for other necessary

investigations. Some issues still raise doubts: What do the professors perceive regarding their performance and social commitment as educators of nursing professionals? How are the egressed students from this course perceived by the work market? How do the patients assisted by these professionals feel about the care they receive? These are some issues that still persist and that may be developed, with the purpose of understanding the role of the educators and the need for constructive criticism and improvement of the professors and administrators, in favor of quality education.

REFERENCES

1. Altet M. As competências do professor profissional: entre conhecimentos, esquemas de ação e adaptação, saber analisar. In: Perrenoud P, Paquay L, Altet M, Charlier E. Formando Professores Profissionais: Quais Estratégias? Quais Competências? Porto Alegre: Artmed; 2001. p. 23-35.
2. Freire P. Pedagogia da autonomia: saberes necessários à prática educativa. São Paulo: Paz e Terra; 2006.
3. Anastasiou LGC, Alves LP. Processos de ensinagem na universidade: pressupostos para as estratégias de trabalho em aula. 3ª ed. Joinville: Univille; 2004.
4. Pinhel I, Kurcgant P. Reflexões sobre competência docente no ensino de enfermagem. Rev Esc Enferm USP. 2007;41(4):711-6.
5. Suanno MVR. Auto-avaliação institucional: princípios e metodologia do grupo focal. In: Bello JLP. Pedagogia em foco [texto na Internet]. Rio de Janeiro; 2002 [citado 2006 jun. 13]. Disponível em: <http://www.pedagogiaemfoco.pro.br/avinst01.htm>
6. Ressel LB, Gualda DMR, Gonzalez RMB. Grupo focal como uma estratégia para coletar dados de pesquisa em enfermagem. Int J Qual Meth [periódico na Internet]. 2002 [citado 2006 jun. 20];1(2). Disponível em: <http://www.ualberta.ca/~ijqm>.
7. Conselho Nacional de Saúde. Resolução n. 196, de 10 de outubro de 1996. Dispõe sobre diretrizes e normas regulamentadoras de pesquisas envolvendo seres humanos. Bioética. 1996;4(2 Supl):15-25.
8. Brasil. Ministério da Educação. Conselho Nacional de Educação. Diretrizes Curriculares Nacionais dos Cursos de Graduação em Enfermagem, Medicina e Nutrição [legislação na Internet]. Brasília; 2001 [citado 2006 out. 14]. Disponível em: <http://portal.mec.gov.br/sesu/arquivo>
9. Universidade Regional Integrada do Alto Uruguai e das Missões. Pró-Reitoria de Ensino. Projeto Pedagógico do Curso de Graduação em Enfermagem. Erechim; 2006.
10. Noddings N. O cuidado: uma abordagem feminina à ética e à educação moral. São Leopoldo: Unisinos; 2003.