

Students archetypes: the nursing professors' viewpoint

Arquétipos discentes: percepções de docentes de enfermagem

Arquetipos de estudiantes: las percepciones de los docentes de enfermería

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ABSTRACT

Objective: The study's purpose has been to recognize, under the educators' perception, which students' attitudes contribute to the nursing education. **Methods:** It is a descriptive-exploratory study with a qualitative approach. The search results come from interviews with 46 professors inserted in two public universities, one private university, and one private higher education institution. **Results:** The data show that professors consider as proactive students' attitudes, the commitment to training; critical and reflective education; the construction of knowledge and the commitment to ethics and social responsibility. **Conclusion:** Considering the professors' viewpoint, this study shows that the effective participation of academics and also their commitment towards education process are important strategies for qualification of the teaching-learning process and nursing education.

Descriptors: Nursing education, nursing professors, nursing students.

RESUMO:

Objetivo: Conhecer, na percepção dos docentes, quais as atitudes discentes que contribuem para a formação em enfermagem. **Método:** O estudo caracteriza-se como descritivo, exploratório, tipo qualitativo. Os resultados da pesquisa advêm de entrevistas com 46 docentes inseridos em dois cursos de universidades públicas, um curso de uma faculdade e de um centro de ensino, ambos privados. **Resultados:** Os dados evidenciam que os docentes consideram como atitudes discentes proativas o comprometimento com a formação; a formação

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crítica e reflexiva; a construção do conhecimento; e o comprometimento com a ética e a responsabilidade social. **Conclusão:** O estudo evidencia que o comprometimento e a participação efetiva dos acadêmicos, na visão docente, constituem-se em importantes estratégias de qualificação do processo de ensino aprendido e na formação em enfermagem.

Descritores: Educação em Enfermagem, Docentes de enfermagem, Estudantes de enfermagem.

RESUMEN

Objetivo: Conocer, en la percepción de los profesores, que las actitudes de los estudiantes contribuyen a la formación en Enfermería. **Método:** Este estudio se caracteriza por ser de tipo descriptivo, exploratorio y cualitativo. Los resultados de búsqueda provienen de entrevistas con los 46 profesores de dos universidades públicas, un curso de colegio y un centro de enseñanza, tantos privados. **Resultados:** Los datos muestran que profesores consideran las actitudes de los estudiantes apuestan por la formación proactiva; formación crítica y reflexiva; la construcción del conocimiento y el compromiso con la ética y responsabilidad social. **Conclusión:** El estudio muestra que el compromiso y la participación efectiva de los académicos, la enseñanza y la visión son estrategias importantes para la calificación del proceso de enseñanza y aprendizaje y la formación en Enfermería.

Descriptores: Educación en enfermería, Docentes de enfermería, Estudiantes de enfermería.

INTRODUCTION

The nursing education is a complex process, which is based on a multiplicity of educational precepts that include the technical training assistencial, socio-educative, humanistic, ethical, critical and reflexive, political and philosophical and that are based on the conception of care. So, the nursing education is part of the definition of an academic and professional profile that includes the development of skills and abilities, which can subsidize critical and reflexive training, with a view to generating changes in health services.

Nursing education in certain settings needs to overcome the teaching-learning models based on curricular rigidity, on pedagogical verticalization centered on professors and content, a situation that induces students to adopt passive attitudes in the educational process. The transcendence of this model of education includes the use of innovative educational, dialogic and participative proposals, a reason that instigates students to adopt more active attitudes in the educational process and, consequently, in the co-responsibility in the construction of knowledge and in nursing education.¹

The improvement and the overcoming of repetitive educational models, induce reflections and implies in rethinking, reflecting and adding educational precepts that can govern the integrality in the formation, considering the particularities of the subjects, historicity, basic education, culture, values, scenarios, circumstances, and contexts. Nursing education lacks a balance between the learning of technical skills and the aggregation of knowledge related to social issues, education and health policies, and in a special way, based on knowledge, skills, marked with the adoption of precepts that privilege moral integrity and ethics.²

At the present time, the training of health professionals, especially nursing, requires changes and the reconfiguration

of the professional profile, so that it responds to the rapid transformations in the workspaces, health needs and the incorporation of new competences, consonant with the needs of health of the people/populations and, in particular, to develop educational precepts that enable the future professionals, to act according to directives that govern the *Sistema Único de Saúde (SUS)* [Unified Health System].³

The proximity, interactivity and experience sharing among professors and students can be an important pillar of the nursing education, given that reciprocity between theory and practice widens horizons and values experiences as educational strategies.⁴ The juxtaposition of theoretical knowledge and the experiences of the field of practice, re-signify the educational process, reason that theoretical knowledge subsidizes practices, and practices ground theories. In this context, the combination of the theoretical precepts and the valorization of the teaching/assistance experiences are factors that contribute to the nursing education process.⁵

Another exponential factor refers to proximity and academic interactivity in the relationship between professors and students, who, when combined, transcend formal and curricular aspects, and pedagogically contribute to the development of learning strategies. The commitment and interactivity between the professor and the student can reveal potentialities and weaknesses to be reviewed and worked on.⁶ Profitable relationships between professors and students include dialogue, integration, mutuality of objectives, teamwork, as well as autonomy and commitment to generating change.⁷

Bearing in mind the aforementioned and also considering the importance of the professor and student relationship in nursing education, the following question was used: What are the students' attitudes that contribute to the nursing training according to nursing professors' observation? By looking for such answers, the study's goal was to recognize, under the educators' perception, which students' attitudes contribute to the nursing education.

METHODS

Study type

It is a descriptive-exploratory study with a qualitative approach. The research participants were professors of four Nursing Graduation Courses from different institutions, including two public universities, one private university, and one private higher education institution.

Scenario and research participants

The course named 'A' (public) is located in a city of approximately 35,000 inhabitants, the second course 'B' (public) is situated in a city with a population estimated at 250,000 inhabitants. The course 'C' (private) is based in a city of 250,000 inhabitants while the course 'D' (private) is located in a city with an estimated population of 70,000 inhabitants. Alongside course 'B' are offered postgraduate courses (masters and doctorate). On the other hand, the 'A'

course offers a nursing degree, already has a master's degree project. In the private courses, only the nursing degree is offered. These courses are based in cities in the interior of the *Rio Grande do Sul* State. This study scenario was chosen because it involves two medium-sized cities and, mainly, involves public and private courses, teaching and supposedly differentiated teaching conditions.

The participants of the study are ten nurse professors who came from a Nursing Graduation Course of university 'A' (public), all with a doctorate degree; eleven professors of a Nursing Graduation Course of the university 'B' (public), being all doctors. In the course 'C' (private), there are thirteen professors, two specialists (one of whom is a master's degree) and eleven masters. The course 'D', is composed of eleven masters and a specialist. The professors of the public universities work in a regime of exclusive dedication, while the professors of the private universities, some have integral contracts, partial, even with double working hours. The students of the nursing courses in the public universities where the study was carried out are predominantly young, dedicating themselves almost exclusively to the studies. Significant percentages of private course students work during the day and study at night, some of who have a technical background and some nursing experience.

Data collection was done through digitally recorded interviews with semi-structured questions, which were previously scheduled with the professors, at different times and places. As a research instrument, a form with two questions was used that was recorded in a digital system and later transcribed. The first question was about the attitudes adopted by students, which professors consider important for nursing training, and the second about which attitudes adopted by students that do not contribute to nursing education.

The sample was of the intentional type, which is based on the belief that the researchers' knowledge about the population can be used to select the members of the sample.⁸ Inclusion criteria were considered: being of the effective cadre of professors and being a professor for more than one year per research institution. Subjects who did not meet these criteria were excluded.

In order to perform the data evaluation and interpretation, the thematic analysis method was used. The steps of the analysis included analysis (pre-analysis, material exploration, data processing and interpretation), coding (registration and context units, enumeration rules, quantitative and qualitative analysis) and categorization.⁹

The data were considered saturated per unit searched, when it was verified that the types of statements were sufficient and the collection of new interviews, supposedly, would not add new elements for the discussion in relation to the existing data.¹⁰ From the empirical analysis of the answers, the following four thematic categories appeared: The commitment to training; The commitment to critical and reflective education; The commitment to building knowledge; The commitment to ethics and social responsibility.

Ethical aspects

All ethical aspects have been observed, according to the legislation in force. The study was approved by the Research Ethics Committee from the *Universidade Federal de Santa Maria*, registered with the Certificate of Presentation for Ethical Appreciation (No. 4728713.2.0000.5346), recorded with what is stated in Legal Opinion No. 555.180. Aiming to assuring and maintaining confidentiality, the participants were identified by the code that merges letters and numbers, for instance, 'C' means course, therefore 'CA' for public course 'A', 'CB' for the second public course 'B', 'CC' for the first private course 'C' and CD for the second private 'D' course. The interviews were identified by the letter 'P', of professors, followed by the respective numbers, according to the order in which the data were collected.

RESULTS

The data coming from the study are in the order of importance, the attitudes that professors considered most important in nursing education: commitment to training (28 answers); critical and reflective education (28 answers); building knowledge (20 answers); and commitment to ethics and social responsibility (17 answers). Added to these answers, the valuation of attitudes as an assessment of moral integrity; the interpersonal relationship; the discipline; respectability; humility, among others.

The commitment to training

The commitment of the students is considered by the professors as the main proactive attitude in nursing training. The commitment of the student to his education is evidenced in the assertions successively described.

"I consider the commitment to the training itself. Professor and student are co-responsible for training as nurses. This attitude will reflect in professional practice, commitment to work, patient and family, colleagues and the institution." (P2CB)

The proactive attitudes of the students are important in the nursing education process, as well as the adoption of integrative actions that include different precepts, such as humanization, creativity, and attitudes that question the educational process. One of the professors interviewed stated that *"... in nursing education it is fundamental that the student has proactive, entrepreneurial, humanistic, welcoming, creative, questioning attitudes."* (P7CA)

In nursing education, according to professors, they also include complementary activities, such as research and extension, given their indissociability to teaching. Insertion into study groups, and active participation in events, are essential components of nursing education.

"While looking for a good nursing education, the student must be proactive, and committed to his or her learning. He should take advantage of opportunities and participate in

study groups, events, volunteer internships, research projects and outreach projects.” (P13CC)

The commitment to critical and reflective education

The commitment to the critical and reflective education is related to the fact that the student needs to reflect and interrelate the theoretical aspects in relation to the practices. On the fact, the teaching view is related “[...] *to observation, reflection and criticism in the face of the situations experienced, both in theoretical and practical activities*” (P3CA). Just as “... *responsibility, flexibility and readiness to learn, enthusiasm, criticism, humility, and attitudes.*” (P3CD) This understanding includes the importance of “[...] *dynamism, curiosity to seek solving doubts, resilience, teamwork and study habits. Have a critical/reflexive sense with case analysis position yourself in front of the situation.*” (P5CC)

The knowledge formation in nursing needs to be continuous and gradual. The commitment of the students rather than just ‘being’ in the class constitutes an important addendum in the training process.

“I consider it important that the student has an interest in evolving his learning and that he has during his training the dedication and critical-reflexive posture. I also consider important: participation in class and in complementary activities, responsibility with the studies, autonomy to seek to go beyond the content directed by the professor.” (P7CC)

The balanced intersection between theory and practice can be mediated by critical and reflective thinking. The reflections that can be established between ‘knowing’ and ‘doing’ allow students to be more critical about the conception of care and its feasibility.

“To instigate critical thinking, the reflection of theoretical knowledge with practices; to relate the mastery of basic and specific disciplines; bring daily assistance in the theoretical application; to stimulate the understanding of the practice of care, not as a cast process, but rather, in continuous updating; incite rather theoretical domain than practical to understand doing.” (P10CC)

The commitment to building knowledge

The dialogic perspective in the construction of knowledge in nursing implies considering the historicity, dynamicity, students’ ability to reflect, in particular, the insertion/immersion in the educational process. In the meantime, professors value students’ attitudes as “[...] *appreciation for the search and construction of their knowledge, based on the problematization of reality, considering their academic and life experiences.*” (P3CA)

As already mentioned, nursing training is multiple and complex, which is why they need to be included in the construction of knowledge, pedagogical constructs that

intersect technical, scientific, ethical and relational, embodied in social values:

“I consider three essential aspects. The attitudes in regards to the knowledge/technical-scientific domain that enables the professional to make decisions based on scientific knowledge. The ethical and relational attitude that confers skills to promote a nursing care anchored with humanization and in moral precepts/values commensurate with respect to the human being/society.” (P4CC)

The adoption of certain attitudes may impart new meaning to nursing education. For this, the incorporation of proactive behaviors may be important, a reason that the future professional will be inserted in different contexts. Therefore, for those interviewed in nursing training, they include attitudes such as “[...] *behavior to personal and professional posture; responsibility, critical vision and common sense; proactivity and, above all, technical and scientific knowledge; respect for one’s life and dignity.*” (P9CD)

The commitment to ethics and social responsibility

During the nursing education process, it is important to add alternative ways of visualizing the knowledge formation, so as to articulate reflection and introspection. Therefore, the incorporation of attitudes such as “... *ethics and respect that confers skills to promote nursing care anchored in humanization and in moral precepts/values commensurate with respect to human being/society*” (P4CB)

In order to obtain the expected benefits of the training, the construction of educational proposals needs to be focused on ways that allow professors and students to transcend to the less flexible dictates of the pedagogical plans, reason why

“... in nursing education, it is fundamental that the student has respect, ethical, proactive, entrepreneurial, humanistic, welcoming, creative attitudes, respect for human life, readiness to listen, bonding, commitment to the care for the other and, above all, be an articulator of resources to seek the transformation of realities, according to the guidelines of the current health system.” (P7CA)

The lived moment and the social responsibility, they both require greater participation of the professors and students, in particular, in the aspects concerning the research and, especially, the extension. Entering into extension projects and knowing the social reality, especially the less favored communities, learn from reality transcends, revise and reaffirm the theoretical and can constitute an important pedagogical space. On the fact, one interviewee states that “[...] *discussions about formation are linked to the student as a form of co-responsibility for their education, requiring not only techniques but, above all, social responsibility.*” (P1CC)

Participation in the classroom in the construction of knowledge is linked to the readiness to learn in different

contexts, as well as the acceptance of attitudes of responsibility and social commitment.

"I also consider important: the involvement in class and in complementary activities, responsibility for studies, autonomy to seek beyond the contents directed by the professor, humility to recognize their limitations and learn from difficulties and mistakes, solidarity and team spirit, ethics and responsibility social." (P7CC)

DISCUSSION

The study's findings show that, regardless of the structuring and organization of the course, professor training/qualification, the professor's perception about the assessment of student attitudes is similar, in other words, the main attitude highlighted by the professors is the student's commitment. Therefore, it is evident that one of the most significant aspects for health education, under the teaching perspective, includes students in activities inherent to teaching, research, and extension.

In the teaching activities, it includes the stimulus to the reflection of the theoretical and practical precepts, being that the use of active methodologies in the process of teaching and learning, as well as the sharper look on the social situations and the social contexts, can constitute in actions that favor the adoption of attitudes of involvement and student commitment.¹¹ In the meantime it is recommended that students adopt attitudes that are consistent with their education, as they take on the role of protagonists in their learning and development process.⁷ While insertion in teaching activities is mandatory, participation in research groups and extension is, in a way, optional. The student participation in this type of activity is preponderant to think and reflect situations and contexts in which they are inserted.

The articulation and commitment between professors and students are essential for the teaching and learning process and the achievement of the objectives proposed and attuned to the social, professional context and health needs. Training, knowledge in nursing, unfolded in theory and practice, are gradually being built according to the needs of its exercise and social demands.¹² Activities that articulate and stimulate the active participation of students in solving issues related to their training, develop in them, attitudes of responsibility and initiative, with an increase in autonomy and co-responsibility in training. Structural, organizational and curricular issues, especially qualification and the professor/student relationship and methodological processes, are also precepts that qualify to teach and, consequently, increase/enhance training.¹³

Although it is understood and preconceived the importance of having more committed students, the student participation is weakened against contexts, which include teaching models based on rigid pedagogical plans, quantitative evaluation and relations centered on the teaching authority. Contradictory to these factors, dialogue, pedagogical structuring, flexibility and dynamicity in the curricular organization, as well as an interactive and participatory professor/student relationship,

proximity and interactivity increase student participation in the training process, which is facilitated by complementary factors like interest, process of academic maturation, perception of the importance of adding differentiated and/or complementary forms of learning. The professors' knowledge of the individual and collective characteristics allows us to know the weaknesses and potentialities of the students and, thus, to interactively foster pedagogical relationships.^{1,4,6}

Professional training requires the development of a critical citizen, capable of facing the dynamics of the social and professional context and being a proactive subject in the process of change. Hence, academics need to know and understand the segment/reality where they are inserted, so that they can elaborate concepts, conjecture and reflect. The pedagogical projects that are based on the dialogical and participative methodologies offer the students the opportunity to correlate knowledge and to commit themselves to the social changes.¹ The formation of critical and reflexive subjects is essential in the generation of changes in nursing and health, since it conceives the formation of subjects capable of thinking, doing and being, according to ethical and human principles.¹⁴

The commitment to the training needs to stimulate/challenge the student to weave critical thoughts about the lived world, especially the praxis of care, which is able to come in its practice, the technical, scientific and, especially, human aspects, since the academy must make a commitment to broaden the focus of training in a holistic perspective of care, which is why the strictly technical model has not contributed to critical and reflexive education.¹⁵ Although the technicist logic in training is valued by nursing students, which is evidenced by the valuation of technical competences, to the detriment of theoretical reasoning and scientific knowledge, critical-reflexive education contributes positively to understand the social/political context and lived temporal space and their insertion in the world of work.¹⁶ Effectively, interposed reflection includes understanding the context and temporality that encompasses the political, economic, legal, and ethical. The intersection of theory and practice must be exercised as one of the indispensable precepts of the education.¹²

In professional nursing training the construction of knowledge is multiple, and also articulated with moral and ethical precepts. In order to do so, it is up to the professors to facilitate/stimulate/assure the students more active spaces in the relationship of teaching and learning, transcending the role of receivers, to a position of agents of transformation and construction of knowledge.¹⁷ The personal experiences of academics regarding their daily lives need to be used and appreciated by professors during the training period, which is why the broadening of scenarios can constitute an important pedagogical strategy of knowledge construction.³ In a particular manner, knowledge in nursing training is also strategic in solving health and social welfare issues.¹³

Currently, nursing training is committed to building a range of knowledge that includes the technical and the political, combined with skills that allow them to understand and intercede in different spaces. The academy is one of the spaces/sites for building knowledge, recognizing the importance of

interpersonal interaction with other professionals and the development of complementary activities in other spaces.¹⁸ In nursing education, individual and collective reflections can facilitate the establishment of content connections and enable the applicability of knowledge.

Nursing students tend to value technical and scientific knowledge and logical reasoning as the premise of critical thinking, which also include knowledge regarding clinical experience and the ability to discern.¹⁹ Substantially, the learning context in nursing transcends theoretical and practical knowledge, a reason that involves precepts that include knowledge, skills, and attitudes in the respective spaces of action, which are indispensable assertions for gradual and progressive formation.¹⁷ The supervised stages constitute an important link in the intersection of the theoretical knowledge developed in the academy and the practical experiences derived from the activities developed in the services.²⁰ The supervised internship allows the student to develop actions in health services, exercise skills, competencies in care and in the exercise of interpersonal relationships. During this time, the student acquires more agility, autonomy, safety, and reliability. Over this period, the exercise of reflection and criticism is elementary in the achievement of its activities, a reason that allows the student to interpose theoretical knowledge acquired in the academy and the reality of health services intersected with nursing training and performance. The insertion of students in the supervised stage, in most cases, influences the maturation of students' attitudes.¹⁸

Considering a new conception of nursing education, it is necessary to observe some premises: focusing on the multidisciplinary work, respecting the specificities of each activity, use of innovative methods of teaching centered on the student, insertion in extension and research, diversify the spaces of learning and, in a special way, to value ethical attitudes.²¹ The active participation of the student inserts him in his learning process, in the search for different ways of knowing, in the articulation of theory and practice, correlating learning with real problems.¹²

During the nursing education process, the exercise of ethical precepts does not specifically refer to the observation of rules, models or theories, and above all, to increase sensitivity. Nursing takes care of their professional identification, having in the ethical attitude one of the mediators in interpersonal relationships. The ethical dimension is linked to effective care and humanized actions, and the acceptance of the subjects in their entirety. Because nursing has as its main characteristic care, training implies the development of expanded knowledge, such as biological, psychological, social, cultural and ethical.²²

The nursing education process is related to the organization of the health work process, adopting principles such as productivity and competitiveness. Nevertheless, it is necessary to introduce precepts that value interdisciplinarity, humanization, accessibility and respectability, as well as knowledge of health policies. Succinctly, valuing the formation of ethical and socially committed professionals.²³

The commitment to training is also constituted in the interactivity and in the dialogue between professors and students that are fundamental attitudes in the reflection,

whether in the theoretical or practical field. The dialogue between professor and student is a basic precept in stimulating reflection in the theoretical context and in the space of practices. The relationship between professor and student allows a more effective pedagogical practice.⁴ Nursing education involves the production of knowledge, especially regarding personal, affective and emotional development, intersubjective relationships and technical and vocational training, the intersection in the construction of knowledge with learning experiences in the education process.^{5,6,12,14} The construction of knowledge in nursing transcends the development of technical skills, by adding interpersonal skills, political commitment, development of ethical precepts, moral scope, equanimity and the capacity for self-knowledge, affectivity, of which they are inherent in training.^{2,5}

In a way, in the professor perception, the student attitudes that contribute to the formation in nursing consist of the academic commitment. Commitment to the construction of knowledge, with the development of critical and reflexive thinking, with ethics and social responsibility, with moral integrity, interpersonal relationship, respectability, among other attitudes. The study shows that, although there are structural and organizational peculiarities between the different courses, there were no significant discrepancies between the professors' answers.

Noticeably, it is evident that this study presents limitations, reason that involved professors of four Nursing Graduation Courses in the interior of the *Rio Grande do Sul* State, and that would need to be replicated in other scenarios. Nonetheless, it is understood that it is necessary to develop new studies involving professors and students relationships and nursing education.

Despite the study's restrictions, it is modestly believed that the study can contribute to discussions in the multiple contexts of nursing education, reason that the understanding of the student's attitudes, allows to review concepts, strategies, and methods of teaching and learning, as well as to rethink skills and to relate them context. Indeed, the study shows that the commitment and effective participation of academics, in the teaching view, are important strategies for qualifying the teaching-learning process and nursing education. Another fact refers to the speed in the construction of knowledge, a situation in which professors and students need to continually reinvent themselves, especially in relation to the commitment of both parties, and in a unique way, the conjunctive and interactive relationships that are established between professors and students. Herein, the references have corroborated and enriched the main findings.

FINAL CONSIDERATIONS

Purposefully, the categories were presented with the use of the word 'commitment', which reflects the main attitude evidenced by the professors. Although we know that in academic training, in this case nursing, it is auspicious to consider the historicity of the subjects, their experiences, secondary education, among other situations. The study shows that, in the teaching view, the student's most valued attitude

refers to commitment. Enhanced student engagement tends to focus on the construction of knowledge and professional education, as well as on critical and reflexive development, observation of ethical precepts and social responsibility. The effective participation of students, in the teaching perspective, constitutes an important strategy for qualifying the teaching-learning process and in nursing education.

It has been found that some students are naturally committed, and it is necessary to provide continuing spaces for academic development, the professors' welcoming and the student insertion in study groups, research, extension projects, tutorial education programs, and the activities of continuous socialization and aggregation of knowledge. For the others, it is necessary to constitute strategies of approach and insertion in the active process of learning, seeking to overcome the differences and logically, respecting the individuality, as well as the diversity of the groups. Regardless of situations or moments, it is also up to the professors to stimulate changes of attitudes, in order to develop students' latent potentialities. The development of strategies of reception, insertion, and stimulation is one of the ways to involve them and to compromise them.

The use of active learning methodologies can be one of the pedagogical alternatives to involve students in the educational process. With minorities, adopt a position of resilience, non-discrimination and effective overcoming of prejudice and especially, seek to develop an interpersonal relationship based on mutual respect and understanding. Conclusively, it is pointed out that the student's commitment to nursing education is one of the constraints to the development of critical, reflexive and committed subjects with people, segments, and contexts.

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