A percepção e formação dos acadêmicos de enfermagem acerca da sexualidade humana*

Perception and formation of nursing academics regarding human sexuality

Percepción y formación de estudiantes de enfermería acerca de la sexualidad humana

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How to quote this article:

ABSTRACT

Objective: To analyze sexuality from the perspective of students of the nursing course of a public educational institution, listing their theoretical and practical training about this subject. Methods: It is a field research, qualitative and descriptive study, held from April to July 2013, with a targeted audience of the 151 students of the undergraduate nursing course in a public educational institution located in northwest of Paraná State, Brazil. Data were obtained through semi-structured questionnaire and submitted to thematic content analysis. Results: The students have reduced perceptions of sexuality, focusing on aspects of genitality, with insubstantial training in this issue during graduation. Conclusion: The incorporation of the sexuality theme in the academic context is necessary for progress towards comprehensive care, requiring training leading to appropriate and contextualized assistance.

Descriptors: Academic Education, Nursing Practice, Human Sexuality.

* Article extracted from Completion of Course Paper entitled "Perception and training of nursing students regarding Human Sexuality," year 2013, presented at the educational institution State University of Maringa, Maringá/PR.

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RESUMO
Objetivo: Analisar a sexualidade através da perspectiva dos alunos do curso de enfermagem de uma instituição pública de ensino, elencando sua formação teórica e prática nessa temática. Métodos: Tratou-se de uma pesquisa de campo, de caráter qualitativo e descritivo, realizada no período de abril a julho de 2013, tendo como público-alvo os 151 alunos do curso de graduação em enfermagem de uma instituição pública de ensino localizada no noroeste do estado do Paraná, Brasil. Os dados foram obtidos por meio de questionário semi-estruturado e submetidos à análise de conteúdo do tipo temático. Resultados: Os acadêmicos possuem percepções reduzidas da sexualidade, centradas nos aspectos da genitalidade, sendo a formação nessa temática frágil durante a graduação. Conclusão: A incorporação do tema sexualidade no contexto acadêmico é necessária para o avanço rumo à integralidade do cuidado, requerendo formação que conduza a uma assistência adequada e contextualizada. Descritores: Formação Acadêmica, Práticas de Enfermagem, Sexualidade Humana.

RESUMEN
Objetivo: Analizar la sexualidad desde la perspectiva de los estudiantes del curso de enfermería de una institución de educación pública, enumerando su formación teórica y práctica en esta materia. Métodos: Se realizó una investigación de campo, cualitativa y descriptiva, realizada en el periodo de abril a julio de 2013, con el público los 151 estudiantes del curso de graduación en enfermería en una institución de educación pública, ubicados en el noroeste estado de Paraná, Brasil. Los datos fueron obtenidos a través de cuestionario semi-estructurado y se sometieron a análisis de contenido temático. Resultados: Los estudiantes tienen reducida percepción de la sexualidad, centrándose en los aspectos de la genitalidad, con formación frágil en este tema durante la graduación. Conclusión: La incorporación del tema de la sexualidad en el contexto académico es necesaria para el progreso hacia la atención integral, que requiere una formación que conduzca a una asistencia adecuada y contextualizada. Descritores: Formación Académica, Prácticas de Enfermería, Sexualidad Humana.

INTRODUCTION
Human sexuality encompasses several factors and is present at all stages of people’s lives. To understand sexuality, we should note the psychological, biological and social aspects that make up the human being, and not just stick to the anatomical features that integrate what sexuality is. Over the years it has been reformulated and conditioned to historical, political, social, cultural and religious moments, which makes it unique and singular for each individual.1-3

There are several ways to understand sexuality in broad aspects, as in self-love, in manifestations, in dialogues and in the intimacy of every being. Therefore, the understanding of sexuality should cover the following aspects: biological (male and female, man and woman are anatomically differentiated by the genital organs and sexual characteristics); social (which are identified by the gender roles they play within a society surrounded by a culture) and, finally, the psychological aspect (that’s the unique identity of each individual on what is sexuality). Sexuality goes beyond the limits of what is intimate to the human being.2,4

The nursing practices encompass human sexuality as it is a science which is related in its essence and specificity to the care for human beings, both individually and in the family or in a community in a comprehensive and holistic fashion, developing autonomously or in a team, activities of diseases prevention, and promotion, protection, rehabilitation and recovery of health.3,5

For this reason, the knowledge that based nursing care in the thematic of human sexuality is needed to, thus, be able to achieve the comprehensive care goal to develop, maintain or restore the complete well-being of people. It is stated the importance of integrating sexuality in the context of the practice of nursing.5

Changes in the formation of Brazilian nurses were stimulated by the National Curricular Guidelines, which were determined by the Ministry of Education, establishing the competencies and skills that should be developed in the nurse formation process.3 Nurses should, therefore, educate and guide in many aspects, including human sexuality.5

However, failures are perceived in this context, when in different situations and circumstances nursing professionals are uncomfortable, feel shy and reprimanded to address and develop this issue with the population.6

It is observed that sexuality is a topic rarely discussed, both in nursing education and in practice of care. Studies show that nursing students do not have content about sexuality in their education and they do not feel able to meet the needs of patients on sexual issues.6,7

Studies show that nurses have difficulties in discussing human sexuality and do not have the habit to question patients about this issue during the course of care and prescriptions, but that they believe it to be relevant to include information about the sexual history of the patient in its admission file and enter that in the care prescriptions.6,8

Thus, nurses understand the need to discuss human sexuality in academic life and in the profession of being a nurse. The surveys below demonstrate and confirm the lack of academic training in nursing in the context of human sexuality.

Similarly, authors6 investigated the issue of human sexuality in nursing education, investigation held in the last semester of a nursing course, found that among the students interviewed, 56.8% reported having insufficient education, 20.45% classified it as regular, 6.8% as bad, 4.54% as good and 2.27% did not answer.

It bares highlighting the importance of comprehensive care as a prerequisite to meet the biopsychosocial, spiritual and emotional needs of human beings, focusing on a holistic view of the man. Thus, the incorporation of the sexuality theme in the academic context is necessary for the attainment of this comprehensive care and effective training for undergraduate nursing students, so that when nurses
provide assistance it is appropriate and with quality of care to the service provided.1-4

The context of training and practice of nurses in human sexuality establishes a need for an urgent change in nursing education and in its most committed professional performance. Thus, this study aimed to analyze the human sexuality from the perspective of the undergraduate nursing course of a public institution of the state of Paraná, Brazil, from the theoretical and practical training regarding this subject.

METHODS

This was a qualitative and descriptive field research, held in the period from April to July 2013, with the target audience of the 151 students enrolled in the undergraduate nursing course in a public educational institution, located in northwest State of Parana, Brazil.

All students were invited to participate. The inclusion criteria for participation in the study were being properly enrolled in the nursing program of this institution and consent to participate in the study. Given these criteria, participated 20 students enrolled from the first to the 4th year of the course in 2013. Most of the other students did not participate in the study because they refused to fill the interview about sexuality, not wanting to comment on the matter.

The data collection was through the application of semi-structured questionnaires that focused on the notion of sexuality, theoretical and practical training in this subject, besides sociodemographic research questions to characterize the subjects. The collection was carried out after the favorable opinion of the Standing Committee on Ethics in Human Research (Resolution No 217,254/COPEP) and the signing of the Informed and Enlightened Consent Form (IECF), meeting the provisions of Resolution CNS 466/12.

The data were transcribed, identifying respondents with the letter P, referring to participant, followed by the number of the receiving order of the questionnaires. These data were submitted to thematic content analysis, resulting in the identification of themes, process by which occurs the classification in groups according to a degree of intimacy or closeness to the results that emerged from the context of the responses of the research subjects.5

This study is linked to the institutional research “research action in educational demands in the nursing scenario”, it is part of the “Group of Studies and Research in Educational Practices in Health (GEPPES)” registered in the search directory of the National Council for Scientific and Technological Development (CNPq).

RESULTS AND DISCUSSION

Characterization of nurse academics

The participants were 20 students from the nursing program, with ages ranging from 18 to 24 years, an average of 20.2 years. Among the respondents, 19 were female and there was only one male participant. The same occurred in relation to marital status, only one student was married and all other were single. Regarding the year they were enrolled in, four students were in the first year, four in the second year, five students of the third year and seven of the fourth and final year. The largest number of respondents, therefore, was inserted in the fourth year, and the choice of respondents was random, respecting the inclusion criteria.

Fifteen students were living with their parents or relatives, three shared a home with friends and two lived alone. In terms of occupation, no students worked, letting it be understood that these students have financial dependence. On the economic issue, eight students refused to answer about their family income. Of respondents, earnings ranged from one to 16 minimum wages, averaging six minimum wages. According to the data collected, eleven students declared themselves Catholic; eight students declared being Protestants and only one student was not adherent to any religion.

From the data analysis, the following thematic categories emerged: Sexuality, in spite of its multiple facets, is perceived with reductionism to genitality; Training of nursing students about Human Sexuality is fragile during graduation; the nursing practices about human sexuality are realized through guidelines.

Sexuality, in spite of its multiple facets, is perceived with reductionism to genitality

As regards the design of human sexuality for nursing students, it was pointed out that the participants perceive it in its multiple facets predominantly as a synonym for sex, revealing a reductionism to genitality, but with an understanding of its relevance in gender issues:

“Sexuality to me is the act of feeling pleasure by someone else and to have sexual intercourse with it or masturbation.” (P2)

“Sexuality is a set of feelings that result in an act.” (P3)

“Sexuality is how the individual inserts (itself) in the environment. Being a man or woman.” (P5)

“I believe that sexuality is inherent in every human being, and it is related to one’s intimacy, its values, preferences, predispositions, i.e. a way to express itself through emotional-sexual relationships.” (P15)
“[...] Sexuality goes far beyond the sexual act, which from a biological point of view is considered very important, but it ends up defining the role of men and women in society.” (P18)

In fact, the sexuality concept it is still synonymous with sex. Corroborating our results, a study conducted with adolescents identified that they had difficulty identifying their perceptions and feelings about sexuality, emphasizing the reproductive function and perpetuation of the species; sexuality, for this group appeared as a synonym for “having sex” and its definition was founded on the biology of bodies, as well as in our study.6,10,11

The same result occurred in a study evaluating the perception of sexuality by elderly women in which the terms sex and sexuality were also understood as synonyms, as part of the same realm, although they also related sexuality with expressions of love and affection.12

It is emphasized that sex does not always mean the act of sexual intercourse, which is generally focused on the genitals, and the reach of orgasm. One must separate the genitality of sexuality, which goes far beyond sex itself.11-12

Given the findings of our research and its relationship to literature, the need for the approach of the sexuality theme among academics became clear, since as well as population groups in general, they also have difficulty conceptualizing the theme.

Training of nursing students about human sexuality is fragile during graduation

The preparation the students received on the subject during the academic formation clearly defined the weakness of its approach. The reports revealed that or it is not covered, or it is little explored during graduation, culminating in a superficial and inadequate preparation, in such a way that students are driven to act only in what involves sex itself (Sexually Transmitted Diseases and contraception).

“I have not yet received much preparation on this subject in graduation. I only learned about contraceptives and some approaches.” (P1)

“As an academic in nursing, I do not recall any time that the sexuality issue had to be addressed, or that sexuality has interference in any approach.” (P8)

“In the course, in my opinion, we had little preparation in this matter.” (P10)

“In my opinion, the theoretical preparation on the subject was superficial, and what we built was during internship practice.” (P18)

“[...] in the subject of sexuality one will advise on the use of methods and condoms, which to the family can pass on the idea of encouraging licentious sex, when in fact, it is to explain about contraception and how it is used [...].” (P20)

The statements above are similar to studies on the subject. It is noteworthy that the lack of preparation, of proper training and of subject of discussion within the graduation, makes the academic and future nurses experience difficulties in addressing the issue with the people, being permeated by doubts and constraints. Rarely educators include the issue of human sexuality in the context of academic education, even in the health area courses, such as nursing. Similarly, the matter of sexuality it is probably also present among professors.7,10 Other authors had also expressed concerns regarding the absence of approach on human sexuality in nursing graduation.11,13,14

By analyzing the statements of the students, there was no significant difference in knowledge about sexuality among freshmen and senior students, showing that the training received during graduation was fragile.

Thus, it can be said that there is a lack of preparation to work with the theme of human sexuality in nursing. It was possible to demonstrate the lack of studies and discussions on an academic level, and when present, they refer to a biological perspective.

The nursing practices about human sexuality are realized through guidelines

During the execution of nursing care by students, the practice that involves human sexuality is materialized through orientations to the population or even total lack of discussion of the topic of sexuality, as students encounter difficulties in how to approach the subject. The guidelines on sexuality, if any, are fully dedicated to disease prevention.

“[...] orienting people of the risks of sex without prevention and of how to prevent them. I intend to do that whenever possible and especially when the person shows signs of having sex.” (P2)

“[...] when I meet teenagers or even adults I ask if they have any questions, if they are sexually active, and try to offer orientation on contraception and solve any doubts raised.” (P10)

“[...] if these people receive guidance about the reality in which they live and prevent risks, it will not cause impacts or ailments in their physical health.” (P15)

“[...] some religions do not accept sex before marriage, I can be of that religion, but I will not judge or disapprove...
someone who has had sex before marriage, on the contrary, I will explain contraceptive methods for the patient safety and answer questions and solve doubts, that’s my job." (P1)

Corroborating the results of this research, the literature points out that teaching in this area is focused on the aspects of anatomy and diseases, not with an emphasis on all the concepts of what sexuality is, which are essential for a comprehensive care to the client. Thus, disease prevention is still the primary means of talking about sexuality within the practice of being a nurse.

It was also observed that the provided nursing care is given from the sociocultural environment in which the professional/patient is inserted, thus religion is identified as a conditioning and determining factor to the experience of sexuality and professional practice.

“Sexuality covers the depths of the human being and manifests itself differently in each individual, according to their reality and experiences.” (P5)

“[...] Certain religions or most of them take sexuality as something wrong, so it is censored and it is not treated.” (P7)

“Sexuality involves beyond our body, our culture and our behavior” (P11)

“I believe that sexuality is inherent to every human being, and it is related to the intimacy of each one, their values, preferences, predispositions, i.e. a way to express themselves through the emotional-sexual relationships.” (P15)

“ [...] many women who follow certain religions feel ashamed to talk about their body, do not seek medical care and even hide important information.” (P18)

“ [...] not all professionals are able to discern their profession from their beliefs, after all, one should take care of the customer, regardless of their sexuality not letting it interfere with your care that is its right. Example: to treat indifferently, to deny care, to omit information about the health status.” (P8)

“ [...] religions differ in their principles and although this should not happen, I think there may be interference when, for example, the nursing professional provides guidance related to sexuality according to what their religion preaches.” (P17)

The provided nursing care varies according to the understanding of the world that involves the professional, their knowledge and their personal beliefs, and the ones of the person being taken care of. Thus, it is required an approach of this nurse professional towards the one receiving the care, to understand and become familiar with its knowledge and its principles, which includes its religious beliefs and different ways of expressing it, including how it is implemented within the theme sexuality and how care is exercised over this.8,10

Religious values strongly influence the sexual sphere for they are based on moral, traditional and family principles passed down from generation to generation, reflecting in religious followers conservative attitudes present in various religions when it comes to sexuality.11,13,14

The results of this research made clear the need to alter health guidelines related to sexual and reproductive practices to promote health in a flexible manner, promoting an ethical assistance permeated by the perspective of the customer to which the service is being provided.8,14

Certainly, issues of sexuality are fundamental axes to be addressed by nurses. However, one can not only reduce them to medicalization but also include the perceptions of the body, of pleasure/displeasure, of affective values and of accountability for itself and for others.4,8,14

CONCLUSION

The results of this work direct to the understanding that academics have reduced perceptions of sexuality, focusing on aspects of genitality, which was singled out due to lack of training regarding this subject, which suggests the need for its inclusion in the undergraduate nursing syllabus.

Nursing practices focused on human sexuality within the graduation, which are timely opportunities for training, show little relation to health promotion, taking shape in guidelines on the prevention of sexually transmitted diseases. This reality implies the difficulties faced by students in addressing the issue with the population, leading them to the omission of the subject.

The acquisition of knowledge on this topic is needed and contributes to minimizing flaws in this context, such as possible inadequate postures when students are faced with this issue, both in terms of sex education, as in the various cycles of life, which are often left beside. For this, educational institutions need to have a changing capacity committing to training students in this subject.

Thus, the sexuality theme incorporation in the academic context is needed to make progress towards comprehensive care, requiring a formation that leads to adequate and contextualized assistance, as understanding the concept of sexuality should extend far beyond the limited notion of the sexual act, for this transformation of nursing care to succeed.
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Received on: 21/05/2016
Reviews required: No
Approved on: 19/09/2016
Published on: 10/07/2017

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