NATIONAL CURRICULUM GUIDELINES FOR THE NURSING GRADUATION COURSE: IMPLICATIONS AND CHALLENGES

Diretrizes curriculares nacionais do curso de graduação em enfermagem: implicações e desafios

Directrices curriculares nacionales del curso de graduación en enfermería: implicaciones y desafíos

Maria Aparecida Vieira¹, Cássio de Almeida Lima², Ana Caroline Pereira Martins³, Edvane Birelo Lopes de Domenico⁴

How to cite this article:

ABSTRACT

Objective: The study’s main purpose has been to describe the implications and challenges of the National Curriculum Guidelines for the Nursing Graduation Course (NCG/NGC), as determined by the Brazilian National Council of Education, addressing professional training in Nursing, which have an impact on the development of the pedagogical proposal of Brazilian Higher Education Institutions. Methods: It is a theoretical contemplation based on scientific publications, from 2001, year of promulgation of the guidelines, until 2017. Results: It was identified that the contents of NCG/NGC, such as generalist, humanistic, critical and reflexive formation, the skills pedagogy and learning to learn, are all reproduced in the manuscripts addressing the Pedagogical Projects of Courses (PPC). Conclusion: The NCG/NGC are represented in the PPC, nonetheless, it is still necessary to transfer their potentialities into the professional training of nurses, targeting the principles of the Sistema Único de Saúde (SUS) [Brazilian Unified Health System] and the social and health needs of the population.

Descriptors: Nursing education, nursing, teaching, brazilian unified health system, health.

RESUMO

Objetivo: descrever implicações e desafios das Diretrizes Curriculares Nacionais do Curso de Graduação em Enfermagem (DNC/ENF), determinadas pelo Conselho Nacional de Educação do Brasil, ante a formação profissional em Enfermagem, que repercutem no desenvolvimento da proposta pedagógica das Instituições de Ensino Superior brasileiras. Método: trata-se de uma reflexão teórica fundamentada em publicações científicas, a partir de 2001, ano de promulgação das diretrizes até 2017. Resultados: identificou-se que...
National curriculum guidelines for the nursing graduation...

INTRODUCTION

The National Curriculum Guidelines for the Nursing Graduation Course (NCG/NGC), in force since 2001, defines that the training of nurses targets to provide the professional with the knowledge required for the exercise of skills, while the ability to articulate and mobilize knowledge, skills, and attitudes, putting them into action to solve problems and face unpredictable situations; in addition to general skills: health care, decision-making, communication, leadership, administration, management, and continuing education. They establish the principles, foundations, conditions, and procedures for the training of nurses. Among the principles, we highlight the student-centered training, and the teacher as a facilitator of the teaching-learning process; generalist, humanist, critical and reflective training; the pedagogy of competences and learning to learn.¹

Another important point in the NCG/NGC is related to the profile of the graduate with emphasis on generalist, humanistic, critical and reflective training. The qualified professional for the practice of nursing must be guided by ethical principles, capable of intervening in the health problems prevalent in the national epidemiological profile, emphasizing their region of operation.¹ It is important to consider that these guidelines triggered a movement to restructure the curricula, seeking to adapt them to the new professional requirements.²

Since then, there has been a challenging movement in the academic community - the construction of Pedagogical Projects of Courses (PPC) based on the assumptions contained in these guidelines. Nevertheless, just the definition of these guidelines and the elaboration of these projects are not enough to establish changes, deep reform is necessary for their implementation since it is not enough to expand higher education, it is necessary to assess it due to the improvement in quality and commitment to social justice and scientific and technological innovations.³

The construction of innovative and feasible proposals is not an easy task. The intentions described in the PPC are contrasted with the practice scenarios, in which the actors should experience the principles of integrity, equity, and universality recommended by the Sistema Único de Saúde (SUS) [Brazilian Unified Health System]. It is noteworthy that these guidelines were conceived as one of the strategies for training institutions to subsidize professional training in line with the reality and health needs of the population, aiming at the fulfillment of the SUS practices.

However, discussions regarding this topic are not established as a new movement, as they have been debated in their theoretical-philosophical bases, aligned with critical pedagogy so that Nursing praxis is understood as a subjective and transforming activity of natural and social reality. Bearing the aforesaid in mind, the interaction between teaching-practice scenario should be based on a dynamic and integrated relationship for the real institution of SUS principles and guidelines, forming a solid partnership for transformation, aligning academic knowledge, the reality of health, the demands of the SUS, the profession and society.

Looking to contribute to the debate, without the pretension of exhausting the theme, a theoretical contemplation was performed aiming to describe the insertion, implications, and challenges of the National Curriculum Guidelines for the Nursing Graduation Course (NCG/NGC), as determined by the Brazilian National Council of Education, addressing professional training in Nursing, which have an impact on the development of the pedagogical proposal of Brazilian Higher Education Institutions (HEI). Discussing them involves not only compliance with legality but the recognition of a need, as the result of a historic moment.

METHODS

Aiming to achieve this intention, there has been made a temporal cut of scientific publications that addressed the theme, published from 2001, the year of the promulgation of the NCG/NGC until 2017. The path of construction of the discursive formulations took place from the critical reading of the selected publications and the extraction of the main ideas, which support reflections on these guidelines, answering the following questions: How do the NCG/NGC fit into the PPC? What are the weaknesses and potentialities? What are the apparent challenges for putting it into practice?
RESULTS AND DISCUSSION

Implications and challenges

Competence-based training, legally supported by the Brazilian Law Guidelines and Bases of National Education, also officially encouraged by the NCG/NGC, has raised criticism in its understanding, particularly concerning the risks of technical conception and convergence to neoliberal policies. One of the justifications for this interpretation is based on the understanding that the pedagogy of competences can contribute to the common sense of competitiveness and valuation of private goods, such as the plundering of the public by groups and corporations, which can compromise the process of universal access to health and the accountability of the Brazilian state in structuring the SUS. Therefore, it is considered that an excessive centrality of the method may be incurred in the construction of curricula and its applicability, to the detriment of the objectives of educational practice and the knowledge necessary to carry it out in the context of professional training.4

It is also observed that the curricular transformation is permeated by power relations, tensions and contradictions and, often, by a silent and hidden struggle of positions, interests, social, political, cultural and pedagogical projects, which distances it from a neutral action and objective.5 Bearing in mind the aforesaid, would the intent of building competences be able, in isolation, to create a political environment unfavorable to public policies? Can higher education professional training in health suffer from the intentionality of building skills? Do the skills of reflection and criticism, when used for problem-solving, not express competence? Are political trends, always present, but not always apparent, constrained by competency-based pedagogy?

The collective construction of the PPC constitutes an “laborious task” arising from the difficulty of coping with the new, the unveiling of the old, the ability to manage conflicts between teachers, the difficulty of involving students and, ultimately, countless moments disinterest of the groups, revealing quite unfavorable scenarios, such as the insufficient number of teachers and temporary work contracts, which prevent the establishment and preparation for the exercise of the activity, thus discouraging the training itself and, dangerously, disconnecting the pedagogical project from the necessary transformations for the transposition of intentionality into practice.6

A review of undergraduate nursing education in Latin America identified, based on the 50 articles analyzed, that most institutions adopted the concept of the Traditional School, showing that the pedagogical practices of professors from nursing graduation courses continue to be rooted in the banking concept of education, which alienates, plaster and reproduces wrong and distorted postures.7 There is certainly a gap between the documentary formality of the PPC in which critical, reflective, humanistic and generalist training is described, that is, capable of competent, ethical and contextualized performance. How can this performance occur if, in real academic life, the teaching and learning process is restricted to the configuration of expository classes, little or minimally dialogued and with practical experiences that reinforce and reiterate rigid, little creative and, ultimately, work processes obedient?

It is known that the use of active methodologies in the training process is a potential for the development of critical and reflective professionals, capable of distancing themselves from technical rationality for a practice based on comprehensive care and social transformation. Added to the use of active methodology, attention is paid to the establishment of pedagogical relationships based on reflective dialogue, which favors the teaching-learning process and, consequently, health care.8,9

There are certain contradictions, which represent a challenge in the daily life of Nursing, between theoretical-practical training and professional praxis, which show a dissociation between theory and practice, and are also present when the undergraduate is first informed, in the classroom, of all theoretical concepts on the theme and, subsequently, it is put into practice for the application of these concepts, as occurs in the Supervised Curricular Internship. The termination of training, through Supervised Curricular Internships, to be carried out in the last two semesters of the course and after the theory, shows insufficient integration of academy-service inside and outside walls.10

There is another situation that can be attributed to the disarticulation between theory and practice, and occurs in the student’s contact with practices, causing suffering and conflicts capable of hindering the teaching-learning process, since the one discussed in the classroom or it is always contemplated in the practice scenarios and causes great frustrations for both students and supervisors.11-3 The ability to know how to evaluate and measure such emotional involvement will be acquired through practice and the daily experiences of different situations of this professional training. It is also possible that as a nursing professional, he finds himself in a new situation that makes him reflect and recognize a new limit for his emotions.14

The theme of the disarticulation between theory and practice has been explored in an exhaustive manner in the area of Education and, in particular, in the Health area. Admittedly, it is a topic that encompasses enormous complexity, due to the difficulty of harmonizing these two facets.12,15 This factor makes it difficult to execute the guidelines, since the distance between theory and practice is still very present. The interconnection between teaching and the assistance provided is an essential condition for the realization of the student’s learning process. The practice articulated to the student’s education is recognized as important because it provides experience in the marketplace in which he/she will be inserted in the future.16,17

Accordingly, ‘learning by doing’, with reflective pauses on actions aimed at learning from the reflections carried out,
has repercussions on the teaching-learning process, for the exercise of a reflective practice that articulates the world of work with the academy, bringing nurses’ training process closer to the real demands of the services.8

The great challenge for teaching in nursing graduation courses will be to train general practitioners, but it is also necessary to take into account political and economic issues, attending, with competence and visibility, to the various specializations that arise, continuously, in the health care setting.18

This generalist expression is questioned for having multiple interpretations and, in itself, determines a lack of definition about the type of professional that one wishes to train. There is doubt about the interdisciplinarity placed in the NCG/NGC, in relation to the emphasis on general nursing knowledge as opposed to specialized knowledge. Despite the recognition and importance of interdisciplinary training, interdisciplinarity has been questioned by the way in which the solution to many of the tribulations that affect education is attributed to it, particularly when it comes to justifying curricular changes.19

There are also questions about the real role of the NCG/NGC, which they cannot, by themselves, enable the conditions and processes necessary for the materiality of the change in the formation process. Its relevance in educational work and in directing collective efforts should not be questioned, but, until then, there was no record that the NCG/NGC, in isolation, could materialize the conditions for the quality of training. Therefore, these guidelines cannot respond only to the dimensions of learning to learn, learning to do, learning to be and learning to live together, as they are linked to the social and political role of health/nursing work and inserted in public policies of education and health.20

Some verbs present in the Nursing Curriculum Guidelines – to institute, to define, to apply, to guide, to develop, to do and to promote – seem to have the objective of encouraging future nurses to perform such actions. In these verbs, we note the effort that this document makes to, more than transform, normalize Nursing students, to constitute them so that they become nurses, with all the meanings that this profession could carry. Hence, when training professionals within these curricular standards, the Nursing Guidelines intend to produce bodies of critical and resolving professionals, not only in the scope of health, but also in relation to the other issues that permeate the social environment, being able to intervene both in individual and collective. So, the guidelines institute more than ideas; they institute practices, ways of being and intend to institute a certain “regime of truth” that ends up established in academia. There is no question of the fact that things are done/thought in one way and not another, because there is a document that dictates these rules: a document that normalizes conduct.21

Aspects related to HEI, public and private, are important points of reflection before the NCG/NGC. If, on the one hand, public institutions are scrapped and without investments, mainly concerning the replacement of teachers who are retiring, on the other hand, there is a greater number of teachers when compared to what occurs in private institutions, which they value for the reduction of professionals, in addition to not taking into account the deficiency in qualification that many professionals have.22 Public services are also given greater autonomy for changes, while in private institutions it is necessary to consider the interests of management, which commonly turn to profit.23

The context of little evidence of incentive to curricular changes in private institutions is disturbing, considering that, nowadays, they are the trainers of the mass of health professionals due to the growing number of the creation of new nursing graduation courses, occurring in a disordered manner.23,24 It is added that the small professional contingent responsible for supervising the curricula and pedagogical projects undertaken in these institutions, makes it extremely difficult in the effective consolidation of the guidelines in all instances.25

Furthermore, it is necessary to consider disrespect to the close and necessary link between teaching, research, and extension, which weakens university education, compromising the professional quality of undergraduates.23,25

The NCG/NGC unquestionably show advances in the structuring of nursing knowledge, but it cannot be attributed solely and exclusively to the process of changing nursing education. It is worth highlighting the teaching participation and its commitment to education, the dedication of nurses during care and the constant concern with the quality of service, linked to the social and political duty of nursing and the importance of public health and education policies.24

In this regard, there is a need for continuous concern with teacher training, in which the teacher must then reflect on the three axes on which the teaching exercise is built: scientific knowledge (epistemological dimension), didactic knowledge (pedagogical dimension) and contextualized socializing knowledge (political-social dimension) and becoming aware of its role as mediator/facilitator in the teaching-learning process.26

Observing the considerations listed, it is clear that HEI, in different regions of the country, with different structures and work processes, present similarities between the advances, difficulties, and challenges in the implementation of the NCG/NGC. It also appears that many have been pursuing to transform teaching and learning practices, making use of dialogic processes and at the same time trying to face the difficulties that this movement demands. Even in the face of evidences that a path is being followed in favor of new curriculum construction, there are many challenges imposed on the institutions that propose such a transformation.25

**FINAL CONSIDERATIONS**

Currently, the NCG/NGC is the guiding document for professional training during nursing graduation courses in Brazil, even with its strengths and weaknesses. Judging them in order to rewrite them is perhaps the key, nonetheless, the essential approach is to be able to transfer their
potentials into real situations during the professional training of nurses.

The importance of expanding the training of professional nurses in the technical-specialized, ethical-political and humanistic dimensions, with the capacity to act with a sense of social responsibility and commitment to citizenship, as a promoter of the comprehensive health approach towards human beings and as an integral subject in the marketplace, is the great challenge for claiming spaces by the Nursing profession. Taking into consideration the aforementioned, there is still a way to go and challenges to face, believing in the ability of nursing professionals to contribute to the consolidation of SUS with quality, innovation and social responsibility.

REFERENCES


Received in: 06/08/2018
Required revisions: 18/08/2018
Approved in: 15/02/2019
Publicado em: 24/08/2020

Corresponding author
Ana Caroline Pereira Martins
Address: R. Armando C. Machado, 180, Alcides Rabelo Montes Claros/MG, Brazil
Zip code: 39.401-415
Email address: anacaroline3233@gmail.com
Telephone number: +55 (38) 99248-8466

Disclosure: The authors claim to have no conflict of interest.