


Teaching of the theme "humanization of care" in undergraduate nursing courses at state universities in Paraná

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ABSTRACT

Introduction: The National Curriculum Guidelines for undergraduate nursing courses frequently propose reforms in the curricula of higher education institutions whenever changes are needed to create new demands and updates relevant to quality professional training. However, it seeks to break with the mere fulfillment of professional practice to incorporate teaching focused on the real needs of society and the world of work. Enabling the training of professionals with a holistic view of user care in accordance with the National Humanization Policy. **Objective:** To analyze how the theme "Humanization of Care" is proposed in the Pedagogical Course Projects (PPC) of the Undergraduate Nursing courses of the State Universities of Paraná. **Methodology:** A documentary analysis research was carried out, with the aim of constituting a satisfactory corpus, exhausting the clues capable of providing relevant information in relation to the theme. Document analysis is a set of intellectual operations that aims at the description and representation of documents in a unified and systematic way to facilitate their retrieval extracted from the original source, allowing the location, organization and evaluation of the information contained. Finally, the collected data were organized in Excel spreadsheets separated by tabs, in order to gather the most relevant data in a concise and objective way so that the findings and results pertinent to the research objective can be later discussed. **Result:** The Document Analysis allowed the deepening of the theme of Teaching Humanization due to its characteristic of constituting a satisfactory corpus, exhausting all clues capable of providing relevant information in relation to the theme. Thus, by effectively integrating politics as a basis for teaching, an environment is created that favors the development of a professional with a more humane, ethical and integrated vision with both the needs of patients and the health team. **Conclusion:** However, in order to have professionals with knowledge about the Humanization of Care and to be able to actually provide humanized care and assistance, it is essential that during their training they have come into contact with the theme in a theoretical-practical way, and that this contact happens throughout the undergraduate course. In this sense, contributing to the development and improvement of nursing education, and promoting reflections on the insertion of Humanization in the education of future nurses in a substantial way, is justified by the fact that humanized practice contemplates the individual in a holistic way, promoting prevention, promotion, and treatment.

Keywords: Nursing Education, Humanization of Care, Professional Training.

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INTRODUCTION

The National Curriculum Guidelines (DCN) for undergraduate nursing courses (Brasil, 2001) propose reforms in the curricula of Higher Education Institutions (HEIs), these changes that, in turn, emerge for new demands and updates pertinent to a new conjuncture of quality professional training and performance.

However, it seeks to break with the mere fulfillment of professional practice to incorporate teaching focused on the real needs of society and the world of work. Considering that nursing is the profession of care, it is expected that nurses acquire contextualized technical-scientific, ethical-political, and socio-educational skills, with the perspective of meeting the health-disease-care needs of users, with emphasis on the Unified Health System (SUS) to ensure quality, comprehensiveness, and humanized care (Rangel, 2020)

In this sense, the National Humanization Policy (NHP) aims to "include differences in the management and care processes", therefore, the transformations occur collectively, encompassing new teaching-learning methods and also theoretical-practical, expanding different ways of organizing humanized care to better serve the population (Brasil, 2013). The importance of promoting the implementation of humanized care throughout the context of SUS care is highlighted, however, undergraduate nursing courses have gaps in the offer of training consistent with the PNH, and attribute such difficulties to the fragmented view of the human being in health education (Morin, 2005).

According to Freire (1970), education is reinforced in the transformation of the being, simultaneously intervening in reality and being transformed by it. Awareness and the development of critical-scientific thinking in students should be promoted, making them active participants in the process of constructing their learning, thus contributing to the formation of qualified professionals permeated by the macro vision of humanized care.

Humanization in health has been an increasingly discussed and valued topic in recent years. In a context where technology and clinical efficiency are often prioritized to the detriment of care and empathy with the user. It is essential to emphasize the importance of humanization as a fundamental factor for the quality of health care. In addition to being a user's right, humanization is a key element for building a relationship of trust between health professionals and users, favoring treatment adherence and the well-being of the individuals involved (Villela; Ely, 2022).

Thus, discussing the importance of humanization in health, as well as the main strategies and challenges for its implementation in clinical practice, are fundamental for the training of future professionals (Villela; Ely, 2022).

Thus, it is necessary for HEIs to reformulate their Pedagogical Project of the Course (PPC) to adapt to the care model consistent with the health-disease-care needs of users, in order to

contemplate the new education and public health policies, in order to train trained and updated professionals to face the challenges presented by society, with competencies and skills that go beyond theory, to provide humanized and holistic care in which the disease does not occupy the center of care, but rather meets the human needs presented (Horta, 1974).

In this context, the present article aimed to analyze how the theme Humanization of Care is proposed in the PPC of undergraduate nursing courses at state universities in Paraná and how it is developed throughout professional training.

It is understood that the understanding of these documents is one of the essential elements for the implementation of the DCN proposal and the new reality of health-care of the population, and of the health professional expected to act in the dynamics of the care context in any and all health environments. To this end, it sought to answer the following guiding question: **"How is Humanization addressed in the Curricula of the Nursing course at the State Universities of Paraná?"**.

OBJECTIVE

This study aims to analyze how the theme "Humanization of Care" is proposed in the Pedagogical Course Projects (PPC) of the Undergraduate Nursing courses of the State Universities of Paraná. The aim was to describe how the theme is presented and addressed in the disciplines of the PPCs, in addition to analyzing the potentialities and weaknesses related to the Humanization of Care, considering the competencies and skills expected of nursing students.

METHODOLOGY

A documentary analysis research was carried out, which aimed to constitute a satisfactory *corpus*, exhausting all clues capable of providing relevant information in relation to the theme (Cellard, 2008, p. 298).

According to Oliveira (2007), document analysis is a set of intellectual operations that aims at the description and representation of documents in a unified and systematic way to facilitate their recovery extracted from the original source, allowing the location, organization and evaluation of the information contained. The advantages of this method consist in the low cost and stability of the information because they are safe and reliable sources of data and because it is a technique that does not alter the environment or the subjects.

In this study, this method was chosen due to the possible authenticity of the information collected, since it is provided by the university itself, by enabling access to official documents, via formalized invitation letter and acceptance.



During the analysis of the documents to search for previously planned information, the form of visualization began to clarify findings that helped in the interpretation and location later, in the face of a screening by words and/or phrases. In order to have access to the certified documents of the universities, the PPC, first a letter was sent to the course coordinators explaining the objectives of the research, highlighting the relevance of the study with scientific support, in which authorization was requested to carry out the documentary analysis, after acceptance, the PPC in force at the IES was sent.

The investigations and data collection followed a few steps: Authorized access to the PPC of the undergraduate nursing courses of the State Universities of Paraná. In which they should be in accordance with some criteria: updated, and consistent with the creation and updating of the PNH, 2003 and 2013 respectively, and the implementation of the nursing course in universities by the year 2022, workloads and duration of the course consistent. Then, the data were collected with the support of a *previously constructed checklist* and a pilot test was carried out in a PPC that was not part of the sample, so that important findings could be evidenced, and that the possible necessary adjustments could be revealed to the researcher, meeting the objectives of the research.

The data analysis followed the method proposed by Bardin (2011) which consists of: 1. Pre-analysis Includes the hypotheses and objectives; size and directions of analysis; 2. Exploration of the material; 3. Treatment of results and interpretations - This is the synthesis and selection of results; 4. Inferences - The relationship between the objective of the research and the results obtained after analysis with a literary theoretical basis was covered and 5. Interpretation - It consists of an in-depth analysis, beyond the apparent perspective, seeking to extract as much information as possible that is camouflaged in the documents.

Finally, the collected data were organized in *Excel(R) spreadsheets* separated by tabs entitled: "name of the university", "disciplines and year of the curriculum", "application of the principles and guidelines of the PNH", "implicit and explicit contents in relation to the theoretical and practical teaching of Humanization of Care", among others, with the purpose of gathering the most relevant data in a concise and objective way to discuss the findings, and results relevant to research.

To elaborate the central question of the research, the PICo strategy was used, which is an acronym for Population or Problem, Intervention and Context of the study (Nishikawa-Pacher, 2022).



Table 1 - PiCo Strategy

COMPONENTE	DEFINIÇÃO	DESCRITORES DECS	SINÔNIMO
POPULAÇÃO (P)	GRADUAÇÃO EM ENFERMAGEM	EDUCAÇÃO EM ENFERMAGEM	ENSINO DE ENFERMAGEM FORMAÇÃO EM ENFERMAGEM
INTERVENÇÃO (I)	HUMANIZAÇÃO	HUMANIZAÇÃO DA ASSISTÊNCIA	CUIDADO HUMANIZADO
CONTEXTO (CO)	PROJETO PEDAGÓGICO DO CURSO (PPC)		

Source: The authors, 2024

RESULTS AND DISCUSSION

The Document Analysis allowed the deepening of the theme Teaching of Humanization due to its characteristic of constituting a satisfactory *corpus*, exhausting all clues capable of providing relevant information in relation to the theme, this particularity contributes to the training of nursing professionals who can deepen the knowledge of a specific theme, contributing to the humanized care of the patient.

Based on the criteria established for the study, the Pedagogical Course Projects (PPC) of six State Universities in Paraná were analyzed, since one of the institutions did not send the requested response, which was attempted twice. These criteria allowed for a detailed and systematic evaluation, identifying how each institution approaches the development of skills and competencies in line with the 2013 National Humanization Policy (NHP).

To ensure impartiality and avoid any type of identification or vision, the universities were arranged in alphabetical order, using letters (a, b, c, etc.). This ensured that the analysis was focused solely on the content of the PPC and the objectives of the research, with no external influences related to the recognition of HEIs. In the final sample, four characteristics of each University were selected, presented in the table below.

Table 2 - Categorization of Universities

UNIVERSIDADE	TOTAL DE DISCIPLINAS	EM QUANTAS DISCIPLINAS A PNH ESTÁ NAS REFERÊNCIAS	QUANTAS DISCIPLINAS ABORDAM A PNH DIRETAMENTE	QUANTAS DISCIPLINAS A PNH INDIRETAMENTE
A	30	0	0	3
B	25	0	1	9
C	64	0	1	7
D	34	0	3	9
E	34	0	1	4
F	24	0	1	5

Source: The authors, 2024

Chart 2 presents the data from the six universities (a, b, c,..) on the inclusion of the PNH in the disciplines of six universities, focusing on how the PNH theme is addressed directly or indirectly in the academic curriculum. The survey reveals how the traditional teaching model is still predominant, thus discouraging the promotion of dialogue, and the appreciation of the human being as a basis for planning and health care, making the teaching-learning processes static and not very reflective. This gap in the PNH in the references of the university disciplines analyzed reflects a lack of recognition of the importance of addressing this essential theoretical-practical content, which raises questions about this fragility and relevance to higher education (Debald, 2020).

The number of disciplines that address the PNH directly is extremely limited. University D stands out with 3 disciplines directly focused on the theme, while the other universities have, at most, a single discipline dealing explicitly with the theme. University A, for example, does not include the PNH in any of its disciplines. This scenario reinforces the idea that politics does not yet occupy a central role in the curricula, indicating that the theme is not addressed, and the humanization of care in the nursing curriculum is an approach that seeks to integrate the human, ethical and emotional dimension in the education of future health professionals.

This perspective emphasizes the importance of preparing nurses to care for users in a holistic way, considering not only the technical aspects, but also the emotional, psychological and social needs of the individuals. Comprehensive care, to value the subjective dimensions, in addition to being implicated in the health-disease-care process (Casate; Corrêa; 2012).

On the other hand, the indirect approach to the PNH is relatively more common, with significant differences between universities. University B and University D, for example, have 9 disciplines that indirectly discuss the theme, suggesting that the principles of the PNH can be

incorporated into broader discussions on humanization in health care, even if without explicit reference to the policy. Universities C and F also have a considerable number of disciplines that deal indirectly with the PNH, with 7 and 5 disciplines.

Table 3 - Transversality of the PNH by grade

UNIVERSIDADE	DURAÇÃO DO CURSO	SÉRIE DA GRADUAÇÃO COM ABORDAGEM DIRETA	DISCIPLINAS DE ABORDAGEM DIRETA	SÉRIE DA GRADUAÇÃO COM ABORDAGEM INDIRETA	DISCIPLINAS DE ABORDAGEM INDIRETA
A	5	Não aborda	Não aborda	1	Ciências sociais em saúde
		Não aborda	Não aborda	2	Enfermagem em saúde mental
		Não aborda	Não aborda	4	Práticas Supervisionadas de Alta complexidade
B	5	Não aborda	Não aborda	1	Processos saúde doença
		Não aborda	Não aborda	2	Práticas Interdisciplinares e interação ensino, serviço e comunidade II; Organização dos Serviços de Saúde e Enfermagem
		3	Saúde do adulto	Não aborda	Não aborda
		Não aborda	Não aborda	4	Saúde da criança e Família; Saúde Mental II; Enfermagem no contexto infectologia
		Não aborda	Não aborda	5	Gestão dos serviços de enfermagem e saúde na atenção básica
C	5	2	Práticas Extensionistas II	2	Semiologia e Semiotécnica; Processos de enfermagem
		Não aborda	Não aborda	3	Estudos de eventos em saúde II; Práticas supervisionadas em enfermagem
		Não aborda	Não aborda	Optativas	Carreira, empreendedorismo e mercado de trabalho em enfermagem; Tópicos Especiais em saúde do idoso.

D	4	1	Fundamentos de Enfermagem I; Práticas Integrativas em saúde I;	1	Psicologia aplicada à enfermagem;
		2	Práticas Integrativas em Saúde II	2	Fundamentos em enfermagem II; enfermagem em saúde mental; enfermagem em saúde do idoso; farmacologia aplicada a enfermagem; enfermagem em saúde da mulher
		3	Práticas Integrativas III	3	Enfermagem em saúde do adulto I; Enfermagem no cuidado ao paciente crítico;
		Não aborda	Não aborda	Optativa	Tecnologias em saúde; Cuidados Paliativos
E	5	Não aborda	Não aborda	2	Ética e bioética
		3	Cuidados de enfermagem para pacientes em situações críticas	3	Saúde da Mulher e da Criança; Saúde do Adulto e do Idoso; Enfermagem em Saúde Mental e Psiquiátrica
F	5	Não Aborda	Não aborda	1	Fundamentos de filosofia aplicados à enfermagem; Enfermagem em saúde mental; Enfermagem fundamental I;
		3	Saúde Coletiva III	3	Sociologia
		Não Aborda	Não aborda	4	Enfermagem em puericultura, criança e adolescentes saios e crianças e adolescentes hospitalizados

Source: The authors, 2024

Chart 3 presents an analysis of the transversality of the PNH in undergraduate nursing in universities, highlighting that most courses last 5 years, except for University D, which offers a 4-year course. Universities C and D stand out for introducing disciplines with a direct approach to humanization at the beginning of the course from the first and second year, however, the inclusion of the content in the disciplines alone does not ensure significant changes in the training of undergraduate students in health, since this subject may remain restricted to the disciplines of the initial years, The other universities do not present this approach in the initial phases of graduation. In



these two universities, there is an emphasis on disciplines such as extension practices and nursing fundamentals, which seek to connect theory and practice right at the beginning of training.

At Universities A and B, the focus is on disciplines with an indirect approach in the first years, such as Social Sciences in Health and Health-Disease Processes, addressed from the first year onwards. The indirect disciplines focus on topics such as mental health, nursing in high complexity, adult health, child and family health, as well as nursing service management. These data indicate that, although the theme of humanization in health care is addressed in different contexts, this policy itself is not yet a central focus in the curricula of the universities analyzed.

Teaching is still predominant and commonly structured in a fragmented way, with separate disciplines that focus on specific areas of practice, such as anatomy, pharmacology, clinical procedures, among others, do not address in depth the principles and practices of humanization and when the contents about the policy are usually approached in a superficial way, without a constant dialogue with the daily practices of care (Morin, 2005).

The absence of this transversality in the curriculum makes it difficult for future nurses to internalize the principles of the policy, as they tend to associate humanization with specific aspects of care, instead of seeing it as an inseparable part of their entire professional performance (Câmara, 2022).

This reality reveals the need for greater integration and visibility of Humanization as a fundamental part of academic training in the areas of health, involving the construction of closer, more ethical and inclusive care relationships, but this dimension is often underestimated in the teaching-learning processes and even when students are exposed to these principles during their theoretical training, many face realities in internships that do not match the ideals of humanization and health education, disconnected from professional practice rooted in mechanical practices, focused only on the disease, generating consequences in the training of professionals that do not fully correspond to the needs of society (Silva, 2021).

According to Moran (2018), for there to be this articulation between theory and practice and for the teaching and learning processes to occur in the active perspective, it is necessary that the entire educational environment and its subjects are involved and focused on this perspective, promoting an atmosphere that stimulates participation, creativity, student protagonism and the teaching of humanization in the educational process.

The DCN (Brasil, 2001) emphasizes the need for teaching to be carried out in a transversal way, since it is recommended that there be the integration of fundamental themes and values within the undergraduate curriculum, addressed in all disciplines (Brasil, 1998). According to the Brazilian Nursing Association (ABEN), the transversality of teaching must be integrated by various



knowledge, practices and values in the context of education and in the practice of nursing, so that health professionals act in a holistic and humanized way (Brasil, 2018).

Among the aspects of transversality in Nursing, a set of actions that involve the integration of scientific, technological and humanistic knowledge stands out, so that knowledge is transmitted with sensitivity and empathy. In addition, interdisciplinary training aims to train the team to work together with other health professionals. Humanization and ethics are essential to provide dignified, respectful, and holistic care to the patient. Comprehensive health care seeks to promote health and prevent diseases, while continuing education and continuing education are essential to ensure that professionals are always up to date, practicing actions based on evidence, ethical and human values, with the aim of better serving the community (Lydines, 2019).

In view of the above, in order to train future health professionals capable of meeting the demands of society, it is essential that the student is prepared in a comprehensive and transversal way from the beginning, with topics addressed in various disciplines. The PNH provides a broader view of health care, improves the professional-patient relationship, values teamwork, promotes quality of life in the workplace, develops socio-emotional skills, and encourages more inclusive and equitable care, among other benefits (Lydines, 2019).

Thus, by effectively integrating politics as a basis for teaching, an environment is created that favors the development of a professional with a more humane, ethical and integrated vision with both the needs of patients and the health team.

FINAL CONSIDERATIONS

The assumptions are that the Humanization of Care is a topic of extreme relevance in the health area and has several justifications to be studied. Among them, it contributes directly to the user's well-being, as it places them at the center of the health process, considering their needs, desires and particularities. To this end, it seeks to provide more empathetic, respectful and welcoming care, thus contributing to the improvement of their experience in the health system.

By understanding and applying the principles of humanization, future health professionals are able to establish more effective communication, develop relationships of trust with users, provide individualized care, and allow a comprehensive approach, considering not only the physical, but also the emotional, social, and spiritual aspects. The humanization of care is also based on ethical principles and respect for human dignity. Embrace and value the autonomy and participation of users in decisions related to their health, in addition to recognizing the importance of respect for diversity, privacy and confidentiality.

However, the humanization of care is not limited only to users, but also extends to health professionals, with regard to the promotion of mental health, since it stimulates healthy interpersonal



relationships, reduces work-related stress and promotes well-being in the care environment. In view of the above, it is noteworthy that the Humanization of Care has been associated with the best impacts on health outcomes, including greater user satisfaction, treatment adherence, improved quality of life, and even reduced complications and readmissions.

Thus, it is possible to identify and implement practices that promote better health outcomes for users. In addition, the Humanization of Care also has the potential to transform the health system as a whole, promoting a more user-centered culture, with greater participation, providing greater transparency and quality in the services provided.

However, in order to have professionals with knowledge about the Humanization of Care and to be able to actually provide humanized care and assistance, it is essential that during their training they have come into contact with the theme in a theoretical-practical way, and that this contact happens throughout the undergraduate course.

In this sense, contributing to the development and improvement of nursing education, and promoting reflections on the insertion of Humanization in the education of future nurses in a substantial way, is justified by the fact that humanized practice contemplates the individual in a holistic way, promoting prevention, promotion, treatment, thus ensuring integrality and individuality in accordance with the PNH (Brazil, 2013). Thus, this research reaffirms the importance of inserting this policy in the undergraduate nursing curricula, in order to offer teaching that is related to the needs presented by society, and to train qualified professionals to provide humanized care in accordance with what is recommended by the guiding principles of the Unified Health System (SUS).



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