Hospital nursing and humanization: knowledge of undergraduate nursing student

Enfermagem e humanização hospitalar: conhecimento do graduando de Enfermagem

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Abstract

Objective – To identify the knowledge of undergraduate nursing students and the relationship between theory and practice in the training field hospital in relation to humanized care. Methods – It is a quantitative research approach, conducted with nursing students in the 8th semester of an institution of higher education located in Campinas-SP. Humanized Caring implies, by those who care, to understand the meaning of life, the ability to perceive oneself and the others as a human beings. This attitude represents a demonstration of concern, respect, attention, affection. This understanding about humanized care may provide subsidies for the nurses in the training process to develop the practice in a humane way. To collect data we used a questionnaire with closed questions and it was subjected to analysis using descriptive statistics. Results – In this study, all students (100%) recognize the importance of humane care, (52%) consider the contents of their training good, (74%) did not consider technological advancement a negative factor in the development of humanized assistance, (54%) consider the low pay an influential factor in the implementation of humanized care, (62%) had to develop the technical security with the knowledge gained in the classroom. Conclusions – It was found that most have knowledge of the subject and they recognize the space for the learning of humanized care in their training in addition to valuing this aspect regarding futures professional commitments.

Descriptors: Nursing care; Humanization of assistance; Students, nursing

Resumo

Objetivo – Identificar o conhecimento do graduando de enfermagem e como é estabelecida a relação teórico-prática em campo de estágio hospitalar em relação ao cuidado humanizado. Métodos – Trata-se de uma pesquisa de abordagem qualitativa, realizada com acadêmicos de enfermagem do 8º semestre de uma instituição de ensino superior localizada no município de Campinas-SP. Humanized Caring implies, by those who care, to understand the meaning of life, the ability to perceive oneself and the others as a human beings. This attitude represents a demonstration of concern, respect, attention, affection. This understanding about humanized care may provide subsidies for the nurses in the training process to develop the practice in a humane way. To collect data we used a questionnaire with closed questions and it was subjected to analysis using descriptive statistics. Resultados – Neste estudo, todos os alunos (100%) reconhecem a importância do cuidado humanizado, (52%) considera o conteúdo em sua formação boa, (74%) não considera o avanço tecnológico um fator negativo no desenvolvimento da assistência humanizada, (54%) considera a baixa remuneração um fator influente na execução do cuidado humanizado, (62%) tiveram segurança para desenvolver a técnica com o conhecimento adquirido em sala de aula. Conclusão – Constatou-se que a maioria possui conhecimento do tema abordado e reconhecem o espaço para o aprendizado do cuidado humanizado em sua formação além de valorizar esse aspecto em relação futuros compromissos profissional.

Descritores: Cuidados de enfermagem; Humanização da assistência; Estudantes de Enfermagem

Introduction

This study aims to identify the knowledge of undergraduate nursing student and the relationship between theory and practice in the training field hospital in relation to humanized care.

Therefore, before speaking of humanization is necessary to make a reflection about the subject, the true meaning of caring, of humanization and nursing before such practices. This understanding about human care can provide subsidies for the nurses in the training process developing the practice in a humane way.

In Portuguese, the care verb means attention, care, devotion, zeal. However, care is more than a moment of attention. It is indeed an attitude of concern, occupation, accountability and effective involvement with the patient. Caring requires careful and meet the needs of that one who need, with a view to their welfare as a whole, is also treat others well, that includes having, affection, respect, to pay attention for the one who needs.

In human nature, caring is attitude more concrete of human being, which is a primary characteristic. In the absence of care, the human being loses his structured, wither, loses meaning and die. During his life, if the man in his attitudes doesn’t improve care, ends up detracting from himself and what is around him.

Caring involves a truly interactive action of human beings, that is, a form of demonstration, relationship to other. So, analyzing the elements of human care as love, affection and respect, we note that in the human attitude, the way to care independent of the relationship with the patient.

As nursing aims, is one of the professions in the health care whose core is the human being caring. Therefore, dealing with patients requires of health professionals especially nurses, skills to relate to them, to welcome him humanely, to understand their fears, identifying with their pain, offering your safety, observe and allow to be observed, have active listening, with no judgmental and prejudice. Compassion in the full sense of the word, com-passion. We know that the person who is accepts well has a greater chance for cure and / or better quality of survival. This culture change will be achieved only by a constant search to capacitate all health professionals with such a look humane. This look will only happen when we understand ourselves and our limits.
Nursing as a discipline in constant pursuit of improving care and understanding the human being as a whole being, has as its function care and provide better balance in the spheres of human life, thus reaching the excellence of care that is provided. In the case of a patient who is hospitalized, often private (change) to perform the occupations that were made in their daily lives by illness. In this sense, the nursing aims to make the hospital stay as painless as possible, valuing and utilizing the potential of each patient who is in a hospital, in other words the nurse has to take into account all factors that can influence that one which is observed.

The term humanization is act or action of humanizing which means to make human. In practice on care humanized nursing, think of a process where staff must take an attitude of respect for him who is being cared for, considering their essence, taking into account the values and how the other likes to be care, this includes respect, individuality. Humanization is a right for everyone, regardless of the environment in which the patient is. Everything that can be found in a hospital is involved in this process, the technology, work overload, the physical wear, emotional, and low pay are also influential factors regarding the proper performance of the professional with the humanized care. These factors have direct and immediate implications for the nursing staff, thereby creating a vicious circle where the nurse does not take care of the patient as well as it should and in turn he does not take care of himself because he cannot extricate himself from their problems. As a result, turns out to be reflected in the attention to patients who are at the mercy of their care.

At the hospital in addition to a modern structure and suitable equipment, is also essential that the purpose of care is aimed at meeting the needs of users and staff that serve them. Thus, compared to the needs of users and staff will develop a structure humanized that requires change in values, behaviors, concepts and practices.

The academic formation has an important role in training future professionals, it is essential that stimulate the development of sensitivity to know the reality of a patient and also of the hospital, communication, listening to their complaints and find ways to facilitate their acceptance and understanding of disease.

We know that nursing is a profession focused primarily for the care. So, during graduation the students learn the concept of caring and when they develop their activities practices, they have the opportunity to put those concepts into practice, and thus they will be prepared for his professional life.

Based on this, I thought it was important to make research about the level of knowledge and thought of today’s undergraduates, future nurses professionals, for when they are caring the patient, they do not appreciate only the technique but performing the technique with humanization.

In this aspect this study brings the problem: The nursing students in hospital training field are providing humanized care?

Since the hypothesis is that during the stage hospital the nursing students in addition to are interested in acquiring the technical and scientific knowledge, also provide the care of a humane way.

**General purpose**

Identify the knowledge of undergraduate nursing student and the relationship between theory and practice in training field hospital, in relation to humanized care.

**Specific objectives**

- Identify the knowledge of undergraduate nursing student about hospital humanization.
- Identify the relevance of the theme for the nursing students.
- Indicate situations in the nursing curriculum to facilitate the relationship of hospital humanization.

**Methods**

**Type of research**

This study deals a research field, of qualitative type, of non-experimental nature, descriptive, retrospective and transversal.

**Local of study**

It was conducted in a private institution of higher learning, located in Campinas-SP. It has undergraduate courses in the morning period, afternoon and evening, spreading knowledge, as well, through activities of research, extension and post-graduate education to 15,000 students.

**Population**

The population of this study consisted of students of the 8th semester of undergraduate nursing, enrolled in the morning.

**Sample**

The sample used for this study consisted of 50 students from the undergraduate program in nursing who consented to participate in the survey voluntarily.

**Criteria of inclusion and exclusion of subjects**

Criteria of inclusion:
- The research subjects must be of the student category.
- The selected student must sign the Statement of Informed Consent.

Criteria of exclusion:
- Not belong to the student category.
- Students who perchance refuse to participate voluntarily or are absent during data collection.

**Instrument for data collection**

For data collection, was used a questionnaire containing 12 closed questions (Chart 1).

**Description of data collection**

After approval of the project at the Ethics and Research of UNIP, under protocol n.º 381/11 was initiated data collection by the researcher from August 2011 to September 2011. All participants were instructed about the study objectives and the correct way of completing the questionnaire and the anticipated interest in participating in this research.
Part I – Socio-demographic profile

This questionnaire is aimed at the undergraduate nursing students, check only one answer for each question:

1. Gender:
   A. (  ) Female
   B. (  ) Male

2. Age:
   A. (  ) 18 to 26 years old
   B. (  ) 27 to 34 years old
   C. (  ) 35 to 42 years old
   D. (  ) 43 to 50 years old
   E. (  ) 50 years old or more

3. Marital status:
   A. (  ) Single
   B. (  ) Married
   C. (  ) Separated
   D. (  ) Divorced
   E. (  ) Widower
   F. (  ) Others

4. Level of schooling:
   A. (  ) Incomplete Elementary School
   B. (  ) Complete Elementary School
   C. (  ) Incomplete High School
   D. (  ) Complete High School
   E. (  ) Incomplete Higher Education
   F. (  ) Complete Higher Education

Part II – Specific component

3. How do you evaluate the contents of humanization in the training process:
   A. (  ) Bad
   B. (  ) Regular
   C. (  ) Good
   D. (  ) Optimum
   E. (  ) Sufficient
   F. (  ) Insufficient

4. In the staging field, when you provided the care, did you feel safe to develop techniques with the knowledge gained in the classroom?
   A. (  ) Yes
   B. (  ) No

5. What is necessary so that we can assist the patient by a humanized way?
   A. (  ) Affection
   B. (  ) Care
   C. (  ) Attention
   D. (  ) Respect
   E. (  ) Good staff relations
   F. (  ) Advanced Technology
   G. (  ) None of above

6. The health professionals that you lived in the stage field served as a model to learn?
   A. (  ) Yes
   B. (  ) No
   C. (  ) There were exceptions

7. Do you consider the technological advances a negative factor in the development of assist humanized?
   A. (  ) Yes
   B. (  ) No

8. Do you consider low pay an influential factor in the implementation of humanized care?
   A. (  ) Yes
   B. (  ) No

Adapted from Corbani et al.° (2009), Fernandes and Freitas°° (2007)
freely. For the participants were provided the term of consent and signed as required by Resolution 196/96.

**Description and analysis of data**

Subsequently, data were compiled and tabulated in Excel spreadsheet according to the sequence of questions in which it was subjected to simple percentage calculation for the quantification of variables and other statistical analysis.

**Ethics in research with humans**

Data that the study subjects are human beings, we obey the provisions of resolution 196/96 of the Ministry of Health by submitting such analysis and the thought to trial of the Ethics and Research of the Universidade Paulista of Campinas which is recognized by the National Council for Research with Human, which is displayed by sending the presidency along with the cover for this standard.

The request for data collection will be responsible for the institution and field of research, as well as authorization for disclosure of data.

Participants were provided the term of consent.

**Results and Discussion**

This study consisted of a sample of 50 students attending the 8th semester of undergraduate nursing, and all of them enrolled in the daytime. The sociodemographic characteristics described in Table 1 allowed the characterization of the participants of this study in relation to gender, age, marital status and schooling.

**Table 1. Characteristics of distribution of the study sample. Campinas-SP, 2011**

<table>
<thead>
<tr>
<th>Variable</th>
<th>Nº</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>5</td>
<td>90</td>
</tr>
<tr>
<td>Female</td>
<td>45</td>
<td>10</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 to 26 years old</td>
<td>21</td>
<td>42</td>
</tr>
<tr>
<td>27 to 34 years old</td>
<td>21</td>
<td>42</td>
</tr>
<tr>
<td>35 to 42 years old</td>
<td>6</td>
<td>12</td>
</tr>
<tr>
<td>43 to 50 years old</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>51 years old or more</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>28</td>
<td>56</td>
</tr>
<tr>
<td>Married</td>
<td>20</td>
<td>40</td>
</tr>
<tr>
<td>Separated</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Divorced</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Widower</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Others</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Schooling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Incomplete Elementary School</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Complete Elementary School</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Incomplete High School</td>
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<tr>
<td>Complete High School</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Incomplete Higher Education</td>
<td>48</td>
<td>96</td>
</tr>
<tr>
<td>Complete Higher Education</td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

The prevalence of females in nursing profession is shared by other authors, reflecting this historical characteristic of nursing where the profession of care is exercised exclusively by women due to the fact that the assignment of the great women have provided care for the education of children, housework and also conciliation with their working.

It was found four age groups among respondents, with the highest prevalence of students between 18 and 26 (42%) 21 students and 27 to 34 years, 21 students (42%), a result that demonstrates the presence of young people entering the fact that the nursing program may be related to job offers and offer possibilities to enter quickly into the labor market.

Regarding marital status, it was observed that 28 students (56%) were single, 20 students (40%) married and 2 (4%) were divorced. Already on the level of schooling, one can observe that only two (4%) of the students were already graduated on another graduation course.

It was found on the response obtained in Graph 1 where the question asked about the importance of the theme, all 50 students (100%) consider the humanization issue important.

The nursing student when is aware of this importance, learn more clearly the nuances of caring, and acquire important features to cope with difficulties, specifically, the sensitivity to recognize the reality of the patient, listening to their complaints and find ways to facilitate their acceptance, communication and understanding of the disease, becoming a mature professional and trained in humanized care.

On the issue level of knowledge on the subject humanization shown in Graph 2, we observed that 34 students (68%) rated their level of knowledge good, 10 students
(20%) rated as excellent and only 6 students (12%) rated their level of knowledge regularly.

The undergraduate nursing course requires attention and interest from their students in the content being taught by the teacher in order to have a good understanding of the study, which will be of great value in the training field and in the future work as professional nursing.

In the training field, understand our actions can lead us to realize that nursing is not just a set of techniques, but a creative process that involves a lot of sensitivity. Caring, learning and teaching go beyond the theoretical foundations, demanding moments that, only the contact with the new may allow, which is the opportunity for exchange between people who care and who receive care, as well as those who teach and who want to take care. This humanizing experience lead us to understand the true meaning of caring as well as provide students really grow and mature.

The evaluation of nursing students on the content of humanization in the training process are shown in Graph 3.

When students responded on how to evaluate the content of humanization in the training process 26 (52%) stated that the content is good, 14 (28%) responded that regular, 7 (14%) responded that enough, so 2 (4 %) of students responded that optimum and only 1 student (2%) responded that the content is insufficient.

Currently, the humanization subject is applied to those situations in which not only enhance the caring for their scientific technical dimensions, also recognize the rights of the patient having a good care respecting their individuality and dignity.

It is extremely important that students receive information about humanized care, working their perceptions, experiences and also provide them with opportunities for careful observation of behaviors in different places so they can compare the different types of care and absorbing only what it will bring good to their profession and their personal development.

According to the safety of the students to develop the techniques with the knowledge acquired were distributed responses of the students, according to Graph 4.

Analyzing the data in Graph 4, we observed that 21 (62%) of students surveyed felt safe to develop the technique with the knowledge gained in the classroom and 19 (38%) responded that they didn't feel safe.

On the stages in the hospital, students often face complex situations of human suffering and conflicts revealing of our weakness and vulnerability, these situations along with the fact of being assessed by their teacher ends up harming the performance of the student who is showing that there has been taught. But when confronted with the suffering of the sick person and that's depending on
their care, is awakened to its own human dimension, stimulating the emergence of sensitivity that is needed to watch what she ends up leaving aside the nervousness due to the environment and the situation leaving the feeling of being human and compassionate with others21-22.

With regard to the question about what is needed so that we can assist the patient on a humanized way is demonstrated in Graph 5. Students gave their opinions by answering more than one response item which were: affect 4 (8%), care 1 (2%), attention 13 (26%), respect 28 (76%), good staff relations 12 (24%) and advanced technology 2 (4%). According to the undergraduates, the majority has agreed to contribute to attention and respect for that relationships of care can occur.

The sensitivity to perceive the other, touch, look and feel makes it easier to learn to care for and bring welfare to the person cared for. Students, when they recognize, they learn the important features to face the difficulties of a hospital environment and become mature and trained professionals to care for a humane way23.

In Graph 6 shows that 37 (74%) of students responded there were exceptions on relation about if the professionals who worked with them in the stage field served as a model to learn, 7 students (14%) answered yes, that professionals served as a model, however, 7 students (14%) answered no.

The observation of other professionals providing care indicates that these experiences serve as a model. The student picks up their formation process by models or examples of professionals who can follow it. These experiences acquired during the course and during the practice stage, contributing to the growth of these students and to mature while they add something in their personal luggage. Examples of other professionals and even teachers encourage to learn that by being aware of the importance of humane care and provide this type of care, encourage students to follow this path24.

Through of Graph 7, it note that 37 (74%) of students surveyed do not consider technological advancement a negative factor in the development of an assist humanized, however, 13 (26%) of respondents consider to be rather an influential factor.

Humanization is an essential aspect in the process of recovery of patients. It is noteworthy that the presence of technology is an important factor for the treatment of diseases and maintaining health of the patient, yet it is hard to ignore that as the service delivery took place in the hospital, there was a likely overlap of technology relation to practice in a humane way where the professional is in turn the removal of the professional is distant by the use of technology8.

It is important to note that technological advances in health care is a great achievement, but it would be better to link this technology to a service focused on the patient where the nurse prioritize being with humans, preserving it singling out of hardship and practicing assistance humanized, in order to achieve more satisfactory results8,11.

In Graph 8, was made a hypothetical question to the undergraduates about their future role as professional nurses in relation to low pay and it was observed that 27 (54%) of respondents believe that the low pay may interfere with the humanized care, but 23 (46%) of students responded that low pay is not an influential factor.

Low pay is often a risk to assistance humanized, the worker confronts his salary with their tasks done and ends up showing just impregnate the main focus of activities and responsibilities that is precisely the assistance25.

Some studies report that after analyzing the perception of nursing staff about what is to have quality of life at work, concluded that the remuneration and working conditions is a factor considered to ensure personal satisfaction25-26.

Conclusion

This study allowed us to identify the knowledge of the student nurses about hospital humanization. It was found in front of responses that the majority has knowledge of the subject and recognize the space for the learning of humanized care in their training in addition to valuing this aspect regarding futures professionals commitments. Another thing to point out, most of students responded feel safe to develop the techniques in the training field with the knowledge gained in the classroom, also responded that the professionals who lived in the training field served as a model of learning. However, it is noteworthy the responses that indicate that the low pay is an influential factor in the implementation of care humani-
zed and the way to solve this issue would be the investment of educational development in the training process aimed at providing training these future professionals, thus investing in their training can actually strengthen ideas and also create alternatives to overcome the frustrations they will encounter in the workplace.

References


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Recibido em 18 de novembro de 2011
Aceito em 29 de junho de 2012