ABSTRACT
Objective: to reflect on the critical thought to the importance of building new knowledge in nursing for the quality of education, to improve work practices in nursing, favored by changes in the health education foundation. Method: a descriptive study, reflective type from the publications analysis in the databases PubMed, LILACS and MEDLINE and SciELO library. Results: the professionals will be better prepared to face the competitive labor market, which is always in constant transformation and restructuring, because of social, cultural and economic influences. Conclusion: the new curriculum proposed in nursing education in Brazil are presented, aiming to tailor the profile of nurses in innovative training to have professionals able to act in the health scenario, considering the constitutional and citizenship principles to human being. Descriptors: Nursing; Nursing Education; Educational Evaluation.

RESUMO
Objetivo: refletir sobre o pensamento crítico para a importância da construção de novos saberes em Enfermagem para a qualidade do ensino, em prol da práxis do trabalho em enfermagem, favorecidos pelas mudanças das bases da educação em saúde. Método: estudo descritivo, tipo reflexivo, a partir da análise de publicações nas bases de dados PubMed, LILACS e MEDLINE e na biblioteca SciELO. Resultados: os profissionais estarão mais preparados para o enfrentamento competitivo do mercado de trabalho, que está sempre em constante transformação e reestruturação, em decorrência das influências sociais, culturais e econômicas. Conclusão: são apresentadas as novas propostas curriculares no ensino de Enfermagem no Brasil, que visam a adequar o perfil do enfermeiro em formação inovadora a fim de lançar profissionais aptos a atuarem no cenário de saúde, considerando os princípios constitucionais e de cidadania em respeito ao ser humano. Descriptors: Enfermagem; Educação em Enfermagem; Avaliação Educacional.
INTRODUCTION

The reform of the health sector implemented in the 1990s had changes in public and private health services. In the context of public services through the consolidation of the Unified Health System (SUS), it aims to provide, through the new policy, a quality care service to the population, while the private sector conquer space in health care due to the weak public service. The need for qualified and competent professionals in nursing practice to meet institutional demand is what both have in common.

Historically, nursing training schools directed education according to the needs and demands of the market, making adjustments to meet this demand. Thus, in a reality with Taylor dominant form in the market, represented by the actions of the teachers, due to changes resistance posture. Little is reflected on the walk from the higher education teaching in vocational training courses, so teaching was conducted in technicalities and authoritative manner, fragmenting knowledge, distancing the doing, imposing a limitation between thinking and doing.1

Another important aspect to highlight is the lack of teachers on the historical influences on the new laws that have been built and in the health system working, creating an even greater gap between theory and practice reality.2 In the face of new social concepts and the transposition of old paradigms coming from the scientific and technical developments, the professions only remain through the ages by the adaptations of changes, thus redefining the role of the professional in time and space being experienced.3

The first step in minimizing the impact on the profession is to accept the fact that changes are happening and imposing throughout history, and second, it is necessary that professionals keep up to date and alert about these changes in the educational reality to be able to adapt to the new reality in health.

OBJECTIVE

- To reflect on the critical thinking of the importance of building new knowledge in nursing for the quality of education to improve work practice in nursing, favored by changes in health education foundation.

METHOD

Descriptive study of reflective type. For the elaboration, it was opted for reading scientific articles found through electronic search in databases of US National Library of Medicine National Institutes of Health (Medline), Latin American and Caribbean Health Sciences (Lilacs) and Medical Literature Analysis and Retrieval System Online (Medline), and the Scientific Electronic Library Online (SciELO).

It is a review of the literature related to the theme of education in nursing and the theoretical and methodological approaches to teaching. The extensive and exhaustive study enabled the creation of three guiding points for reflection: the pedagogical concepts in nursing education, the educational system and the construction of nurses’ skills and theoretical and methodological approach to the construction of knowledge in nursing.

REFLEXIVE ANALYSIS

Diamond. The pedagogical concepts in nursing education

Traditional teaching is not following the constant changes that occur over time and is impractical to maintain the traditional manner, since they are not meeting the needs of today’s world. These changes extend the classroom to the hospital environment, leading to health professionals training prepared to face the new situations that arise in this version of reality, influenced by social, political and cultural issues.

The evolution of the Brazilian historical and social context has contributed to the changes in the production of nursing knowledge and influencing constant changes in the curricula of undergraduate and pedagogical proposals, consequently transforming the profile and training of nursing professionals.4

It should be noted that following the historic transition with the necessary social, cultural, political and economic repercussions, liberating education must be seek, where the concepts are not impost nor rigid, and must be built to the consolidation and incorporation of knowledge.

To address the many challenges posed by contemporary influencing health institutions related to scientific and technological modernization and innovative knowledge demands, it becomes necessary pedagogical restructuring of undergraduate nursing curricula to ensure professional training that is capable of learning to learn, learning to know, learning to do, and learn to live.
 Together to learn to be. Thus, promoting the development of management and care skills, autonomy and discernment for completeness and promoting the health of individuals. 5-7

Despite the progress, there is a deep immersion in institutionalized and autocratic concepts. Progress is not only linked to technological offer, it must dare, innovate, extrapolate and use contemporary knowledge, including technology, to break with the paradigms set by the dominant capitalism.

The challenges that education in nursing face to achieve quality in education range from the classroom and the laboratory to the practices carried out in health institutions, as these institutions have conservative and fragmented postures care, seeing the client yet as a profit object. Also, technology is another factor that has not helped to advance the quality of education, for making this fragmented, standardized and objectivist procedures, making the subjectivity of the client practically zero. 8

The elaboration and enactment of the new Law of Directives and Bases (LDB) for education was an important step to promote a critical and reflective view of health professionals, it is important to enable media to practice the proposed. 9

The LDB, directed to undergraduate courses in nursing have a more humanistic perspective. Thus, it is expected that the educational institutions are involved with the maximum academic qualification and social commitment to overcoming the fragmentation of knowledge. 4

In the National Curriculum Guidelines for Nursing (DCN/ENF), the nurse profile is shaped into a general, technical, scientific and humanist professional, who has critical and reflective capacity and prepared to act with ethics at any level of healthcare. Also, these guidelines define the training of nurses aiming to shape a professional with skills and abilities to work in healthcare. 10-11

Through the above, it is possible to note that the commitment and responsibility of higher education institutions (IES) is clear for the formation of competent, critical and reflective nursing professionals. Besides contributing to the formation of humanized citizens, it able to act not only in health but also in the process of transformation of society. 12

It is necessary to approximate the curriculum proposals of the health professional practice, and enable a convergence of ideas and terminate the health of citizens as a single goal.

Although the curricula of undergraduate programs in nursing are directed to all the nursing services, it is observed that the professionals are separated from criticism and reflection on doing. This is because these professionals are unrelated to this type of practice in working life, often caused by the proper context of the situation to which they belong. 13

The challenges for an effective nursing education and by the recommended curriculum guidelines must be overcome. This requires investments in education projects teaching for training of nursing professionals by IES. For this, it is fundamental to identify gaps and formulate their goals, involving teachers, students and institutions, to qualify the teaching and make it able to produce human professional, critical and reflective, able to promote the health of the population with quality and competence.

**The educational system and the construction of nurses’ skills**

The construction of the management and care skills of nurses and their association is indispensable for the positive course of the management of assistance.

Addressing competence becomes relevant to all instances involved in the training process and can be understood as “the ability to act effectively in a certain type of situation, supported by knowledge, but not limited to them” 14 15

In this sense, skill consists of educational background and professional experience of the individual. It also includes elements of social learning and communication that are generated by learning, training and the ratings system. Thus, skill can be seen in practical activity, that is, the way the individual faces certain professional status and competence assessment can only course of practice activities. 15 In this way, it is stated that the educational development based on skills proposes the use of the curriculum derived from the analysis of the current profile or future students. 16

It is also highlighted that building skills is essential for the formation of professional graduates to develop critical and reflective attitude expected from the construction of professional knowledge through the educational learning.

Since the 80s, a series of events such as the construction of the Unified Health System (SUS), the implementation of the new LDB of Education and socioeconomic transformations are controlling over the current pedagogical
Building knowledge in nursing: a reflective approach to the construction of knowledge in nursing

The fragmentation of care reflects the fragmentation of knowledge, but the pursuit of breaking molded and imposed paradigms by history is alive in contemporary institutions seeking a free and innovative practice.

Historically, the education of health professionals is based on criteria that include the emphasis on biological aspects, the fragmentation of knowledge, strengthening the dichotomy between theory and practice and disregards the needs of the Unified Health System (SUS). Similarly, the traditional teaching and learning methods are still widely used in the training of health professionals. These education models stand out from the transfer of knowledge by the teacher to the student, the overvaluation of technical training and dissociation between theoretical knowledge received passively by the student and the social context in which it appears.  

The reality is modified by the times, schools have new ways to spread knowledge, although the mold of traditional education, marked by the seat in passive portfolios and concepts, the organization of health care, training and professional practice. In 1949, the nursing education was institutionalized by Law 775/49 and since then, it has been changing over time. In the first National Seminar on Guidelines for Education in Nursing in Brazil (SENADEn) in 1994, the proposal to change the current curriculum and adaptation of the new guidelines were emerged, stating that “...Education should be of a critical and reflective generalist professional... without early specialization, considering the biological and human sciences content on the thinking/doing of the nurse”. However, this new minimum curriculum created and regulated when implemented in 1994, continued reproducing the theory-dichotomy practice, the adoption of traditional teaching practices and student-centered biomedical model.

In this way, it is clear the route traveled for a viable curriculum change for the formation of health professional who meets the human being in its entirety, but we must also consider the gap between institutionalized theory and practice.

Concerning the teaching of nursing, it is observed that since the beginning of modern nursing in Brazil, there was the integration of theory with practice. In Brazil, there is no regulation for them to form higher-level teachers. However, there is a legal duty that universities need to have at least 30% of teachers, certificated in post-graduate studies. Thus, in 1972 it was created the School of Nursing Anna Nery/Federal University of Rio de Janeiro (UFRJ) the first master’s course in Brazil, continuing this process of change in nursing education. Later, in the 80s, the Ph.D. course at the same institution was implemented.

Thus, the LDB of National Education (LDBEN/1996) appears to guide educational institutions in the development of educational projects, offering philosophical, policies and methodologies foundations, proposing that graduates are critical, reflective, dynamic and active professionals on the demands of the labor market. This competency-based education emerges as a new concept for the qualification.

The basis of education for the training of health professionals established over the years aims to clear assistance improvements and the legal foundations enable a closer relationship between professionals and people creating a more democratic environment.

The process of change and restructuring of the health sector provided transformations in

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The basis of education for the training of health professionals established over the years aims to clear assistance improvements and the legal foundations enable a closer relationship between professionals and people creating a more democratic environment.

The process of change and restructuring of the health sector provided transformations in
methodologies is still a registered trademark and strong brand in the context of Brazilian education.

It is clear to emphasize that nursing is based as an ancient human exercise, although considered as a young profession and expressing as a professional activity, has been establishing and developing from the construction and consolidation of their knowledge, as using research as an instrument of theoretical and practical knowledge, as a challenge to change. Thus, nursing has been consolidated as science, art and profession and to this end the research has been to build a bridge input of knowledge.21-22

The nursing knowledge has developed over the last 30 years by using methodologies based on research experience and is characterized as a widespread and systematic knowledge base for practice, a scientific basis.

Regarding the construction of knowledge of health professionals, especially nurses, for research and the production of knowledge, starting from the philosophical point of view, the subjects of learning are human beings who are preparing, first of all, for training critical awareness face to the provision of nursing care to patients, which are also human and they need a holistic look for the completeness of the care provided.23

In this tangle of ideas, practices, scientific testing is necessary to focus on the primary object of nursing work, the human being, and thus meeting their needs, from the construction of knowledge and not over it. In this sense, the theories of nursing, which are designed to serve as a theoretical/methodological/practical nurses have emerged as a contribution to the formation of a relatively solid knowledge base, which organizes the phenomenal world of nursing. Being considered as fundamental epistemological contribution to the construction of knowledge and professional practice has allowed and aided in the triad development theory, research and practice in the area.24-25

The need to know the nursing education brings out the studies in the area some views that include nurses as reflective professional. Moreover, it is evident that the reflective nursing action is seen as a significant and defining element of appropriate responses to work scenarios in continuous change. Thus, the professional is not measured only by the systematic action of their profession, but essentially he can think, redo and adapt his practice, since the formation of professional skills is one of the most intense perceptions of education.26

The changes in the educational system are needed to build the profile of a young professional, active and reflective with conditions of work in the contemporary model of healthcare. Besides the inclusion of this new model in the Brazilian reality is more challenging, it is slowly being incorporated, since only professional nurses acquire skills and abilities to influence and transform health care reality, to improve quality in patients’ service.

**CONCLUSION**

On this context, it can be seen the planning needs in undergraduate curricula for the construction of new knowledge in nursing to meet the paradigms that emerge in the labor market in response to people’s aspirations, which require and have their needs presented in various levels of health care.

The reflections in this sense, suggest alternative educational proposals, current and daring, suppressing the desires of the population to transform the health care system, transposing the barriers imposed by traditional and reductionist system of classrooms, leading to the construction of knowing grounded and wrapped in the population’s needs.

The critical and reflective professional can identify the needs of human beings in their entirety and from recognition, enabling actions to change the reality and promote the quality of care for humane care, through humanized, ethical and valuable actions. Thus, the formation of the reflective professional leads to reflective practice, a key element called praxis, which enables the transformation of health.

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