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History of Nursing Education and the Contemporary Trends

Lucila Cárdenas Becerril¹

¹ **Universidad Autónoma del Estado de México, Facultad de Enfermería y Obstetricia, Profesora-investigadora, Toluca, México. Doctora en Educación. Miembro del Sistema Nacional de Investigadores (SNI) nivel I. Integrante del cuerpo académico Cuidado Profesional de Enfermería. Coordinadora de la Red Mexicana de Historia de Enfermería, “Lic. María Suárez Vázquez”, A.C.**

In Latin America, the first nursing schools emerged in the last decades of the 19th century, propelled by medical professionals, English and American nurses, or those from Catholic or Protestant institutions, often founded near hospitals, with the support of the Rockefeller Foundation or the Pan American Health Organization (PAHO). Its emergence was the result of the need to meet the demands of patient care. The foundation period coincides with that of some Latin American countries, and at the beginning of the 20th century the reforms of Florence Nightingale were brought to America.

In the first place, the nursing education was associated with hospitals, since the creation of nursing schools was based on the needs of patient care in a hospital institution, and then because the school did not have a physical location for that purpose, nor did it have the necessary academic and administrative conditions. From the moment the students were accepted, they would go to the hospital every day where they would observe what the people who attended the patients did. Usually they were nursing assistants who had been empowered unexpectedly, or religious sisters who continued their work to help the sick and needy people. In addition to observing the procedures, the students used to have some classes. Although there were no formal academic programs, they learned about anatomy, physiology and hygiene, and dressings; the directors and professors were doctors, and taught them according to their concern and mastery of the medical field. The educational focus has become biologicist, individual and non-historical; which means that the conception of health was focused on the cure of diseases, that is, physical or bodily pain, unrelated to the environment and the family and social heritage of the subject in question. Under this view, the health care was medicalized and, under these conditions, the role of the nurse began to be restricted only to the support of the physician in their curative actions.

It is considered that the 19th century witnessed the birth of modern nursing through the work of Florence Nightingale, who contributed to the technical-administrative bases of Nursing, creating a theoretical model of care. In this context, nursing emerges as a product of the need for someone to take care of the sick and helpless people, after the doctor makes the diagnosis and treats the patient. As a field of knowledge, it was delimited in this way, given that medicine and doctors were certain that their competence scope was not care; but, rather, heal. This action generated some characteristics that were clarified or fulfilled during almost a century. First, the nurses' activities generated a model of empirical-practical care, that is, their actions were based primarily on the apprentice method, they

answered the 'how' and on a few occasions the 'why' of such activity. Along with this, what they learned was part of the prevailing biological medicine: achieve primacy of the body over the psychological or spiritual. It is worth remembering that both the method of teaching and work of nurses and the focus on the care they provided were not their exclusive thing, since the nineteenth century most of the work already used these forms of teaching and learning. It was mainly during the hospital practice that the students received the knowledge from other nurses through the apprentice method.

From the 1950s, approximately, the nursing education was differentiated by the objectives of education, established, mainly, by international organizations. Thus, its purpose was understood as that of the comprehensive formation of the man, taking into account the plan of formal study, the full development of human capacities, ethical problems from a humanistic perspective and the need to develop an aesthetic sense.

From the rise of a neoliberal project, from the economic point of view, most countries joined a neoconservative project from the political and social point of view. Thus, in the 1980s, international organizations, such as the International Monetary Fund (IMF) and the World Bank (WB), proposed to restrict the financing of higher education by the state. This program forsakes the confidence in the educational planning and, instead, establishes evaluation mechanisms and strategies that result in funding linked to the results of such evaluations. Then, a number of concepts from the pragmatic perspective begin to be established.

In this context, the educational reflection nowadays emphasizes the articulation between education and society as the central element to establish educational purposes. Thus, the productivist perspective places the employment as the central point of the educational goal.

Nursing schools and colleges, which were involved in this process during the first decade of the 21st century, have evaluated and restructured their curricula, taking into account the educational policies in force, concerned with the continuous process of professionalization, which leads to the acquisition of better academic levels and meet the demands of the job market of its graduates.

Having these antecedents and privileging the pragmatic education, which links the vocational training with employment, it is often questioned: In caring for a patient, how important is it for the nurse to know who Florence Nightingale was, if what she needs is to know the surgical techniques, the intensive care, or the handling of electro-medical devices?

Based on what has been said earlier and succinctly, it is possible to state that the particularities that characterize the origin and development of the Nursing profession in Latin America establish a close connection with the historical, cultural, social and political conditions that followed it in its constitution process. Certainly, just over a century after its emergence, we nurses recognize that the profession has grown and developed in both education and professional practice, and that it has sought to transform some historical-delegated elements by factors that *empower* it and that favor its professional and social recognition.

Finally, it can be said that the nursing education in Latin America has undergone a process of professionalization in the last 120 years. This affirmation makes it possible to recognize that Nursing emerged as a social activity, which was institutionalized both in its formation and in its work practice, asserting itself as science, profession, discipline and art. In this sense, there are two essential objectives that must be fulfilled both individually and collectively: to provide quality care to the professional services user, their family, and the community; as well as to favor the development and progress of the discipline, both in its epistemological field as science, and in its praxis as a profession.

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