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The development of socio-emotional competencies in nursing education: integrative review

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ABSTRACT

Objective: to identify how the socio-emotional skill development process occurs in the nursing training. **Method:** integrative literature review, in LILACS, MEDLINE, SCIELO, IBECs, BDNF databases. The research included publications between 2004 and 2019, 8 articles that met the established criteria were identified for the review. **Results:** it was identified in the articles that the development of the emotional aspects of nursing students is still emerging, are often tangentially, or worked indirectly. **Discussion:** the proposal of the studies is to develop an internal emotional management that allows an emotional expression appropriate to the situations. **Conclusion:** although studies emphasize the need to break away from the Cartesian/traditional training model, they still seek a ready, acceptable, identifiable conduct, leading to rationalization of issues that are intrinsically part of the human dimension, such as emotions.

Keywords: Nursing; Teaching; Emotions; Competency-Based Education.

INTRODUCTION

The university plays a unique role in the social, political, economic and cultural system changes of individuals and society. According to each era, the university, which taught in the traditional way, transforms itself according to the needs of humanism and science, transposing this traditional standard into the standards of the modern university of the 21st century. With the current technological and scientific advances, it is necessary to search for ways that consolidate pedagogical projects consistent with such advances, that is, prepare professionals capable of meeting the challenges of modernity, without losing sight of the perspectives of their personal and emotional dimensions⁽¹⁾.

The need to change nursing education is related to the current social needs related to the country's health conditions, i.e., it recommends the need to break away from training based only on the clinical model (flexenerian/curative), and the need for broader, comprehensive training. Most universities that reformulate the Political Pedagogical Projects (PPPs) of nursing courses, and consequently their curricula, follow the critical-reflective training model, which intends to train a generalist, critical and reflective professional, capable of working as a team, making decisions and intervening in the health-disease process, promoting nursing care in a humanized way and be responsible for updating their

competencies, and consequently, socio-emotional competencies⁽¹⁾.

Young people belong to a social group with specific characteristics and, because they are leaving adolescence and entering adulthood, they often have a strong internal pressure, especially in the way they perceive life, and external charges, represented in how society considers them. The sociocultural collection that these young people suffer is evident and is still considered taboo today, which ends up, several times, being reflected in their attitudes, leading them to a lifestyle harmful to health in various aspects⁽²⁾.

Young university students are a specific group and often deal with particular challenges because they are inserted in an academic environment in which they suffer great psychosocial pressure. They are exposed to constant demands, which sometimes lead to dysfunctions in their well-being, which can lead to various pathological processes, including neuropsychic ones. This problem is reported by Cremasco and Baptista in their research on the mental health of psychology students, which reveals a percentage of 15% to 25% of undergraduate students who develop some type of mental disorder during their education, with depression being one of the most prevalent disorders⁽³⁾.

Suicide is the second leading cause of death among college students, it is estimated that about one million students

commit suicide each year in the world, equivalent to one death due to suicide every 40 seconds ⁽¹⁾. Factors such as separation of the family nucleus, increased responsibilities and reassessment of activities, situations that must be faced especially by university students, can cause such emotional and physical instabilities, resulting in high levels of anxiety. Thus, the susceptibility of university students to acquire depression and to commit suicide was identified⁽²⁾.

This situation represents a challenge to universities, exemplified by the significant influence of these pathologies on the university student performance, and it is the institution's responsibility to develop diagnoses and intervention measures⁽³⁾.

In this context, the idea of competence arises when the construction of learning goes beyond the formal acquisition of academically validated knowledge and also includes constructed knowledge from the most diverse experiences that the subject faces, whether in studies or throughout life⁽⁴⁾. The socio-emotional skills, unlike the abilities of emotional intelligence, refer to the transforming capacity, which results in the appearance or development of a set of qualities in the person.

It is worth mentioning that, while emotional intelligence consists in the acquisition of dexterities in relation to their own emotions and others (idea of control, mastery of emotions), emotional competence implies not only the

incorporation of skills, but also includes them, promoting a transformation process in which the person incorporates consciousness and emotional understanding. An emotionally competent person has characteristics such as compassion, equanimity, optimism, empathy, perseverance. A person with emotional competence is a person in transformation who incorporates new characteristics into his personality ⁽⁵⁾.

Academic training with an emphasis on emotional aspects is responsible for strengthening the individual and showing them to the world, with all the competence that is expected of a professional who knows how to deal with situations and conflicts that may eventually arise. Thus, it is vital that we perceive the world around us, that we awaken the critical sense, intellectual curiosity and the development of the ability to communicate, especially in socio-professional interaction in nursing, which aims to provide the nursing professional with knowledge inherent to interpersonal relationships and interpersonal and emotional competencies⁽⁶⁾.

It is also important to highlight that the quality of care will be strongly marked by the attitudes and behaviors of those who care. Competent professional performance requires a know-how to mobilize, integrate and transmit the knowledge acquired in the scope of training, which can be made possible by the development of competencies through new pedagogical opportunities during

initial academic training⁽⁷⁾. With this perspective, training and education begin to have other meanings than those attributed by scientific dimensions, because it is necessary to feel the need to recover a human being who is able to recultivate his passions, instincts and emotions⁽⁸⁾.

Thus, the aim of this study is to identify how the socioemotional skill development process occurs in the nursing training.

METHOD

An integrative review, with a qualitative approach, according to 6 proposed steps: identification of the theme and selection of the hypothesis or research question for the preparation of the review, establishment of inclusion and exclusion criteria of studies, definition of information to be extracted from the selected studies/categorization of studies, evaluation of studies included in the integrative review, interpretation of results and presentation of knowledge production ⁽⁹⁾. In order to answer the following question: "How does the socio-emotional skill development process occur in nursing training?"

The descriptors used for the search were "Nursing" AND "Teaching" AND "Emotions" AND "Competency-Based Education", the study was conducted between September and October 2019

(submitted to updates in October 2020) in the Literature databases Latin American and Caribbean In Health Sciences (LILACS), Online Medical Literature Search and Analysis System (MEDLINE), Scientific Electronic Library Online (SCIELO), Spanish Bibliographic Index in Health Sciences (IBECS), Nursing Database(BDENF).

For the purpose of article selection, the following inclusion criteria were used: articles developed in the last 15 years (from 2004 to 2019 – this time frame was established due to the difficulty of finding articles in the last 5 years related to the theme in question; as there were no articles, the time frame was expanded), in the Portuguese, English and Spanish languages, and addressing the theme of emotions in nursing education. The exclusion criteria were: articles that addressed the theme of emotions outside the scope of academic training. Articles related to the emotional issues of graduates were not considered.

RESULTS

Thus, 548 studies were found. After reading the titles and abstracts, 19 articles were selected. In Figure 1, the article selection process (matching the descriptors in the databases and articles selected in the databases according to the established criteria) can be verified below.

Figure 1 - Article selection process, 2010, Brazil.

DESCRIPTORS/SOURCES	LILACS	MEDLINE	SCIELO	IBECS	BDEF	TOTAL	Selected
NURSING and EDUCATION and EMOTIONS	52 (5)	140 (0)	19 (2)	2 (0)	55 (0)	268	7
Nursing and Teaching and Competency-based Education	144 (11)	0	32 (0)	23 (0)	78(0)	277	11
Nursing and Emotions and Competency-Based Education	1 (1)	0	0	0	0	1	1
Teaching and Emotions and Competency-Based Education	2 (0)	0	0	0	0	2	0
						548	19

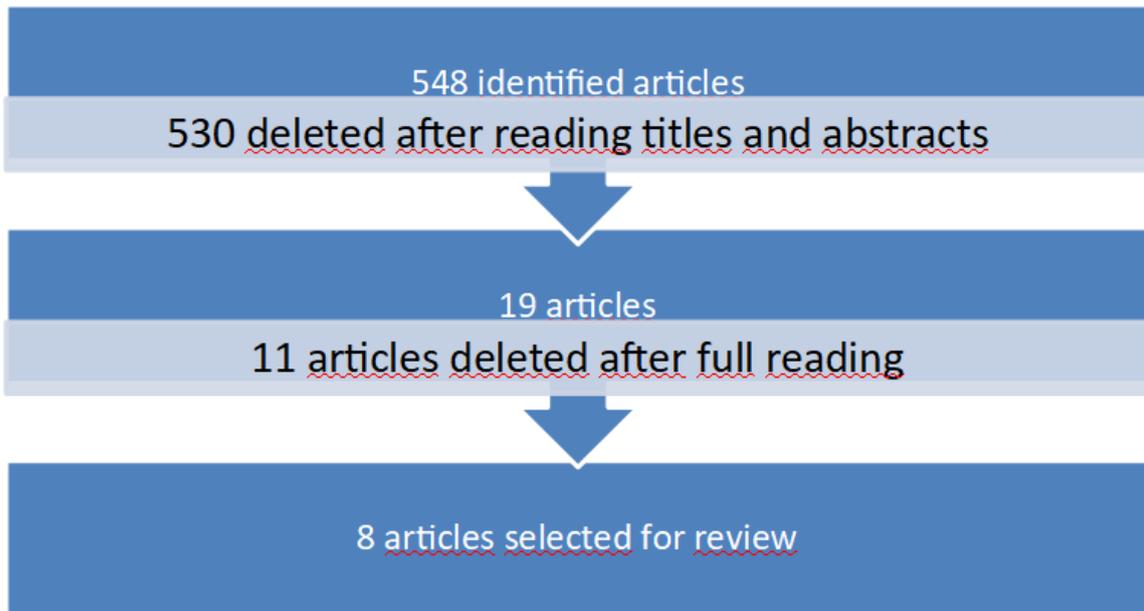
Source: Prepared by the authors.

Pairing of descriptors in databases and articles selected in the databases according to the criterias established according to the steps of Prisma (which proposes steps for the elaboration of systematic/integrative reviews).

The review of the articles was carefully performed by the authors, who in

order to verify the application of the inclusion criteria described above, read the articles in full, totaling 8 selected articles. The selected articles met all the requirements of this review. Figure 2 summarizes the article selection/elimination process.

Figure 2 - Process of selection/elimination of articles, 2020, Brazil



Source: Prepared by the authors.

The article selection process according to the reading of titles and abstracts and then proceeded the full reading of the articles for the final selection of 8 articles.

In Figure 3, it is possible to observe the results obtained in the databases from which the 8 articles were extracted. These selected articles were only in 2 databases.

Figure 3 - Articles selected in 2 databases (LILACS and SCIELO), 2020, Brazil.

Databases	Articles found	Articles selected after reading the titles and abstracts	Selected articles after full reading of the article
LILACS	199	17	6
Scielo	51	2	2
Total	250	19	8

Source: Prepared by the authors.

These 8 articles were only found in 2 databases (LILACS and SCIELO).

Among the 8 (100%) studies found, 2 (25%) are Portuguese and 6 (75%) are Brazilian, no studies have been found in other countries. The methods used are diverse and the samples range from 560 to 10 students; some studies include professors, nursing professionals and students from other areas, such as technology and education. The study participants are mostly youths. In relation to the production year, the oldest article is from 2004 and the most recent is from 2018, establishing a time frame of 14 years for the selected articles.

One of the studies found in the search deals with the development of emotional skills and aspects of student

education more directly. It is a Portuguese study that deals with the support of the supervising nurse/advisor for the development of competencies, aiming at the performance of emotional work. The other seven touch on emotions since they work with aspects of the human dimension in academic education.

To facilitate the understanding of the data, a table was created with the items obtained from each study, which was completed as the selected articles were analyzed. The items extracted from the articles included authors' names, country of study, year, method and sample and main findings/strategies identified. Data analysis and presentation were performed descriptively. Figure 4 shows the results found in detail.

Figure 4 - Summary of the Results of the Integrative Literature Review, 2020, Brazil.

Authors/Country/Year	Method	Main Findings
Diogo, Rodrigues, Sousa, Martins, Fernandes. Portugal, 2016.	Exploratory, descriptive and correlational study, with a mixed approach.	- The supervising nurse as support contributing to the development of the human person (clients, students, nurses) in its integrality. Management of their own emotions and individuals under care.

<p>Ferreira, Duarte, Cardoso, Cabral, Guinea, Campos, Alves. Portugal, 2018.</p>	<p>Quantitative, cross-sectional, descriptive and correlational study, using a questionnaire study.</p>	<p>- Dimensions were identified that can lead to the abandonment of higher education, such as: emotional perception, life management, relational, profession and career among others. The study reveals that critical thinking, adequate time management and motivation are related to academic success and, consequently, to dropouts.</p> <p>*This study does not include nursing students, but deals with the dimension of academic education relating emotional competencies, being relevant for this review.</p>
<p>Lima, Galavote, Schwartz, Ramos, Prado, Maciel. Brazil, 2011.</p>	<p>Qualitative study. Workshops were held to collect the data.</p>	<p>- Creation of the mandatory discipline "Nursing and Society", which seeks to understand man in its integrality in the historical-social perspective, privileging the universe of meanings, motives, aspirations and social relations in interaction with beliefs, values, attitudes and subjectivities. The workshops encouraged the student to work on their sense of otherness.</p>
<p>Perbone, Oak. Brazil, 2011.</p>	<p>Descriptive design study, using the Critical Incident Technique. It includes obtaining simple opinions</p>	<p>- The study allowed to identify the critical incidents related to the first significant contact with the patient, and identifying situations perceived as positive or negative. Feelings</p>

	and judgments from the observer.	related to the student himself, the patient and the discipline he was attending were verified.
Esperidião, Munari. Brazil, 2004.	A qualitative study, semi-structured interviews were used for data collection.	- Investigates the perception of nursing students regarding their education, how the course contemplates training, what are the feelings and experiences during training, identifying whether there is teacher support, whether the issue of self-knowledge is taken into account and highlighting personal aspects.
Pereira, Ribeiro, Depes, Santos. Brazil, 2013.	Qualitative study, used a case study.	- Emphasis on neuroscience; the most required skills at the brain level, in order to be learned, are called cognitive, technical, relational and emotional. Perception of nursing undergraduate professors and students, aspects of the interaction that occurs between feeling and learning.
Carraro, Prado, Silva, Radünz, Kempfer, Sebold. Brazil, 2011.	Descriptive exploratory qualitative study, based on descriptive approach.	- Creation of the space of socialization among students, based on active methodologies (collective space, where students share the collective synthesis of the developed contents, learning experiences, health-disease situations). For students, the socialization activity allows integration, interaction and intersubjectivity in

		the process of critical training and committed to reality.
Lopes, Azeredo, Rodrigues. Portugal, 2012.	Qualitative study with an exploratory-descriptive characteristic. It is part of a quasi-experimental design with a longitudinal character.	- Highlights relational competencies and interpersonal relationships as pillars of nursing care. It emphasizes the students' perspective on the knowledge of themselves to better care, as well as relational know-how, based on the principles of care – humanist and communicational.

Source: Prepared by the authors.

Summary of the articles selected for research.

DISCUSSION

Next, we highlight 2 thematic axes in order to discuss the articles found.

The need to reframe the teaching model based on biomedical training and scientific technical knowledge to mobilize the development of socio-emotional skills.

In this context, the importance of consolidating institutional networks that allow the opening of new learning scenarios that constitute rich spaces for the formation of subjects, which are involved and appropriate to their real work processes⁽¹⁰⁾, are highlighted.

Studies done to identify and analyze the perceptions and feelings of the

undergraduate nursing course, in relation to their training as a person/professional, reveal that academic training is centered on technical-scientific knowledge, focused especially on meeting the needs of those who will be cared for, without considering the person who cares for them, in addition to evidencing that the academic trajectory is permeated by various feelings that appear due to the experiences that occurred throughout it⁽¹¹⁾.

Another study highlights little ability to establish a therapeutic relationship that can account for the various dimensions of human suffering. There may be, therefore, possible

consequences that will accompany the student throughout his or her course or even during his/her professional practice. Thus, strategies such as the creation of the Nursing and Society discipline become indispensable, because they create the possibility of breaking with the technical-scientific model recreating forms and developing competencies through workshops that allow us to reflect on the meaning of life and on the meaning of nursing education, consequently contributing to the development of socio-emotional competencies⁽¹⁰⁾. This can also be verified in the study that presents the creation of the moment of socialization within the nursing fundamentals discipline based on active methodologies, promoting a space of realistic simulation. It is characterized as a moment of exchange, reflection and analysis of the performance and personal and professional growth of students⁽¹²⁾. These devices create new ways of obtaining knowledge and learning, enabling the construction of competencies previously not reachable by the traditional nursing teaching model. As the study from the point of view of neurosciences exposes, the most required skills at the brain level, in order to learn, are cognitive, technical, relational and emotional⁽¹³⁾.

The development of the human dimension of nursing students, implications for the development of socio-emotional competencies.

The feelings experienced by students during the course, which manifested themselves in a diversified

way, changing and alternating, from euphoria for passing the entrance exam, achievement, joy, curiosity, interest in growing, pride in attending Nursing, to feelings of anguish, sadness, fear, terror, failure, loneliness, feeling of helplessness, inferiority, incapacity, disappointment, willingness to give up, anger, revolt, insecurity, pity, suffering and pain⁽¹⁴⁾. The author Ferreira in his study identified the difficulty which students have in talking about their emotions or in apprehending the meaning of the questions during the interview, which were related to this aspect⁽¹⁴⁾. The author Damásio argues that emotional development is an integral part of the decision-making process and functions as a vector of actions and ideas, consolidating reflection and discernment⁽¹⁵⁾. In this sense, it is important to highlight the study that is configured as a strategy to support nursing students, contributing to the development of emotional competencies through clinical supervision, as the clinical course is permeated with situations that generate positive and negative emotions⁽¹⁶⁾. The study's proposal is to guide students to manage their emotions and those of the client to more appropriate emotional responses^(17, 18). Concerning the development of competencies in students, the results of the study demonstrate that the support function of the supervising nurse enhances the performance of emotional work and promotes personal growth, leading to attitude changes (posture, discourse, analysis, adaptation

and tranquility), the development of trust, initiative and autonomy, the recognition of difficulties and the acceptance of criticism in a constructive way. But it also leads to the acquisition of theoretical knowledge resulting from the confrontation with other forms of interpretation of circumstances, requiring an adaptation to new experiences. Therefore, nursing education "should not be confined to the technical and scientific process, but also to underline the student's personal development by the role that he/she has in all competencies"^(7, 19).

CONCLUSION

The process of developing socio-emotional competencies in nursing education occurs in such a way as to focus on strategies and approaches that are not declared as being for socioemotional development. It is perceived, in studies, that this occurs in an indirect or sometimes unintentional way, as the aspects of life, academic training and curricular restructuring work for more humanized molds with emphasis on the integrality of teaching and care. The selected articles point to discussions with students about the urgency of developing the emotional dimension, but do not clearly name strategies that make this development feasible. The studies, for the most part, bring criticism to the training model based on technical and scientific aspects, which do not take into account the dimensions of the emotional field in training.

It is also notorious that studies deal with the development of socio-emotional skills in order to seek the best expression of emotions during care. The proposal of the studies is to develop emotional management that allows an appropriate emotional response/expression to the situations. The criticism presented here is whether it is possible to control emotions to such an extent. Is it possible to develop an emotional behavior managed in each situation?

Although they emphasize the need to break with the Cartesian model, studies conducted with this perspective still seek a ready, identifiable conduct, leading to the rationalization of issues that are of the human dimension, such as emotions. It is important that, in future studies, the focus on emotional aspects allows an approach that is not restricted to an accepted emotional conduct. It is necessary to dimension the real needs of nursing education and emotionally strengthen students for the practice of nursing practice.

In addition to the above, it is possible to add that the emotional condition and the development of socio-emotional skills are beyond academia, as they are influenced by the various dimensions of life. The development of socio-emotional competencies should be present in teaching since the basic cycle, constituting a curricular component which is developed gradually. The dimension of an emotionally competent training requires the compression and work of the

other dimensions of students' lives, this highlights the need for a curricular restructuring of the initial training cycles (elementary and high school).

In short, the relevance of this study is to enable the development of support that contribute to reflections on the socio-emotional competences that reveal themselves to be part of the professional learning process, allowing the nurse's

academic training to be re-signified. In addition, it seeks to contribute so that the emotional experiences of nursing students are perceived and experienced as powerful devices of creativity/sensitivity, both of the student and of the patient, aiming to corroborate the foundation of their integration in the curricular programs of nursing courses from the beginning with an impact on the future practice of care.

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