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Educational strategies in technical nursing education during the COVID-19 pandemic

Estrategias educativas em la educación técnica em enfermagem durante la pandemia COVID-19

Estratégias educacionais no ensino técnico em enfermagem durante a pandemia por COVID-19

ABSTRACT

During the pandemic, the obligation of social distance showed a new way of teaching and reinventing itself. Objective: To present teaching strategies used by a teaching nurse, during the return to the classroom during the pandemic period. Methods: This is a report of professional experience and bibliographical research, the applicability of the methods was developed in an Institution of Technical Teaching in Nursing, in September 2020. Results: The activities that most motivated the students were: storytelling, quiz and pass or review. When the teacher uses tools focused on andragogy theory, he starts to observe the student as an active subject in the learning process. Conclusions: The work must be collective, to insert a critical pedagogy, with a dynamic learning, so that the student in his reality, may not cause damage in his assistance to the patient.

DESCRIPTORS: Teaching, Pandemic, Nursing Education.

RESUMEN

Durante la pandemia, la obligación de la distancia social mostró una nueva forma de enseñar y reinventarse. Objetivo: Presentar las estrategias de enseñanza utilizadas por una enfermera docente durante el regreso a las aulas en el periodo de la pandemia. Métodos: Se trata de un informe de experiencia profesional e investigación bibliográfica, la aplicabilidad de los métodos se desarrolló en una Institución de Educación Técnica en Enfermería, en septiembre de 2020. Resultados: Las actividades que más motivaron a los alumnos fueron: la narración de cuentos, el concurso y el pase o repaso. Cuando el profesor utiliza herramientas centradas en la teoría de la andragogía, empieza a observar al alumno como sujeto activo en el proceso de aprendizaje. Conclusiones: El trabajo debe ser colectivo, para insertar una pedagogía crítica, con un aprendizaje dinámico, para que el estudiante en su realidad, no pueda causar daño en su atención al paciente.

DESCRIPTORES: Educación, Pandemia, Enseñanza de la enfermería

RESUMO

Durante a pandemia, a obrigatoriedade do distanciamento social, mostrou uma nova forma de ensinar e de se reinventar. Objetivo: Apresentar estratégias de ensino utilizadas por um enfermeiro docente, durante o retorno às aulas presenciais no período de pandemia. Métodos: Trata-se de um relato de experiência profissional e pesquisa bibliográfica, a aplicabilidade dos métodos foi desenvolvido em uma Instituição de Ensino Técnico em Enfermagem, no mês de setembro de 2020. Resultados: As atividades realizadas que mais motivaram os discentes foram: storytelling, quiz e passa ou repassa. Quando o professor utiliza ferramentas voltadas para a teoria da andragogia, passa a observar o aluno como sujeito ativo no processo de aprendizagem. Conclusões: O trabalho deve ser coletivo, para se inserir uma pedagogia crítica, com um aprendizado dinâmico, fazendo com que o aluno em sua realidade, possa não causar danos em sua assistência prestada ao paciente.

DESCRIPTORES: Ensino; Pandemia; Educação em Enfermagem.

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Maria Claudia Teixeira de Macedo Silva

Nurse Professor at the institution Cefacs EEP HCFMUSP. Student at the Graduate Academic Master's Program in Education - UNICID. Bachelor of Nursing. Specialist in Mental and Psychiatric Health, Specialist in Teaching in High School, Technical and Higher in Health, Specialist in Occupational Nursing, Specialist in Continuing and Permanent Education in Health.

ORCID: 0000-0002-3359-3557

INTRODUCTION

Due to the exponential increase in COVID-19, through widespread transmission, the World Health Organization (WHO) treated the case as a pandemic. ⁽¹⁾ In order to control the spread of the virus, Brazil has adopted preventive measures of social isolation, where from one moment to the next we find ourselves locked inside the house, changing habits, conversations being carried out through the small screen of a computer or cell phone, families meeting the distance by video call when their reality allowed, without the hug and the handshake, schools canceling the face-to-face classes and leaving for a remote structure. ^(1,2)

As a consequence, the sudden pause in the face-to-face activities of schools, whether in technical education or higher education, which are associated with theoretical and practical activities, have an impact on the learning process in the short, medium and long term. ⁽²⁾ Notably, the most affected are the subjects who live on the margins of society, without the aid of infrastructure, with socioeconomic deficits, the one who reflects the situation of social inequality, in view of the entry to essential services, among them education. ⁽²⁾

However, nursing courses have a workload that includes theoretical, theoretical-practical classes (held in the nursing laboratory) and supervised internship.

During the pandemic, the requirement for social distancing showed a new way of teaching and reinventing itself. On the other hand, the teacher had to face the technological advances of the near future, which came suddenly and settled in. Certainly, some nursing education institutions have all the technological apparatus in their classes, but a large majority don't.

The learning process called Andragogy, created by Malcolm Knowles, conceptualizes the student as a mature individual, where the teacher is the facilitator of knowledge, indicating the path and sen-

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sitizing that individual to learning with mediating elements. ⁽³⁾

Based on this premise, we can reflect on the biographical capital of a subject, where the experience is acquired throughout life, where we resort as a reference search to reflect, act or react, through a human and historical constitution. ⁽⁴⁾

Andragogy is based on four pillars, on the characteristics of the individual learner, in adulthood: He stops being dependent to be independent, with the need to self-direct; It accumulates reserves of experiences with a greater volume of learning resources; The motivation in the learning process is aimed at seeking and developing social roles; The perspective in relation to the applicability of knowledge is modified, as their learning is no longer centered on the content, to be centered on the problem. ⁽³⁾

From the same point of view, it can be said that the epistemic subject and the biographical subject remain amalgamated. There is a dichotomy between both, making it possible to reconnect knowledge and self-knowledge through the narratives of the experience. ⁽⁴⁾

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Adopting active methods as a learning tool in health courses helps students to be proactive, mainly because they are involved in complex activities that require decision making and evaluation of results. Professional education institutions should prepare their students for the exercise of mental, cognitive and socio-affective functions, so that they can learn independently and assimilate the high number of information. ⁽⁶⁾ However, it is necessary that teachers are also engaged in the development of professional skills during the

preparation of students for their critical social formation. ⁽⁷⁾

Active methodologies are pedagogical practices, which place students to be the main agents of learning, and the teacher as the content mediator, where they have technical and behavioral skills, associated with collaboration skills and flexibility in the transmission of knowledge, stimulating autonomy in student learning. ^(5,8,9,10)

The challenge in implementing active methods in training occurs when it is still believed that the teacher should be the center of the teaching process and the classroom is the only place where learning can happen. This challenge causes the educator to change his way of thinking and education to go beyond the walls of the classroom, making students and teachers have a closeness, to develop their skills and knowledge through critical-reflexive attitudes in learning with real scenarios. ^(11,12)

As guiding questions, I emphasize: Is it possible in a short period of time, to help students with little technological infrastructure, either on the part of the school, that is, by the socioeconomic part of the student? How to keep the student motivated and engaged during the process of teaching learning with new technologies? Is it possible to make the teacher modify his way of teaching using technological means or improvising without violating the techniques and theory presented?

Thus, this article aims to present, through an experience report, the teaching strategies used by a teaching nurse, during the return to face-to-face classes in the pandemic period.

METHOD

This is a report of professional experience and bibliographic research based on references published in the period 2008 to 2020, in Portuguese and English, initially in the Scielo database (Scientific Electronic Library Online), using the descriptors: Ensino, Pandemia, Educação em Enfermagem.

This study was developed at a Technical Nursing Education Institution, which is part of a large hospital complex, located in the city of São Paulo.

To choose the profile of the participants, it was decided to work with 38 students, from the Nursing Technician course, aged between 18 and 39 years old. As an inclusion criterion, having attended the discipline of fundamentals of care phases I and II, having completed the supervised internships, corresponding to this discipline.

According to the method used, approval by the Research Ethics Committee is waived, in accordance with CNS Resolution No. 510/2016. Aligned with the participating educational institution, the student with a comorbidity belonging to the risk group for COVID-19, was instructed to remain in remote education, following the class online, through their own institutional platform.

After conducting a diagnostic evaluation, which aimed to validate the content taught in the period of online teaching, where the results were not satisfactory, data collection and applicability of the methods that took place in September 2020, period the return of the face-to-face classes, through 11 meetings with a workload of 5 hours / class. The participants were divided into three groups and in separate rooms, respecting the limit of students recommended by the authorities due to the pandemic, rotating between the theoretical classes and the theoretical - practical class.

The instrument used was defined according to the resources available at the institution, respecting the uniqueness of each one. It was decided to apply a mind map, so that the teacher, student and colleague could get to know each other better and thus include other teaching strategies such as gamification. At first, the questions that surrounded the mental map, served to direct the conversation circle, favoring narratives through life stories and at that moment it was possible for all students to participate.

The data obtained with the mental map, pointed out about knowing and listening to the other from their uniqueness. It was observed that even though they were in a classroom for almost a year, the students did not know each other and did not work with communication and active listening among peers. Since, communication and listening are essential and essential factors in patient care.

Now, through reflective awareness, subjective projects are built, associated with peers, who have similar projects providing identification resources, that is, the identity construction is the very attribution of the biography for itself. ⁽¹³⁾ From the stories we tell about ourselves, we can know about who we are.

DISCUSSION

Currently, the main challenge for the inclusion of active methodologies is related to the curriculum, regarding the lack of time and the disarticulation of the contents to be developed; resistance on the part of teachers to the implementation of the methodology, as they do not want to change their teaching/learning practice; and the difficulty in understanding how to apply the methodology in teaching practice, either due to questions about the lack of resources or because it is more laborious. ⁽⁹⁾

Certainly, adults grow up when they are put out of comfort zones and feel obliged to expand resources to face new situations. The moments of crises generate searches, be it knowledge or interpersonal relationships. ⁽¹³⁾

The difficulties faced by teachers, for the use of active methods, occur due to the fact that their training is still based on expository classes where the contents are charged only in tests and exercises. It is necessary to change the attitude of this professional, he needs to know and use several resources, thinking about his best technique to apply the subject in the classroom, through challenging and contextualized activities. ⁽⁹⁾ Currently, some

discussions are being raised about the new pedagogical practices where educational institutions are being encouraged to redo their social role in order to value the quality of their assistance, inserting innovative practices in learning.⁽¹⁰⁾

RESULTS

According to the data collected through the mind map, the students said they hoped to learn again, in full, the subjects applied in the period they were in online class and in the period before this one. This being a worrying point, as we did not have enough time and the contents presented before the process of social isolation, had been validated through evaluations and supervised internship, and even so it was pointed out as "I never saw it".

Given the information, it was agreed to implement the review of all content. However, in an active and participatory way, counting on the commitment and participation of both sides, teacher and student. Being requested the commitment of the student for a previous reading of the contents, bringing questions to a new round of conversation and feedback.

With the purpose of making classes dynamic and participatory, it was interspersed with slide presentations, learning methods such as: crossword puzzles, games like quiz, pass or review, storytelling. For pharmacology reviews, models of medical prescriptions with fictitious names were applied, so that the student could interpret, perform the calculations and recognize the pharmacological classes, bringing realistic situations, to develop critical thinking.

Among the activities carried out, I highlight the ones that most motivated the students for the moment of learning, namely: storytelling, quiz and "pass or pass back".

When thinking about storytelling, it automatically associates itself with the act of storytelling whether using

audio-digital accessories or not. But it goes further, it is a form of narrative, and it is necessary to enchant to achieve the objective.

This tool was of paramount importance for one of the activities, where the story made sense, for the one who heard it, and from that point on they were able to develop an activity, corresponding to

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the narrated context.

This makes us understand that the narration does not stop at its end, it resignifies. The narrative is broad and flexible,

when narrating the story the subject can structure it in different ways, the same happens with the experience if it is not narrated it certainly will not exist.⁽¹⁴⁾

From the moment that the teacher uses tools aimed at the theory of andragogy, he begins to observe students as active subjects within the learning process, promoting rapprochement between both. Thus, making an engaging learning through innovative strategies and adapted to the scope, keeping the student in a position of participant in teaching learning.⁽³⁾

Activities through fixation exercises or through games, strengthens the bond with the student, the moment of relaxation and playing together with apprehension provides teamwork.

Despite all the arrangements with the students and the efforts of some, it was not possible to interact with the 38 students for two important reasons: the lack of prior reading of the contents and absenteeism during the activity.

Sometimes, the justifications and requests before the activities were, "can you give me a moment now, so I can study?", "I didn't hear that it was to read this content in advance". In addition, many were missing to not participate in the activities and supported themselves to follow the classes online. But the greatest difficulty encountered by the teacher was in relation to the student who was in remote mode, as he did not always have technological resources to participate in activities, and the institutional platform only had the chat feature for interaction at the time of practice.

Those who participated in the face-to-face activities and followed the instructions on the previous readings, observed a better understanding of the content, critical reasoning and greater performance both with the teacher and with colleagues.

CONCLUSION

In view of what has been presented, institutions must provide subsidies so

that teachers can modify their teaching practice, being able to become critical, reflective and questioning. The work must be collective, to insert a critical pedagogy, with a dynamic learning, making the student in his reality, may not cause

damage in his assistance provided to the patient.⁽¹²⁾

On the other hand, and this the most important one reflects on the commitment of the students. In the case of a profession that seeks care and improvement

through research, courses and specializations, knowledge, skills and attitudes are necessary. But, this will only happen from the moment that the future professionals start to have a humanistic and engaging relationship with the profession. ■

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