PROFESSORS’ PERSPECTIVES ON THE TEACHING OF LEADERSHIP IN NURSING

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ABSTRACT

Objective: to understand the teaching of leadership in nurses’ training based on the professors’ perspectives. Method: this case study with a qualitative approach addressed 36 professors of a public university in the state of Bahia, Brazil. Data were collected through semi-structured interviews and document research and later submitted to thematic analysis using NVivo. Paulo Freire’s theoretical framework was adopted. Results: leadership involves self-development, managerial capacity, and teamwork. Didactic strategies that facilitate the teaching of this competence include active methodologies, dialogue classes, and critical and problematizing discussions. Conclusion: it is essential to encourage debates and research on teaching leadership in the Nursing field to promote the development of this competence during the training of nurses to contribute to the quality of healthcare delivery.

Keywords: Leadership, Nursing, Education, Nursing Education, Nursing Baccalaureate, Learning.

INTRODUCTION

According to the World Health Organization (WHO), striving for leadership in nursing practice and promoting it during nursing education requires constant attention(1). The effort to train and qualify these professionals reverberates in the effectiveness of the exercise of leadership, which is why it is important to develop this competence from the beginning of the undergraduate program(2). However, newly graduated nurses are not always well prepared to occupy leadership positions, a critical aspect, considering the growing demand for healthcare and the direct relationship between leadership and the quality of healthcare delivery.

In this context, nursing professors need to recognize the current need to encourage innovative behavior among undergraduate students so that they act as change agents capable of identifying and improving the patient care process(3). It demands investments and preparation throughout Nursing education, aimed at developing nurse leaders to work in health care, and at meeting a professional profile that requires increasing technical-professional knowledge, scientific, managerial, and relational skills, in addition to critical-reflective values and attitudes(4,5).

It is worth mentioning that faculty training in the Health field aims to investigate and reflect upon the notion that the professors’ role is essential in the training and trajectory of future professionals in the Health field. Thus, throughout history, pedagogical improvement has required changes in providing knowledge and promoting learning. From this perspective, current active learning methods promote the
students’ protagonism, and professors mediate this teaching process, supporting students in the construction of knowledge.

The Diretrizes Curriculares Nacionais (DCN) [National Curriculum Guidelines] and the Lei das Diretrizes e Bases (LDB) [Law of Guidelines and Bases] in nursing and medicine aim at the continuous training of professors with a collective scope, valuing opportunities for reflecting on teaching practice, improving the pedagogy, ethics, and policies of faculty members. Meanwhile, note that the DCN of Brazilian Nursing established requirements based on six competencies that should be included in the training of nurses: decision-making, communication, administration, health care, management, continuing education, and leadership.

Considering these characteristics, leadership in the nursing field is a competence that can be understood as a skill through which nurse leaders influence their teams to reach a common goal: meeting the health needs of patients and their families. Additionally, leadership is part of a constructive process that generated different meanings and concepts over the years.

The health field requires leaders willing to deal with unforeseen events and ambiguities, so nurses must act with safety, agility, and quality. Additionally, nurses need to be prepared to lead in order to improve health levels. Moreover, composing systemic references in education, research, and practice is needed to consolidate prospective and entrepreneurial leadership.

Faced with these paradigms, professors tend to be attentive to gradually prepare future nurses to adjust to the demands of a complex world of work, which values specialists capable of responding to the adversities of health practices and favoring changes in teaching. However, this context requires professionals to communicate efficiently through dialogue, be participative, critical, committed to their practice, and genuinely involved with learning how to learn. Hence, educational activities during academic training are expected to encourage students to reflect, explore and acquire diversified knowledge that can help them develop their communicative, administrative, managerial, and leadership skills, among others.

Therefore, this study is proposed considering the discussion above and the relevance of deepening understanding and reflecting upon the teaching of leadership in the Nursing field. This study adopted Paulo Freire’s theoretical framework, which is widely recognized in education and is greatly valued today. Based on the author’s relevance, nursing has sought to appropriate his thoughts in an attempt to adopt new teaching perspectives to respond to the aspirations of the profession.

Freire considers that teaching needs to be based on a relationship of respect and humility from one subject to another. Freire introduces the “banking” concept in the sense that professors should not merely “deposit” knowledge while students receive it passively. Paulo Freire’s assumptions contribute significantly to the field of education and perspective of “subject empowerment,” in which a horizontal dialogue is established between individuals and knowledge is shared. Hence, professors have the responsibility to entice participation. However, transposing the model Freire combats is a challenge for nursing professors, who need not only to encourage students’ critical thinking and promote their professional progress but also to create opportunities for students to develop this crucial professional competence.

Therefore, many professors currently adopt active and problematizing methodologies as tools to help develop leaders. Furthermore, these methodologies have stimulated students’ autonomy and creative decision-making, as these are based on simulated problems and real-world practice. Thus, in this learning process, the content is discussed during creative dynamics, seminars, pedagogical workshops, laboratory simulations, creative games, films, and other equally valid strategies.

This study reinforced the importance of developing skills based on the evidence-based nursing method, considering that the wide range of effective leadership skills provided by the university environment through theoretical and practical teachings may not be enough to develop leadership among students, often because of limited resources and opportunities for practice. Additionally, leadership traits and personal qualities such as self-knowledge and
ease of communication evolve and are improved over time as students are exposed to practical experiences after training(11).

Thus, it is essential to understand nursing students’ training process so they can be prepared to assume leadership positions in the future(12) effectively. Therefore, this study’s relevance lies in the fact that professors should discuss the process of training nurse leaders more widely in the academic milieu, especially regarding the content that involves leadership and contribute to the applicability of new strategies that facilitate and strengthen the development of this competence, improving the quality of care delivery.

Furthermore, note that few studies in the nursing field address teaching leadership in light of Paulo Freire’s theoretical framework. Therefore, this study aimed to understand the teaching of leadership in nursing education from the perspectives of professors and to answer the following guiding question: What is the perception of nursing professors about teaching leadership during undergraduate programs, and what didactic strategies facilitate teaching leadership competence?

METHOD

This is a case study with a qualitative approach, the objective of which is to analyze the perception of nursing professors about the development of leadership during undergraduate programs and the didactic strategies that facilitate the development of this competence. This approach followed a method to analyze events, relationships, representations, and opinions in all their complexity, delimiting the problem in a real-world context(13). In addition, this study followed the Consolidated Criteria for Reporting Qualitative Research (COREQ).

This study integrates the matrix project “Ensino da Liderança na Graduação em Enfermagem: perspectivas dos docentes e discentes” [Leadership Teaching in Undergraduate Nursing: perspectives of professors and students] and was conducted in a public university in the State of Bahia, Brazil. At the time of data collection, 68 professors worked in the Undergraduate Nursing Program, and 36 agreed to participate. They met the following inclusion criteria: being a tenured professor in the undergraduate nursing program and having worked for at least one year at the School of Nursing mentioned above. Eight professors did not meet the inclusion criteria, fourteen did not show interest in participating in the study, five were on leave to pursue a doctorate program, one was retired, two were on maternity leave, and two were on medical leave.

Data were collected through semi-structured interviews and documentary research. The interviews followed a semi-structured script that enabled other questions to emerge during the interview. The interviews were recorded after the participants’ consent using a recorder and a mobile phone in audio recording mode. The individual meetings were scheduled in advance and held in a private room on the School of Nursing’s premises between February and August 2017. Seven students attending the undergraduate nursing program and one attending the master’s program at the hosting university held the interviews. The coordinator of the matrix project to which this research is linked supervised the interviewers. She has a Ph.D. in the topic addressed here and trained the students to hold the interviews. The interviews took 40 minutes to two hours and were scheduled according to the participants’ availability. The participants confirmed their consent to participate in the study by signing a free and informed consent form. The participants’ reports are identified by the letter “P” (Professor), followed by an ordinal number corresponding to the sequence of the interviews to ensure the confidentiality of the participants’ identities. The interviews were transcribed verbatim and stored for five years by the coordinator of the matrix project. Data saturation was considered when there were no new participants and data became repetitive and added no new information.

The documental analysis included the program’s pedagogical project and the Undergraduate Nursing Program’s curricular content, which the referred School of Nursing coordinator made available in printed and digital versions. These documents were analyzed, and the units of meaning were transcribed to a matrix in Word® (2016 version) created by the authors. After a thorough reading, we sought to identify
the main elements that would allow approximations of the topic and the interviews, thus showing data and syllabus excerpts, objectives, and methodologies.

The data from the interviews were analyzed using the NVivo® 11 Software, a program that assists in data coding, storage, and organization of findings(14). An inferential interpretation was also performed and described in detail, and the thematic analysis proposed by Minayo was adopted(13). This technique recommends floating reading the field material, the corpus referring to the universe under study, and an exhaustive reading of the material in all its aspects foreseen in the script. The exhaustive reading of the material collected allowed coding the findings in an exploratory process rich in detail, in which the researcher seeks categories and subcategories. Finally, results were treated, followed by interpretation, highlighting the information obtained. At this stage, two categories emerged: “Leadership from the professors’ perspective” and “Didactic strategies that facilitate the development of leaders.”

This study complied with the ethical precepts of Resolution No. 466/2012, Brazilian National Health Council, which regulates research with human subjects(15), and was approved by the Institutional Review Board at the School of Nursing, Federal University of Bahia (Opinion No. 1,479,217 and CAAE: 54719616.6.0000.5577).

RESULTS

A total of 36 professors participated in this study, most female (n=30), and taught different courses from the first to the tenth semester. Time since graduation ranged between 20 and 43 years, with an average of 23 years. The time of experience in teaching at the institution ranged from 1 to 39 years. Most participants had 2, 30, or 39 years of teaching experience. Regarding the participants’ academic degrees, most had a Ph.D. (n=24), followed by those with a Master’s degree (n=08) and postdoctoral fellows (n=04).

Two categories emerged; the first, “Leadership from the professors’ perspective,” was subdivided into subcategories: the process of self-developing leadership; managerial capacity; and teamwork. The second category, “Didactic strategies that facilitate the development of leaders,” comprised the “active and problematizing methodologies” subcategory.

Leadership from the professors’ perspectives

This category shows that leadership, from the professors’ perspective, is a self-development process and a set of theoretical skills to be developed. The following subcategories were extracted from this category: the process of self-developing leadership, Managerial Capacity, and Teamwork.

Process of self-developing leadership

The conception of nursing professors about leadership is represented here as a self-development process.

I understand leadership as an ability that can be developed, though it can be innate. But it is that ability that makes other people develop activities towards reaching an objective or goal. (D9)

[...] I see leadership as a possibility for personal and professional development. So, it’s an attribute; it’s a competence that you develop. You learn and apprehend leadership [...]. (D12)

So, I think that leadership is a construction of theoretical skills and is essential for us to have during undergraduate studies [...]. (D20)

Managerial Capacity

Leadership from the professors’ perceptions also focuses on managerial capacity, i.e., nurse-leaders will face situations in which they will need to manage people at the work environment.

My understanding of leadership is that it is knowing how to delegate[...] because a leader always has to form other leaders[...]. Leadership cannot be authoritarian, but leadership must have authority. (D10)

For me, it is an action where people coordinate, manage, organize, identify needs, raise problems, set goals to be met, and guide towards progressive, resolute, and effective harmony. (D21)

Teamwork
From the professors’ perspective, a leader can engage and guide a group of people to achieve common goals and identify each team member’s potential capabilities.

In my understanding, leadership is an individual’s actions when leading a group of people so that these people can take advantage of their potential with already acquired knowledge and monitor [...].

I think leadership is the ability to manage a group to achieve goals, not only objective but also subjective, but having a goal. Moreover, I think leadership is the ability to get things done, which, in my view, requires planning[...].

**Didactic strategies that facilitate the development of leaders**

This category comprises the didactic scenarios professors use to favor the development of nurse leaders during the undergraduate program. The opposite was also evidenced as a counterpoint; that is, some professors did not identify the use of resources that facilitate this process during the training of nursing students.

**Active and problematizing methodologies**

Some strategies reported during the interviews include a discussion of this topic from different perspectives and using the traditional teaching model with lectures, but with the more effective participation of students through active methodologies. The professors mainly highlighted discussions and debates, roundtables, work groups, and case simulations, using methods in which everyone participates and debates the themes proposed.

[...] I use absolutely everything considered active methodologies; I work with groups, like this semester, we have roundtables led by the students [...]. So they even bring out posters to discuss an attention-grabbing idea.

I think that simulations are quite interesting. If they simulate problems, then I have the problem and the question of how a leader like you would solve it[...]. That we can use more participatory methodologies, problematized, and simulations more explicitly.

Today, the component is still based on a banking methodology, which is conservative and traditional. [...] But there is an expectation of changing that. This learning process is built with the teacher rather than only received to make students more participatory.

Additionally, some professors did not encourage leadership teaching because they do not work with such content or present any strategy with this purpose. Nevertheless, they said they encouraged critical thinking and decision-making.

None, because I don’t teach leadership[...] the methods I use and that I’m most interested in awakening in people is the ability to think, the ability to decide, the ability to insert yourself, and the ability to act, but these abilities do not depend on me, they depend more on the students[...].

[...] I don’t have any strategy[...] The strategy I use in practice is to make it easier for students to become empowered with what they are doing[...].

The answers indicate that the didactic strategies (e.g., roundtables, debates, teamwork, simulations with problems) were not recognized by most interviewees as necessary for educating leaders, which corroborates with a perspective still based on the fragmentation of components by specific disciplines. However, the context evidenced by the reports reinforces that in some courses, the leadership approach is not clearly expressed and, therefore, is no longer addressed, despite its importance for professional performance.

**Document Analysis of the Program’s Curricular Components**

The analysis of the teaching plans of the curricular components and the program’s pedagogical project shows that no direct relationship is presented in the syllabus with the term leadership. Additionally, not all components address or approach the teaching of such competence. Thus, Table 1 presents the syllabuses that came closest to teaching leadership.
### Table 1. Curricular components associated with the development of Leadership

<table>
<thead>
<tr>
<th>Curricular components</th>
<th>Syllabuses’ excerpts</th>
<th>Analysis of Objectives’ excerpts</th>
<th>Methodologies contained in the teaching plans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management and continuous education in Health and Nursing</td>
<td>“Work process in health and nursing. Conflicts at work. Participatory decision-making process. Strategies, mechanisms, and tools in the management process.”</td>
<td>“Understand the work process in health and the influence of different administrative styles”; “Identify and understand the health services’ management models”; “Recognize and operationalize management tools of health systems and services in Brazil.”</td>
<td>“Theoretical content [...], case studies, guided studies, discussion forums, analyses of problem situations, lectures.”</td>
</tr>
<tr>
<td>Nursing care provided to people in the Hospital Context</td>
<td>“Approach to risk management, safety and quality of care [...] Discussion on the organization of the work process [...]”</td>
<td>“Critically analyze the efficiency of Systematized Care.”</td>
<td>“Dialogue class; Lecture and dialogue class; guided studies; group dynamics; interview dramatization; establishment of diagnoses and care plans; reading and analyses; practical laboratory classes to train skills using simulations in the health field[...]”</td>
</tr>
<tr>
<td>Nursing Care provided to People in the Hospital Context in Urgent and Emergency Situations</td>
<td>“Practical activities in a hospital environment and realistic laboratory simulations based on the extended clinic.”</td>
<td>“Reflect upon the role of nurses in emergency units”; “Developing critical-creative reasoning in the face of emergency interventions [...]”; “Stimulating the nursing student’s interpersonal relationship with the multidisciplinary team, user and family.”</td>
<td>“Theoretical-practical classes [...], problematizing and contextualizing with practice, critically reflecting on nursing care [...]”</td>
</tr>
<tr>
<td>Health Education</td>
<td>“Liberating pedagogical proposals committed to the development of solidarity; of citizenship[...]”</td>
<td>“Discuss the pedagogical ideas that underlie the critical, dialogic, and participatory conception of health education.”</td>
<td>“Interaction, participation and dialogue[...]”</td>
</tr>
<tr>
<td>Curricular Internship II</td>
<td>“Inserting students in a real-world situation of the work process in nursing within the scope of nursing care in primary care.”</td>
<td>“Build new knowledge, skills, and abilities from the interaction with care practice and management in the primary care context”; “Deepening knowledge of the SUS management process [...]”.</td>
<td>“Interactive meetings, dialogue classes, workshops, seminars, small investigations and analyses of situations observed or identified at work and learning environments [...] field activities[...], case studies.”</td>
</tr>
<tr>
<td>Seminars on Ethics and Bioethics IIA</td>
<td>“Bioethical principles that involve professional responsibility and decision-making in the daily nursing routine.”</td>
<td>“Express situations concerning the need of making decisions in the care of individuals, families, community, and work team.” “Express experienced situations of need for decision-making in the care of the person, family, community and work team.”</td>
<td>“Present movies to make critical and reflective analyses [...]”</td>
</tr>
</tbody>
</table>

**Source:** developed by the authors

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**DISCUSSION**

As for the training of professors, most had a doctoral degree and teaching experience in addition to experience providing care in health services. Such experience enriches the teaching-learning process on the subject of leadership. In addition, such a multidisciplinary faculty expands the understanding of the importance of teaching leadership in undergraduate programs for professional improvement.

Furthermore, the professors’ development of pedagogical practices must be based on problem-solving analyses, which allow them to assess their pedagogical praxis\(^{(12)}\). In Freire’s...
conception, an individual develops and grows through a critical and reflective praxis as a social being in constant construction, capable of causing changes in the world\(^{(7;16-18)}\). Thus, in their journey, professors need to understand themselves as social beings, given the importance of their actions during the training of students, especially those in the Nursing field.

It became evident in this study that, from the professors’ perspective, leadership is understood as a competency or ability of individuals to develop themselves throughout their careers. However, some interviewees consider that some people are endowed with leadership. The possibility also emerged of approaching leadership in various pedagogical opportunities that permeate teaching in an undergraduate Nursing program by building theoretical skills.

Corroborating these findings, leadership is characterized by components that permeate the multidisciplinary healthcare team’s decision-making, communication, and management processes. Likewise, responsibility, commitment, and empathy are essential for managing people. During the teaching process, competence-based learning is essential for the initial training of nurses. Therefore, professors need to plan and develop innovative strategies to facilitate critical and reflective learning from the perspective of active subjects\(^{(5)}\).

That said, leadership should be considered a topic that instigates debates due to the breadth of its meaning. There is not a single definition thus far that can be applied to all professions and all their aspects\(^{(19)}\).

There is a direct relationship between leadership and team or organization management. However, it can also be understood as a range of skills or individual characteristics of the relationships between a leader and his/her collaborators. As this is an important attribute to be developed by nurses, it should be strengthened during undergraduate studies to improve personal, organizational, and patient outcomes\(^{(19-20)}\). In this sense, self-development and self-knowledge become relevant for building managerial skills.

Regarding the relationship between leadership, managerial capacity, and teamwork, we verified that the professors consider it to be integrated into the managerial dimension and is associated with the ability to lead a group and direct nursing activities in the work environment. Thus, leadership becomes crucial considering the need for organizing and balancing decision-making to provide a harmonious environment and make each group member’s potential explicit. Furthermore, an international study\(^{(21)}\) found similar results and reinforced the need for people to work collaboratively. In this regard, leaders enhance changes in relational interaction, which contribute to constructing a harmonious work environment.

From Freire’s perspective, teaching is constructed through community and democratic participation to acquire knowledge that contributes to changes in the real world and recognize the relevance of the educational role\(^{(9)}\). Therefore, the conduct of professors in this training process towards leadership is essential, as well as the ability to encourage students to express their critical reflections, promoting their empowerment and autonomy in the teaching-learning process.

Regarding didactic strategies professors adopt to facilitate the development of leaders, the participants emphasized some active and problematizing methodologies, such as problem situations, dialogue classes, and participatory and problematizing lectures. Other reports expressed that the professors sought to innovate with methods that contributed to learning leadership in Nursing.

The participants’ reports are consistent with the methodologies described in the teaching plans of the curricular components, which include the courses: Management and Permanent Education in Health and Nursing, Nursing Care for People in the Hospital Context, Health Education, and Curricular Internship II, that sought to implement lectures and dialogue classes, group dynamics, real-world simulations in laboratories, problematization and contextualization of practical activities, roundtables, workshops, seminars, and case studies, among other features characteristic of active methodologies.

These methodological proposals relate to how educators develop learning resources, with guidelines that favor the autonomy and critical training of students through actual or simulated
experiences that encourage the identification of solutions to problems faced in the practice of nurses in their different contexts\textsuperscript{(5,12,23-24)}. Active methodologies are described by a set of strategies applied in the teaching and learning method that seeks to provide the construction of knowledge through theory to achieve the active participation of students to promote action-reflection-action, understanding of the world context, and a continuous and motivated learning\textsuperscript{(12)}.

It contributes to awakening nursing students’ commitment to their education so that they picture themselves as the core of the educational process. In addition, there are changes in the role of professors that can facilitate the empowerment of students, allowing them to be autonomous while abandoning traditional teaching methods\textsuperscript{(9,12)}.

From the professors’ point of view, the lectures, although often considered typical of the traditional teaching model, were necessary to complement the teaching of the topics under discussion. According to Freire, in the conception of an anti-banking educator, even lectures would not be classes in the traditional sense but rather meetings in which students seek knowledge instead of knowledge being transmitted only\textsuperscript{(9,16)}. Therefore, Freire does not disregard a professor’s lecture and the exposure of ideas, recognizing that not all expository classes are based on the “banking” concept. Instead, Freire draws attention to the educators’ intention, considering that lectures may obscure reality. Hence, even when professors give expository classes or coordinate discussions, they should shed light on the real-world context, value content, and dynamism and approach the knowing object by guiding students critically\textsuperscript{(18)}.

Based on Freire’s assumptions, a passive curriculum based on lectures represents an impoverished pedagogical practice and a teaching model that is more compatible with the dominant authority in society that drastically affects students’ creative potential\textsuperscript{(18)}. In the banking education model, educators are the subjects who, through their narrative, guide students toward mechanical memorization. The students, in turn, are static and do not share their experiences, so there is no communication, only “communications” from the educator to students\textsuperscript{(9)}.

In this study, we identified that professors understand expository classes as a conservative and little participative format within a banking methodology, in which educators still transfer much theoretical knowledge. However, there are perspectives considering the possibility of adopting active methodologies in teaching leadership, with the active participation of students, also devising innovations that favor students’ empowerment and critical thinking.

It is worth mentioning a different perspective of some professors, who reported difficulties in addressing nurses’ leadership, because it is not content formally established in the curricular component or because they believe it to be an innate attribute that cannot be taught. Note that these professors did not explore any theoretical content on nurses’ leadership in their classes. Although they sought to awaken abilities to think, decide, and act, they knew that acquiring these depended on individuals. However, it is salutary to emphasize that, in general, few professors do not focus their pedagogical practices on training nurses’ leadership and do not use strategies aimed at this subject.

Freire highlights the need for educators to be creative, take the initiative, and set an example of how to articulate knowledge, encouraging students to develop their initiative and responsibility\textsuperscript{(18)}. For the traditional teaching model in the health field to be transposed, it requires that professors value pedagogical training as essential knowledge for competent teaching practice, moving away from an amateur and immobilized educational practice\textsuperscript{(16)}. Collective participation, which actively engages professors and students intending to foster the leadership learning process, facilitates the co-creation of improvement opportunities through theoretical discussions and as a result of experiences in different training settings.

The literature highlights the active learning model, learning in the services, experience simulations, and clinical integration. Therefore, leadership is a fundamental component of managerial and clinical practice\textsuperscript{(22-23)}. In this conception, even though teaching leadership in the undergraduate program is a challenge for professors, it requires deeper discussions to provide opportunities to update knowledge and
encourage adherence to methodologies that foster the development of leaders in nursing, essential for professional practice (24).

This study’s limitation concerns the fact it was conducted in a public university, not including private institutions. Hence, it is valid to expand the interpretations with the participation of more professors to evaluate their strategies to teach leadership in nursing.

Thus, this study contributes to valuing leadership teaching among future nurses, as they will soon deal with the complexities and demands of the job market. In addition, the results can support innovations by higher education institutions to expand the use of teaching tools that help improve health services.

CONCLUSION

This study analyzed the perception of nursing professors in the formation of leaders and the didactic strategies that facilitate teaching this competence. The analysis showed that leaders need personal and relational training for three main reasons: to expand their knowledge and acquire skills that allow them to perform actions aimed at nursing care, develop attributes to manage a group of people in pursuit of common goals, and to be able to identify the strengths of each member of a team.

Using didactic-pedagogical strategies to train nurses was considered a strength, considering that professors were committed to stimulating theoretical-practical knowledge and research through problematizing discussions and critical reasoning with active methodologies. It is an important conduct, as it allows students to explore the different learning scenarios and experience real-world situations in healthcare services. Additionally, the teaching plans and the professors’ reports on various aspects align with nurse leaders’ training.

This study also enabled discussing Freire’s concepts, relating them to some elements of leadership, such as praxis of actions and awareness of the subjects being educated and educators. The professors’ perceptions point to a practice of leadership constituted by critical creativity in a democratic and participatory manner.

The findings are essential to teaching leadership in nursing, as the use of pedagogical methods that actively introduce students to the learning process contributes to improvements in care practice, favoring the learning of future nurses, who, in turn, will have a more critical and reflective view of their actions and, as team leaders, they will be better qualified to work as a team, to lead, make decisions, and achieve common goals.

Finally, studies conducted in other training scenarios are suggested to reinforce the importance of implementing teaching methodologies that can support and offer greater robustness and critical thinking in decision-making and other aspects that permeate leadership in nursing.

PERSPECTIVAS DOCENTES SOBRE ENSINO DA LIDERANÇA NA FORMAÇÃO DO ENFERMEIRO

RESUMO

Objetivo: compreender o ensino da liderança na formação do enfermeiro, a partir das perspectivas de docentes. Método: estudo qualitativo, de método estudo de caso, realizado com 36 docentes de uma universidade pública localizada no Estado da Bahia. Os dados foram coletados por meio de entrevistas semiestruturadas e mediante investigação documental e submetidos à análise temática, com auxílio do software Nvivo. Adotou-se o referencial teórico de Paulo Freire. Resultados: a liderança envolve autodesenvolvimento, capacidade gerencial e trabalho em equipe. As estratégias didáticas facilitadoras utilizadas no ensino desta competência contemplam metodologias ativas, aulas dialogadas, discussões críticas e problematizadoras. Conclusão: é importante impulsionar debates e pesquisas sobre o ensino da liderança em enfermagem a fim de estimular o desenvolvimento dessa competência ainda durante a formação com o intuito de, dessa forma, contribuir para a qualidade da assistência em saúde.


PERSPECTIVAS DOCENTES SOBRE LA ENSEÑANZA DEL LIDERAZGO EN LA FORMACIÓN DEL ENFERMERO
RESUMEN

Objetivo: comprender la enseñanza del liderazgo en la formación del enfermero, a partir de las perspectivas de docentes. Método: estudio cualitativo, de método estudio de caso, realizado con 36 docentes de una universidad pública ubicada en el Estado de Bahia/Brasil. Los datos fueron recogidos por medio de entrevistas semiestructuradas y mediante investigación documental y sometidos al análisis temático, con ayuda del software NVivo. Se adoptó el referencial teórico de Paulo Freire. Resultados: el liderazgo involucra autodesarrollo, capacidad gerencial y trabajo en equipo. Las estrategias didácticas facilitadoras utilizadas en la enseñanza de esta competencia contemplan metodologías activas, clases dialogadas, discusiones críticas y problematizadoras. Conclusion: es importante impulsar debates e investigaciones sobre la enseñanza del liderazgo en enfermería a fin de fomentar el desarrollo de esa competencia aún durante la formación con el fin de, de esa forma, contribuir para la calidad de la asistencia en salud.

Palabras clave Liderazgo; Enfermería; Educación en Enfermería; Pregrado en Enfermería; Aprendizaje.

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