

Nursing students' experiences in selfcare during training process in a private university in Chimbote, Peru

Experiências de estudantes de enfermagem no cuidado de si durante o processo de formação em uma universidade privada de Chimbote, Perú

Experiencias de estudiantes de enfermería en el cuidado de si durante el proceso de formación en una universidad privada en Chimbote, Perú

Carmen Leticia Gorriti Siappo¹

Yolanda Rodríguez Núñez¹

Ivone Evangelista Cabral²

1. Universidad Católica los Ángeles de Chimbote. Peru.

2. Universidade Federal do Rio de Janeiro. Rio de Janeiro - RJ, Brazil.

ABSTRACT

Living a healthy lifestyle implies questioning the value of selfcare as a part of student's experiences during their undergraduate course. **Objective:** To describe and understand the nursing students' experiences of selfcare during their professional training. **Methods:** Life story, applied through an open interview with 22 nursing students from a Peruvian university, in 2013. The content analysis generated the following categories: conceptualization of care and learning a selfcare. **Results:** Care is a selfcare and wellbeing, something new to be explored. At first there are unsatisfied basic human needs that change when the students are prepared to take care of others. **Conclusions and implications:** The teaching of health care influences the process of being and living healthy. It is necessary to raise awareness of the humanistic training of the professional nurses in order to encourage them to care for themselves.

Keywords: Nursing care; Nursing students; Nursing education; Selfcare; Qualitative research.

RESUMEN

Para vivir con estilo de vida saludable cuestionase el valor de cuidar de sí y de otro en las experiencias del estudiante en la formación pregrado. **Objetivo:** Describir y comprender las experiencias del estudiante en el cuidar de sí durante su formación profesional. **Métodos:** Historia de vida, aplicado por entrevista abierta a 22 estudiantes de Enfermería de una universidad peruana, en 2013. El análisis de contenido generó las categorías: conceptualización del cuidado y aprendiendo a cuidar de sí. **Resultados.** El cuidarse es autocuidado y bien-estar, algo nuevo a ser explorado. Al principio hay insatisfacción de las necesidades básicas humanas que cambian cuando las estudiantes de enfermería son preparadas para cuidar a otros. **Conclusiones e implicaciones:** La enseñanza del cuidado influencia el proceso de ser y vivir saludable. Es necesario sensibilizar la formación humanística también del profesional de enfermería para cuidar de sí.

Palabras clave: Cuidado de enfermería; estudiante de enfermería; Educación en Enfermería; Autocuidado; Investigación cualitativa.

RESUMO

Para viver com estilo de vida saudável questiona-se o valor de cuidar de si e do outro nas experiências dos estudantes, no curso de graduação. **Objetivo:** Descrever e compreender as experiências dos estudantes no cuidar de si durante sua formação profissional. **Métodos:** História de vida aplicado por entrevista aberta com 22 estudantes de enfermagem de uma universidade peruana, em 2013. A análise de conteúdo gerou as categorias conceitualização de cuidado e aprendendo a cuidar de si. **Resultados.** O cuidar de si é autocuidado e bem-estar, algo novo a ser explorado. Ao princípio havia insatisfação das necessidades humanas básicas que mudou quando foram as estudantes preparadas para cuidar de outros. **Conclusões e implicações:** O ensino sobre cuidado influencia o processo de ser e viver saudável. É necessário sensibilizar a formação humanística também do profissional de enfermagem para cuidar de si.

Palavras-chave: Cuidado de enfermagem; Estudante de enfermagem; Educação em Enfermagem; Autocuidado; Pesquisa qualitativa.

Corresponding author:

Ivone Evangelista Cabral.

E-mail: icabral444@gmail.com

Submitted on 08/04/2015.

Accepted on 11/26/2015.

DOI: 10.5935/1414-8145.20160003

INTRODUCTION

Nursing is a scientific and humanistic profession, whose role is to provide care at different levels of prevention and health care, taking into consideration people's interculturalism and it is designed to ensure the comprehensive training of students and their performance in offering service for the society¹. The main reason of nursing and its subject of study is taking care of people. The care is a disciplinary construct and professional action as a whole, seen from a holistic point of view and in biological, psychological, social, cultural and ethical dimensions. In fact, the conceptions, perceptions and values that the person has regarding his or her health are the starting point for such care².

There are few studies on nursing education that address the students in the course of their professional training, experiences that they face in their college life, in the selfcare or when they learn to care during their nursing education. The vast majority of research has been concerned with studying the interactions in clinical practice and in institutions where students do their field practice, focusing mainly on how students build their professional identity, practice nursing and on the relationship tutor-student during the practical experience, among others^{3,4}. The subject of these researches is the way the nursing students take care of themselves and how they apply on themselves what they have learnt about promoting health and quality of life by allowing them to value the care and then to be able to look out for others.

Starting the university life implies a series of transformations in the students' life, having effect on their health. In addition to that college students are a group of mostly young people between 18 and 25 years old, therefore they face a transitional stage to adulthood⁵.

The intense university routine can compromise students' daily activities. It is very common for students not to eat, relax or sleep properly so that they can fulfill their duties. Therefore, in order to take advantage of their right to live a healthy lifestyle, they need to question the value of taking care of themselves and others. Thus, it is necessary to raise awareness of the importance of care, process of being and living in a healthy way just from the beginning of their professional training.

However, at the university, where the future nurses complete the professional training, do not assume the role of institution that promotes health, therefore it does not promote selfcare abilities of student, which would help them to establish healthy lifestyle. Until today students are trained to care for others but not to take care of themselves. Universities play a leading role in the society in which they are embedded. Their aim is to develop knowledge, they are scene for professional training of citizens and responsible people and, through education, research and social responsibility, promote the development and changes in several national and international domains.

The selfcare is one of the variables involved in the teaching-learning process applied in the education of nursing student. In this sense the concern of universities is to provide quality education and identify how the students take care of themselves in order to, being healthy and well, deal with the obstacles that

stand in the way to complete their tasks and the connection of these obstacles with the students' academic performance⁴.

Therefore, universities are required not only to provide the training in a specific discipline, but also to promote the leadership and strengthen behavior and attitudes that prepare a comprehensive, critical, thoughtful professional and agent of change; health and high quality of life promoter is also essential^{3,6}.

It is necessary to know how students learn, how they assimilate and practice the care; if they internalize the care as a value and if the academic context promotes selfcare behaviors. This paper proposes as an object of study the experiences of nursing students in the selfcare during their professional training. As an objective it aims to describe and understand the students' experiences in taking care of themselves during their professional training in an undergraduate course at a Peruvian University.

LITERATURE REVIEW

In its historical process, nursing has inherited a philosophy of responsibility to care for human life, derived from humanism that gives foundation and meaning to its practice, to achieve satisfaction, health and human development. This implies respecting the culture of the people who are being cared for, establishing interrelation and quality of care. The care is the ontological and epistemological part that serves as a guide for axiological aspects of its professional performance, therefore it is necessary to understand the meaning of nursing care. Ensuring that the nursing students understand it and apply it in their lives is a must⁷⁻⁹.

In this learning context, teaching gains an important role because it becomes a medium that encourages and directs students to meet each other and build knowledge essential for their own interest and educational expectations. Its anthropological basis resides in the human ability to learn whole life, the university, true to its own essence, must remain the place where the knowledge is pursued¹⁰.

Taking care is an act of life, which lets the life continue and develop. Collière¹¹ believes that the care is necessary for life to exist. For the author, care is an art that precedes all the other arts, without it the existence would not be possible, it is the source of knowledge in all cultures. The care is present in all the media, in every culture and it is the starting point for all forms of social organization; its goal is to maintain and ensure the life continuity of any group, regardless of the climate and environmental resources.

In accordance to Collière¹¹ conception of care, the person undergoes a change from a being who is cared for to one who takes care of himself or herself and finally to someone who cares. *To be cared for* means to make up for everything one cannot do, in order to develop abilities to act or those that are essential to live, grow and awake to the world. *Taking care of oneself* assures every day selfcare, those activities one cannot skip, such as eating, washing, dressing, removing, among others, and also sharing with others. *Caring* is to provide care for others who may

be unable to take care of themselves in full extent due to their age or illness, injury in an accident or temporary condition.

Human beings who belong to different cultures of the world were taking care and continue to take care of others most of their life time since the beginning of human existence. This fact is the true source of care because caring is as old as the world and as cultural as the diversity that characterizes humanity. This reality emphasizes the need to study and teach the human sciences in whole nursing education¹².

Heidegger¹³⁻¹⁵ conceptualized care as a basic existential and ontological phenomenon. In other words, the way to be first of all human beings and his relationship with the world, in the form of vigilance, concern with himself and the future. In short, *care is the relational meaning of life*, it is the original structure of human existence, in time and in the world. *The genuine care* is the one equal to selfcare and the one which takes a chance for self-help (in future perspective), enjoying the freedom it has. *The inauthentic care* is taking care in an obsessive way, taking care of everything except for ourselves or taking care of the other person to the point that he or she becomes dependent on us. Care is a part of the original structure of being-there-in-the-world, there is a priori of all factual positions and behaviors of being-there, it is already there. Care is an essence of being a man/woman, which makes the human being the bearer of vital care^{16,17}.

The "way-of-being-in-the-world" structures the manner the man interacts and coexists with the world around him; in the form of care, it allows the human being to live the fundamental experience of value, of what is really important and definitely counts. It is not a utilitarian value, only for his use, but the intrinsic value of things. From that substantive value arises the dimension of otherness, respect, sacredness, reciprocity and complementarity¹⁵⁻¹⁹.

Therefore, taking care is a process of development: to care is to help growing and finding fulfillment, and to achieve that there is a common pattern: while taking care, one experiences the other being, so that he can be considered a being with capabilities and the need to grow. The same applies to an idea. While experiencing the other person or an idea, there is no domination or manipulation, only trust^{16,17}.

METHODS

Life history method of qualitative study was applied. Bertaux¹⁸ defines it as a methodological procedure using history of life that the subject tells the interviewer exactly as he experienced it. The method directs the research at the point of convergence or divergence of human beings in their social conditions, culture and praxis, in the context of socio-symbolic relationships and historical dynamics.

Furthermore, the life history method means creating a story of how an individual depicts aspects of his past that he considers relevant to the current situation. The test person (student) tells a part of his/her life experience (selfcare) and experiences (related to the care for others) according to his/her own perceptions, which helps to meet the researcher's requests.

Therefore, it is quite appropriate to use it to study social situations, that involve all the secrets, making intimate knowledge of the subjects indispensable in order to explore the obscure trends that shape social realities of various categories. In this sense, the method contributed to a closer relation with nursing students, who share their experiences and concepts, providing their own interpretation on the selfcare.

An in-depth interview containing open-ended questions was applied for the data collection¹⁹, which is a communication process where two parties are confronted; on the one hand, the researcher with defined project and on the other hand the interviewee, who accepts the proposal to participate in the study and describe a part of his or her life experience in accordance with the researcher's requests. It is a study that focuses on an interpretation of events that had strong impact on the interviewee's life. The perceptive filter is decisive when it comes to the selection of facts and even certain aspects, finally putting its own and subjective hallmark on the narration. The narrator relates his life, organizing the story in a hierarchy, giving value or devaluing certain aspects and reinforcing others.

The life history interview should be extended, with a constant interaction between the researcher and the informant. The observation, memories and work plan should focus on one topic. The interview should be open, which means without previously prepared script, where the subject is asked to speak freely about his or her life or about a certain period or event in which he or she participated^{19,20}.

Using life history as a method, implies recognizing that one of the connotations of common sense is the unusual language. It means talking about the history of life, because life is a story and life cannot be separated from all the events of an individual existence understood as a story and narrative of this story¹⁸.

The individual interview with each student was a conversation with a duration ranging from 30 to 40 minutes, but based on questions that motivate social interaction. The nursing students began to talk answering the motivating question "Tell me about your college life, in relation to the selfcare" and they finished when they thought there was nothing else to add.

The field research was conducted from March to May 2013. The audio was recorded on cassette in order to obtain greater accuracy of the data, the reason is that retrieval of information from memory and the notes is not as reliable.

Research participants were 22 nursing students who were attending fifth year of university course (IX and X term) at a private university in Chimbote, Peru, in the academic year 2013 and doing an internship at that time. In order to establish the number of participants the snowball sampling technique, on basis of the saturation principle, was used. The interviews were carried out in the hospital areas and community of Chimbote and New Chimbote that offer an opportunity for internship, after previous coordination with the head of the institution and the internship tutors, who were informed about the purpose and research method. At the same time, an initial introduction was made for each student, requesting his or her voluntary participation in the research.

During the course of the study the ethical principles of the scientific research were strictly followed²¹. The students were informed about the research objectives, they were granted the privacy and confidentiality of provided information. The anonymity of participants was assured by identifying the participants with the letter E ("entrevistado" - "interviewee" in Spanish), sequenced in numerical order (E1 ... E22). The privacy of all information was also respected as it was used only for purposes of this research. The participation of each person was registered in the terms of consent, signed by the students who volunteered to participate in the research.

The fieldwork of research was developed at the School of Nursing, Catholic University Los Angeles of Chimbote - "ULADECH Catholic University" - created in 1985, a private higher education institution with canonical legal status, located in the north of Peru in the city of Chimbote. The course of professional nursing was inaugurated in 1999 and it aims to provide the theoretical and methodological foundations of nursing, identifying the area of competence characteristic for this profession and recognizing what kind of knowledge, attitudes and skills are required to offer a person (healthy or ill), family and community a comprehensive care. It also assures the complete formation of the nurse so that he or she can care for the life of an individual, family and community. It is to be achieved through transdisciplinary teamwork in area of health, by encouraging the active participation of students and teachers in promoting the independent nursing practice in the health care sector and by making intensive use of information technology that has become a usual tool in their professional activity.

Later on, the content analysis of the students' statements was carried out. An analytical process of discovering the basic units of meaning that comprise communication and whose appearance may signify something for the chosen analytical objective. According to Bardin²² theme is the meaning unit that is released naturally from the text analyzed in line with criteria related to the theory that serves as a reading guide. In the next step, the collected data were reviewed and the analysis made it possible to systematize information in three stages: pre-analysis, analytical description and referential interpretation.

The pre-analysis stage refers to the organization and selection of transcribed interviews. In the analytical description stage, the interviews are analyzed in depth on the basis of the theoretical framework or hypothesis²¹.

The statements of each student about selfcare, included in whole obtained material, were carefully read in order to find similarities or differences and the main ideas (themes) of each statement were marked using codes (colors) that referred to them.

In order to group the statements, a computer aided technique of color highlighting was applied. It guaranteed credibility at the moment when the statements were separated, and at the same time made it easier to identify the main ideas. In other words, a mapping of constant significative ideas in the narration was created, where each idea was identified by different color,

allowing the classification of common features. At the end of this first procedure, 50 registration units (UR) were obtained. Thanks to system of grouping and regrouping similarities and differences, 23 registration units emerged which then allowed to come up with the units of meaning (US) and two categories presented in this paper.

The relations between the object of analysis and its broader context led to reflections that can generate new paradigms, structures and relations to study, consisted of referential interpretation with the contribution of theoretical structure²³. This stage was a process of systematization where the thematic categories emerged: conceptualising selfcare and learning the selfcare during the professional training.

RESULTS

As for the marital status of nursing students, 21 were single and one married; six students were working, three had family responsibility. All were women between 20 and 25 years old. They were young economically active or inactive females who also look after themselves and care for their family members and by presenting the story of their lives they give meaning to the care.

In the thematic category "conceptualising the selfcare", the students rationalized the meaning of the idea of selfcare, how to take care of themselves, selfcare itself, as a way to feel well about themselves, feel better, both physically and psychologically. It is about an accurate physical, mental and spiritual care in order to achieve a state of well-being.

[...] Taking care of yourself means taking care of our body, our mind, accurate care, being well. In every sense of the word ... be good about yourself. (E1)

[...] Taking care of yourself, is ... the selfcare, taking care of myself both physically and psychologically and spiritually. (E7)

[...] for me health is a precious part, because it helps us feel better. (E17)

Taking care of oneself means giving value to oneself, it means being responsible for oneself taking all security measures into account, acting so that no external agent cannot hurt somebody and harm other people. In this sense, a vision of authentic care is something for oneself and for others, a *sense of relational care for life*, something that lies in the original structure of human existence, in time and in the world. The *genuine care*, in sense of heideggerian philosophy, is the one equal to taking care of oneself, enjoying the freedom that allows to take the opportunity to care for oneself, it means being responsible, taking care of oneself properly.

[...] it means to realize that I love myself and do everything possible to ensure that nothing hurts me, no external agent. (E4)

[...] Take all security measures. (E 12)

[...] to be responsible for ourselves, for how we act, because above all we must take care of ourselves, since we live with other people, and these people may also feel negatively affected if we do not look after ourselves properly. (E10)

[...] it means to protect ourselves, maintain good defenses to prevent ... any disease we may be exposed to. (E20)

Caring of oneself properly means being-there-in-the world worrying, acting, carry out actions and activities that bring health benefits, such as good diet and eating regularly, exercising, managing stress, going out, not neglecting hygiene, living a good lifestyle.

[...] it refers to all activities, actions performed on myself for the benefit of my own health, such as my diet - if I keep healthy eating habits it means that I'll be in good health; it also refers to other activities like exercise, managing stress, among others. (E6)

[...] it means being concerned... respecting eating times ... getting rid of stress, going out ... everything that has to do with what is happening every day. (E19)

[...] as for food, hygiene... all that means health, selfcare. (E20)

[...] taking care of my health living a good lifestyle. (E21)

Selfcare is a health care and health care means prevention, avoiding relations with other people who may be harmful to our health, physical, psychological and spiritual well-being; it means keeping away external agents (drugs, excessive use of computer) that can lead to damages and pose a threat to one's security.

[...] either not getting into drugs, or not ... getting in relation with other people, that may harm our health. (E17)

[...] above all prevention is health care, avoiding the excessive use of computer, for me, it means doing all that kind of stuff. (E19)

In the conceptualization of care, the students associate it with the activities that nobody can skip, such as eating, washing, having fun (sharing with others), avoiding stress, according to the perspective proposed by Collière. However, they broaden this concept bringing up something new, which are all activities one should not do as a way to take care of oneself, such as harmful friendship, drugs and excessive use of computer. Selfcare brings health benefits, helps to avoid illnesses and it is essential to human life, because the person protects himself or herself and the others. This concept of care evokes the definition of health promoted by World Health Organization, namely: health is the complete physical, mental and social well-being and not only the

absence of disease. The concept of care that students learned in the process of training is also linked to the theory of selfcare, for example.

In the second theme category of analysis - learning the selfcare during the professional training, nursing students reveal that in the first terms at the university they felt overwhelmed, they were very busy with all the homework, with more requirements to meet and long study hours. They did not take care of themselves because they did not have enough time. They developed wrong habits, ate junk food, slept late, did not practice physical activity.

[...] I felt a little released, because during the previous terms I worked and that is why I felt overwhelmed. (E1)

[...] Well, at first when we started, our life was very busy, work and all that. What happened then was that, because of schedule we had, because of all the homework we were doing, we developed some habits that were wrong ... we ate junk food, sometimes we arrived home late, we did not do any physical exercises. (E2)

[...] since college life was much more demanding, due to the homework and research as well... (E19)

In addition to studying, the job also produced stress. Changes in lifestyle habits are possible thanks to the family support, which allows the students to dedicate their time only to study, have more control over time and to take care of themselves.

[...] but I'm not working, now I can count more on the support of my parents and it helps me not to feel so stressed anymore, as I was before, and to control my time and take care of myself. (E1)

While they progress in the training, acquiring new knowledge about the care and different lifestyles plays a role in promoting changes in their selfcare practices, in their habits. Every day at the university they learn to live a healthy life, which is good for others and for them.

[...] Well, at the university I have received a lot of information, knowledge letting me live a good lifestyle and back then, maybe before, I ate junk food but every day in college I kept learning and now I have a very healthy life; I know what things are good and what things will be harmful for me and my health. (E6)

[...] As we're learning, acquiring new knowledge about the care and lifestyles, how they affect the health, then we try to change our habits and to improve, we kind of try to find time to exercise and among other things. (E7)

Nevertheless, when the time for internship comes, they had already learned to care, they feel interested in selfcare, less stressed, safer.

[...] Thank God I could pass my studies being healthy, because if I was not in good health I would not be able to get good grades in my university courses, so I had to make a balance between my health and the university. (E16)

[...] Thanks to knowledge that I acquired in college, I took care of my health, because as a health care students we learn to know better our life and our health as well. (E18)

[...] Well, now I feel better, well, it is not so stressful ... Well, I'm having treatment now, I'm taking medication and now in the internship everything is back to normal, everything is stable. (E19)

The care is no longer a theoretical concept of a factual position a priori of "being-there-who-learned", it becomes something new "being-there-of-action". In other words, it has already been and it is always there in the entire original structural, as an essential care.

While students conceptualize the selfcare, they break the barriers of matter, time and space that lies in the essence of the concept of care, which is consistent with Boff's view¹⁷.

DISCUSSION

The care is involved in creating a science based on conscience, focused on life. In an observed situation the meanings narrated by nursing students converge, which leads to transcendence from a punctual vision. Taking care of oneself is a critical inquiry about oneself, about others and the world and the actions that one performs on himself or herself, on the other person and the world; it is a concern with one's own view and paying attention to one's thoughts^{18,19}.

The initial years of college life are very demanding, laborious and occupy all the time that nursing student have. In college students do not have time to dedicate it to themselves, they eat poorly, do not sleep well and do not exercise. Selfcare is connected to training in order to promote the reflection about oneself and the world; thinking about it is obligatory for those who want to educate others²³.

The university should promote flexibility in the curricular structure of training programs, in order to offer students training routes according to their interests, expectations and academic needs. In this sense, training as a preparation of students to care starts with the humanization of care; it is necessary that students first put "the mask on themselves" so that later they can take care of the other person. The idea is that they humanize themselves in order to humanize the care related to the other person.

A humanistic approach to care training needs to go beyond the theoretical approach existing in our education, including the exercise of inter-subjective assistance that involves techniques such as therapeutic listening, music therapy, therapeutic touch, the home care assistance and sensitivity of nursing caregiver²⁴.

The humanistic formation in nursing is more and more present; learners show concern with ethical values, with interpersonal

relationships and emotions in the process of taking care that involves the student/teacher/person cared for and health care team²⁵.

For care education it is indispensable to be familiar with care, experience it and consider the care as an interactive process embedded into culture. In addition to a purely technical performance, it is essential to convey and demonstrate behaviors typical for care, promoting a favorable climate so that students can learn the care as a whole and recognize people as complete human beings²⁶.

The academic experience is very important in the vocational training, it is one of the main challenges for adolescents and young adults who study at the university, for them it is a process of preparation for the job market. The fact is that this step requires several changes in their social and family environment, as well as changes of personal cognitive structures. Meeting the minimum quality demands in vocational training, including selfcare as a part of the teaching and learning process, becomes a commitment for the Nursing School. The meaning of care conceived by the nursing student is formed through factors, implications, contributions, applications, beliefs and attitudes that they assume while they interact with another person^{8,12}.

At the beginning of their studies, nursing students do not value the selfcare, they perceive all the changes and the process of adaptation to the university life as overwhelming, tiring and they also admit that they did not take into account their basic human needs but later they realized the importance of selfcare. The acquisition of knowledge about nursing care, lifestyle and healthy everyday habits become a new set of values associated with selfcare. These findings coincide with research analysis which focused on nursing care and was carried out in different cultural contexts, such as Brazilian and Colombian. A dialogical and esthetic care consists of an open, creative and ethical thinking among the subjects involved, which makes it possible to feel and live in different ways^{7,8,12,26,27}.

The process of selfcare as a base for caring for others implies the need to use other pedagogical methods to provide the adequate teaching-learning process to train future professionals, critical and reflective, in case the students are not prepared to care for themselves; this fact suggests a change in vocational formation. The students need to include selfcare practices in their lifestyle, at the same time the undergraduate courses have to develop strategies to promote them^{3,4,28,29}.

A part of the challenge of training students in the undergraduate nursing course is to respond to the demands and expectations of people seeking to harmonize the relationship with their environment (because without respect for the place where we live, there is no economic wealth and society). Vocational training should require reflection-research-action in order to address the complex problem of the demands and expectations to ensure living conditions in line with civilization progress, order and respect for the natural and social environment. The idea is to offer a formation that meets the expectations and demands of the global ecosystem for its preservation and sustainable

development, acting on the message of global conferences on environmental issues.

When nursing students talked about the meaning of taking care of themselves, they mentioned protection from harm caused by external agents (harmful friendship, drugs and excessive use of computer) or they considered promotion of sensitivity for yourself and for others as one of the important factors of care. This factor allows to gain conscience and helps to become real agents, having their own identity, able to transform their world^{29,30}. Raising awareness of taking care for others was described by students according to an authentic vision of care, as something for oneself and others, in sense of the care as something related to life; they expressed the view that only responsible care means taking care properly.

The students learn that taking care of themselves is the first step to care for others as an act of life, that caring is necessary for life to exist, they learn to start with their own well-being and health as part of the transition from selfcare to care for others. *Self-caring* means that a person firstly cares for himself or herself providing food, having fun, sleeping, taking time for himself or herself and to share it with others. *Caring* means worrying, providing care to others who may be unable to care for himself or herself in some aspects¹¹⁻¹³.

CONCLUSIONS AND IMPLICATIONS FOR PRACTICE

Taking care of oneself, as seen by a nursing student, is a new term to be explored and in some situations it is considered synonymous with the term selfcare.

While the students start recognizing the importance of taking care of themselves, they have the knowledge and link it to the subject; they make connection between the selfcare and the physical and mental (psychological) health as way of being and living well. However, they are people with unsatisfied needs and patterns of basic human needs, particularly when it comes to hygiene, sleep and nutrition, at the beginning of college study. Regarding the selfcare during the professional training, students experience adversity on their way to care for themselves successfully and achieve the goal of becoming health care professionals.

Then, while they are already prepared to guide others and continue their professional training process, changes occur in their habits and lifestyles because they learn about the care as a source of life. To care for others they must take care of themselves; as they are human beings open to changes, they internalize the meaning of selfcare and care for other revealing their own way of life.

The professional training process should be linked to the development of critical thinking so that the students will be able to express the thoughts and ideas in relation to their field of study, to assess their existence in the world and its importance for the human community, as well as their attitude and care practice. This training must also be oriented towards selfcare

and care for others as a value that allows the self-fulfillment of the caregiver and person who is cared for and avoid orienting only towards the technical and scientific aspects of care, as well as competitiveness and excellence of the provided care.

As part of the study implications, university needs to promote an environment adequate for taking care, developing schedules based on student needs, ensuring that the academic workload leaves the student space for himself or herself and his or her family. Doing that, it will be able to train professionals who also contribute to their own well-being and well-being of others. The university needs to broaden the vision of training including a holistic perspective of physical activity, cultural practice and promoting healthy coexistence among peers. The educational model focused on a strictly professional and technical aspects is not contributing to the formation of critical-reflective citizens. Overcoming this model is an ethical and humanistic imperative.

The values and behaviors concerning the care are included in a nursing curriculum to let the students in the future apply the care in order to transform the nursing practice. College authorities should update, reformulate the curriculum, taking into account the experiences of the nursing students, so that it could provide the students-caregivers improvement of the selfcare in order to achieve efficient care for the other people.

Teaching and learning is not an easy task for teachers in the face of the globalized world where the speed of information and technical and scientific progress become a challenge. This challenge turns out to be even more complex when it comes to teaching future health care professionals. It is a big challenge for the nurse-teacher, who needs to have competences that go beyond the mere preparation of a class content or classroom walls, because the nurse-teacher constantly faces different situations in his or her daily work.

It is also recommended to carry out further qualitative and quantitative research about the teaching-learning process in order to reveal the other social determinants that are contributing to the professional training of nursing students, as well as the students' selfcare.

REFERENCES

1. Marriner T, Raile A. Modelos y teorías en enfermería. 7.ª edición. Barcelona: Elsevier; 2011.
2. González MA, Font CM. The nurse teacher. Construction of a new professional identity. Invest. Educ. Enferm. [on line] 2012 set/dez [citado 2015 Ago 10]; 30 (3): [aprox. 7 telas]. Available from: <http://www.scielo.org.co/pdf/iee/v30n3/v30n3a13.pdf>
3. Santos V, Radunz V. O cuidar na visão de estudantes de enfermagem. Rev. Enferm. UERJ [on line] 2011 [citado 2015 Ago 10]; 19(1): [aprox. 6 telas]. Available from: <http://www.facenf.uerj.br/v19n1/v19n1a08.pdf>
4. Ayala Valenzuela R, Pérez Uribe M, Obando Calderón I. Trastornos menores de salud como factores asociados al desempeño de estudiantes académicos de Enfermería. Enfermería Global. [on line]. 2010; 18 feb: [citado 2015 Ago 02]; 1(13). Available from: <http://scielo.isciii.es/pdf/eg/n18/docencia1.pdf>
5. Escuela profesional de Enfermería. Plan Curricular - tercera versión. Universidad Católica Los Angeles de Chimbote. ULADECH Católica. Chimbote, 2011.

6. Muñoz M, Cabieses B. Universidades y promoción de la salud: ¿cómo alcanzar el punto de encuentro? *Rev. Panam. Salud Pública*. [on line]. 2008; [citado 2015 Ago 02]; 24(2): [aprox. 7 telas]. Available from: <http://www.scielosp.org/pdf/rpsp/v24n2/a09v24n2.pdf>
7. Báez-Hernández FJ, Nava-Navarro V, Ramos-Cedeño LL, Medina-López O. El significado de cuidado en la práctica profesional de Enfermería. *Aquichán* [on line]. 2009 aug [cited 2015 Aug 03]; 9(2): [aprox. 7 telas]. Available from: http://www.scielo.org.co/scielo.php?script=sci_arttext&pid=S1657-59972009000200002&lng=en
8. Klijn PT. Enfermería y Globalización. *Cienc. enferm.* [on line]. 2010 jan/abr. [citado 2015 Ago 02]; 16(1): [aprox. 6 telas]. Available from: http://www.scielo.cl/pdf/cienf/v16n1/art_02.pdf
9. Del Sol AA, Rodríguez JL. Influencia del pensamiento humanista y filosófico en el modo de actuación profesional de Enfermería. *Rev. Cubana Enfermer* [on line]. 2007 jan/mar [citado 2015 Ago 02]; ; 23(1): [aprox. 15 telas]. Available from: http://scielo.sld.cu/scielo.php?script=sci_arttext&pid=S0864-03192007000100003&lng=en
10. Campo VMG, Giraldo JEC. Factores de innovación curricular y académica en la educación superior. *Revista Iberoamericana de Educación* [on line]. 2004 [citado 2015 Ago 02]; 33(9): [aprox. 14 telas]. Available from: <http://www.rieoei.org/deloslectores/773Gomez.PDF>
11. Collière F. *Cuidar: a primeira arte da vida*. 2ª ed. Loures: Lusociência; 2003.
12. Rohrbach-Viadas C. Cuidar es antiguo como el mundo y tan cultural como la diversidad de la humanidad. *Cultura de los cuidados* 1997. [en línea] 1(2): 36-39. [citado 2015 Ago 02] Available from: http://rua.ua.es/dspace/bitstream/10045/5240/1/CC_02_06.pdf
13. Heidegger M. *Ser y Tiempo*. Traducción en español: Jorge Eduardo Rivera C. 3ra edición. Madrid: Editorial Trotta S.A, 1995.
14. Kempfer SS, Carraro TE, Prado ML. Historicity and historiography of being-a-nursing student in the construction of care in Heidegger. *Journal of Hospital Administration* [on line] 2014 Set/Oct [cited 2015 Ago 02]; 3(5): [aprox. 6 telas]. Available: <http://www.sciedu.ca/journal/index.php/jha/article/view/3432>. DOI: 10.5430/jha.v3n5p88
15. Waldow VR. *Cuidar: Expressão humanizadora da enfermagem*. 3ed. Petrópolis: Vozes; 2010.
16. Boff L. *El cuidado necesario*. Madrid: Editorial Trotta S.A; 2012.
17. Santos AM. La idea del cuidado en Leonardo Boff. *Revista Tales* [on line]. 2011 jan/dez [citado 2015 Ago 02]; 4(1): [aprox. 10 telas]. Available from: https://revistatales.files.wordpress.com/2012/05/243_nro4nro-4.pdf
18. Bertaux D. *Narrativas de vida: a pesquisa e seus métodos*. Natal (RN): EDUFRRN; São Paulo: Editora Paulus; 2010.
19. Souza ML, Cometto MC et al. *Investigación cualitativa en Enfermería. Metodología y didáctica*. Serie Paltex. Washington: Organización Panamericana de La Salud; 2013.
20. Olabuénaga JIR. *Metodología de la investigación cualitativa*. 5.ª edición. *Série Ciências Sociais*, vol. 15. Bilbao: Editora Universidad de Deusto; 2012.
21. Bardin L. *Análise de conteúdo*. 1ª ed. São Paulo: Edições 70; 2011.
22. Lanz C. El cuidado de sí y del otro en lo educativo. *Utopía y praxis latinoamericana* [on line] 2012 jan/mar [citado 2015 jan 13]; 17(56): [aprox. 5 telas]. Available from: <http://www.redalyc.org/pdf/279/27921998005.pdf>
23. Nunes ECDA, Silva LWS, Pires EPOR. Nursing professional education: implications of education for transpersonal care. *Rev. Latino-Am. Enfermagem* [on line] 2011 Apr [cited 2015 Aug 03]; 19(2): [aprox. 8 telas]. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0104-11692011000200005&lng=en. <http://dx.doi.org/10.1590/S0104-11692011000200005>
24. Almeida MA. Concepções de discentes e docentes sobre competências na enfermagem. *Rev. Gaúch. Enferm.* [on line] 2004 abr/jun [citado 2015 Ago]; 25(2): [aprox. 9 telas]. Disponible en: <http://www.lume.ufrgs.br/bitstream/handle/10183/23521/000504616.pdf?sequence=1>
25. Cohen JA. Caring perspectives in nursing education, liberation, transformation and meaning. *J. Adv. Nurs.* 1993 Apr; 18(4):621-6.
26. Blanchet GA, Pepin J. A constructivist theoretical proposition of cultural competence development in nursing. *Nurse Educ. Today*. [on line] 2015 Nov [citado 2015 Oct 10]; 35(11): [aprox. 10 telas]. doi: 10.1016/j.nedt.2015.05.019. Disponible en: [http://www.nurseeducationtoday.com/article/S0260-6917\(15\)00247-6/abstract](http://www.nurseeducationtoday.com/article/S0260-6917(15)00247-6/abstract)
27. Nunes ECDA, Silva LWS, Pires EPOR. La enseñanza superior de Enfermería: implicaciones de la formación profesional para el cuidado transpersonal. *Rev. Latino-Am. Enfermagem* [on line]. 2011 mar/abr [citado 2015 Ago 14]; 19(2): [aprox. 09 pantallas]. Disponible en: http://www.scielo.br/pdf/rlae/v19n2/es_05.pdf
28. Sebold LF, Radünz V, Carraro TE. Percepções sobre cuidar de si, promoção da saúde e sobrepeso entre acadêmicos de enfermagem. *Esc. Anna Nery* [on line]. 2011 Sep [cited 2015 Aug 03]; 15(3): [aprox. 6 telas]. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1414-81452011000300014&lng=en. <http://dx.doi.org/10.1590/S1414-81452011000300014>.
29. Amilton S, Murray K, Hamilton S, Martin D. A strategy for maintaining student wellbeing. *Nurs Times*. 2015 Feb; 111(7): 20-2.
30. Borges MM, Silva HCP. Cuidar ou tratar? Busca do campo de competência e identidade profissional da enfermagem. *Rev. Bras. Enferm.* [on line]. 2010 oct [cited 2015 Aug 03]; 63(5): [aprox. 6 telas]. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0034-71672010000500021&lng=en. <http://dx.doi.org/10.1590/S0034-71672010000500021>