The FENF/UERJ nursing graduate in the working world

O EGRESSO DE ENFERMAGEM DA FENF/UERJ NO MUNDO DO TRABALHO

EL EGRESADO DE ENFERMERÍA DE LA FENF/UERJ EN EL MUNDO DEL TRABAJO

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ABSTRACT

This is a qualitative study on the satisfaction of nursing graduates from Rio de Janeiro State University (Universidade do Estado do Rio de Janeiro) entering the working world. This study identifies and analyzes the graduates' perception of their practice and experience in the working world. The study is part of the institutional evaluative process subsequent to the curricular reform and implementation of the political-pedagogical project, based on the Critical Theory of Education. The twelve subjects graduated between the years 2000 and 2005. Interviews were applied, and using thematic content analysis two empirical categories emerged: the pleasure from work and the suffering from work. It is concluded that the new curriculum has produced the expected outcomes. The graduates have been performing practices specific to nurses and have proven to be critical and reflexive in their self-evaluations. There is a need for continuing evaluations that would permit to identify the advancement demands of the working market and the associated readjustments in the curricular proposals.

KEY WORDS

Education, nursing. Curriculum. Work. Job market.

RESUMO

Estudo qualitativo da satisfação do egresso da Faculdade de Enfermagem da Universidade do Estado do Rio de Janeiro no mundo do trabalho. Identifica e analisa a percepção do egresso sobre sua atuação e vivência no mundo do trabalho. O estudo faz parte do processo avaliativo institucional subsegüente a reforma curricular e implantação do projeto político pedagógico, baseado na Teoria Crítica da Educação. Os doze sujeitos graduaram-se no período de 2000 a 2005. Aplicaram-se entrevistas, e através da análise de conteúdo temática emergiram duas categorias empíricas: o prazer advindo do trabalho e o sofrimento advindo do trabalho. Conclui-se que o novo currículo tem produzido os resultados esperados. Os egressos vêm desempenhando atribuições de competência do enfermeiro e mostraram-se críticos e reflexivos em suas auto-avaliações. Considerou-se que são necessárias avaliações contínuas, capazes de permitir a identificação das exigências evolutivas do mercado de trabalho e consequentes reajustes nas propostas curriculares.

DESCRITORES

Educação em enfermagem. Currículo. Trabalho. Mercado de trabalho.

RESUMEN

Estudio cualitativo de satisfacción del egresado de la Facultad de Enfermería de la Universidad del Estado de Río de Janeiro en el mundo del trabajo. Identifica y analiza la percepción del egresado sobre su actuación y experiencia en el mundo del trabajo. El estudio forma parte del proceso evaluativo institucional subsecuente a la reforma curricular e implantación del proyecto político pedagógico, basado en la Teoría Crítica de la Educación. Los doce sujetos se graduaron en el período de 2000 a 2005. Se utilizaron entrevistas y, a través del análisis de contenido temático, surgieron dos categorías empíricas: el placer devenido del trabajo y el sufrimiento devenido del trabajo. Se concluye en que el nuevo currículo produjo los resultados esperados. Los egresados han venido desempeñando atribuciones de competencia del enfermero y se mostraron críticos y reflexivos en sus autoevaluaciones. Se consideró que son necesarias evaluaciones continuas, capaces de permitir la identificación de las exigencias evolutivas del mercado de trabajo y los consecuentes reajustes en las propuestas curriculares.

DESCRIPTORES

Educación en enfermería. Curriculum. Trabajo. Mercado de trabajo.

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INTRODUCTION

The School of Nursing at Universidade do Estado do Rio de Janeiro (FENF/UERJ) has adopted as its mission and assumes the commitment to prepare nurse citizens who know the problems in their state, through teaching, research and community service activities, to respond to society's health needs, whose responsibility goes beyond purely technical levels and who charge themselves to adopt positions towards the world and life(1).

To rise up to this mission and commitment, in 1996, FENF/UERJ set up an innovative political-pedagogical project, aimed at breaking the ties of traditional pedagogical practice, in which students are considered mere reproducers of customs, who are uncritical and can hardly promote significant changes in their context.

To mobilize significant change processes in health professionals' education, innovative actions are needed that surpass crystallized structures and traditional teaching models, recovering the essence of health work, which stands out by subjectivity in the relation between the caregiver and the care receiver, with a view to constructing comprehensive health care⁽¹⁾.

Thus, through a collective construction, the FENF adopted another paradigm to guide the teaching-learning process, the Critical Education Theory, based on the Problematizing Pedagogy⁽¹⁾.

The Critical Education Theory emerges from the historical critical education approach and is innovative because of its chal- valued in the job world. lenges, characterized by integration, completeness, interdisciplinarity and new concep-

tion of theory/practice⁽²⁾. This way of teaching and learning attempts to overcome the fragmented view of man and prepare critical, reflexive nurses, with a solid historical-social view, permitting better answers to the challenges health practice and social demands impose.

The choice of the Problematizing Method, based on Paulo Freire's premises, moves towards the consolidation of critical, dialectic and mainly dialogical education, capable of attributing students with the role of active subjects in the learning process, acknowledging their characteristics and life history in the socio-economic and cultural context⁽¹⁾.

The abovementioned pedagogical project took long to be set up and put in practice. Initially, in the 1970's, this trajectory was marked by the University Reform, which determined the review of higher education course curricula in Brazil, imprinted the Flexnerian professional education standard, characterized by knowledge fragmentation and specialization and by the incipient correlation between theory and practice. The culmination of this curricular transformation process happened in 1996, when the new Lei de Diretrizes e Bases da Educação (Law of Education Bases and

Aims - New LDB) was issued. At the same time and in accordance with that law, on different occasions, debates took place to define a new nursing curriculum during subsequent SENADEN's (National Nursing Education Seminars) and mainly in the internal universe of the FENF/UERJ⁽¹⁾.

As a result of these discussions, the new teaching conception at FENF/UERJ centers around completeness and uses criticism as a fundamental instrument to interpret the dialectics of reality. Interdisciplinarity is a key element in this new conception. The integrated curriculum permits dynamic content interaction, with a view to understanding the problems deriving from the social reality⁽¹⁾.

In line with the evolutionary curriculum requirements, the new Curriculum Guidelines, issued in 2001, define that nursing education aims to grant professionals the knowledge needed to practice the following competencies and general skills: health care, decision making, communication, leadership, administration and management and permanent education(3).

The main challenge in nursing education is to translate the new LDB's and the New Curriculum Guidelines' deter-

> minations by preparing professionals who go beyond the theoretical-practical dominion of reality, inserted and valued in the job world⁽⁴⁾.

> The personal and social relevance of work should also be taken into account in the construction of the educative process, which implies factors like personal identification with the tasks inherent in the profession, professionals' absorption by the job world, the value of exchanging work, harmony between the goals of work organization and private and collective professional goals. Moreover, it should be re-

minded that work plays a central role in social life (5).

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Man is not neutral in the job market, but has a socially important role to play. Like work is not neutral in men's lives, it also influences its social, psychic, physical and economic spheres.

Studying the workers' relation with work organization and the production of suffering, as well as the subjective dynamics of transforming this suffering into pleasure, the Psychodynamics of Work sees the work process in its double dimension of technical process (work conditions) and work organization. It focuses on the analysis of work organization, i.e. on task division, on the one hand, and on the division of men on the other (in control, surveillance, hierarchy, command, responsibility sharing etc.), and attributes work organization with the pathogenic (or structuring) function of work with regard to psychic functioning⁽⁶⁾.

Changes in the constitution of work, which occur over time and characterize the production restructuring movement, affect new job market scenarios that require certain characteristics from professionals who enter the market and want to remain productive.

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When workers do not manage to overcome the adversities of this new job context, often characterized by precariousness on a global scale, it permits the emergence, in their bodies, of different forms of stress, illness and suffering. This precariousness of work is present in the intensification of job activities, in increased efforts, in accountability, in charges made according to the precepts of targets, competencies⁽⁷⁾.

Despite the adversities resulting from new job structures, however, work is also a source of pleasure and satisfaction. Work is more than an act of working or selling one's workforce in search of remuneration. There is also social remuneration for work, that is, work as a factor of integration in a specific group with certain social rights⁽⁵⁾.

To preserve the social value of work, the agreement between the goals of the educative apparatus and of the job world needs to be maintained. In health, particularly in nursing, the job market, allied with the population's health/disease situation and professional specialization, directly influence the guidelines the health system should determine, as well as health professionals' education and qualification⁽⁸⁾.

A curricular reformulation proposal needs to be based on the conception that the curriculum means the trajectory of actions aimed at nursing education and how this can be possible. The challenge of reconstructing the course Always lies ahead, attempting to make it compatible with the needs of an increasingly competitive job market, demanding critical, reflexive, competent professionals with a scientific background, skills for innovation and power to act⁽⁹⁾.

If innovating pedagogical proposals is relevant, assessing the results of these innovations is equally so. Adopting this conception, the FENF has been discussing the assessment process and considers it essential for the diagnosis, definition of subsequent actions and contribution to the qualification of teaching and education.

Assessing the change in paradigm that guides this curricular reform is fundamental to diagnose the difficulties faced to put the new method in practice. The assessment process is mainly a collective construction, ruled by the academic community, opening up discussion room for teachers and students, always considering the goals of the educative apparatus and their agreement with society's actual needs, which will shelter the future nursing professional in the job market.

Assessing educational institutions is an urgent need, given their commitment to the solution of social problems, their role as producers and reproducers of knowledge needed to respond to the true needs of the context they are inserted in and their public functioning. Assessment is needed to know to what extent these institutions are complying with their commitments to society as a whole (10).

The FENF considers it is necessary to diversify and intensify the assessment forms of the pedagogical process even further, in order to get in-depth knowledge on its edu-

cative potential, society's requirements, the end product of pedagogical work, nursing professional and their absorption in the job world. This task responds to the goal of the Ministry of Education and Culture's (MEC) National Institute for Educational Research (INEP), which underlines the need for research and knowledge on all assessment items indicated by its documents. And one of these items is knowledge about graduates.

A previous quantitative study by FENF faculty⁽¹¹⁾ was important to get to know the graduates' profile, revealing, among other issues, their critical and reflexive characteristics, which has favored reactions to the challenges the job world imposes. The same research raised various questions though, among which the researchers chose to seek answers to the following questions: what about the graduates' satisfaction with their work? Has the Curricular Reform responded to the requirements of the job market?

The relevance of the present study is justified by the need to diagnose the effects of setting up curricular reforms at FENF/UERJ, so as to support the necessary adjustments in the teaching process, in response to social demands, contributing to prepare and offer nurses with critical, innovative, flexible and pro-active profiles to the job market.

OBJECTIVES

The following aims were set:

- To identify FENF/UERJ graduates' perception on their activity and experience in the job world;
- To analyze this perception, apprehending factors that cause pleasure and bother the graduates due to this experience in the job world;
- To discuss the relation between factors that cause pleasure and bother the graduates and the goals of the curricular reformulation at FENF/UERJ.

METHOD

A qualitative and descriptive research was carried out⁽¹²⁾. Participants were Nursing students who graduated between 2000 and 2005, which included the graduation of the first class after the adoption of the new pedagogical proposal, starting in 1996, based on opinion No 314/94 by the Federal Education Council⁽¹³⁾.

The choice of these subjects is also justified by their greater probability of having gained a position in the job world, with a consolidated view on the requirements involved in the job universe. Thus, besides the above determined graduation period, inclusion criteria also comprised the desire and availability to participate in the study, as well as the confirmation of their insertion in the job Market. The subjects' non-insertion in the job market was an exclusion criterion.



Data were collected in October and November 2008. Subjects were contacted at a scientific event, hosted by FENF/UERJ, which facilitated meeting with the subjects and permitted the application of semistructured interviews with four open questions, which were tape-recorded and later transcribed and typed.

All ethical requirements according to Resolution No 196/ $96^{(14)}$ were complied with. Thus, before the start of the interviews, the subjects gave their formal consent to participate in the research through the signing of the informed consent term. The project was submitted for evaluation to an Internal Review Board and received a favorable opinion, registered in protocol No 2199.

Data were treated in the light of thematic content analysis⁽¹⁵⁾. First, the statements were submitted to floating reading, which already revealed the answers that dialectically remitted to the graduates' pleasure and suffering in the job market. Next, in view of the study aims, the registration units were outlined, which comprised different themes that emerged from the subjects' discourse. Fifty-six registration units were identified, which gave rise to the themes. When grouped, these constituted two empirical categories: the pleasure deriving from work and the suffering deriving from work.

RESULTS AND DISCUSSION

The twelve study subjects were predominantly female, with nine women. The subjects' work scenario was predominantly the hospital, where they worked as clinical nursing, following by university/college work as faculty members. It should be highlighted that three of the investigated graduates conciliated their hospital activities with teaching, showing a wealth of professional experiences in different contexts and a more enhanced view on the social role of the educative apparatus.

These study data cannot reveal the generalized condition of FENF/UERJ nursing graduates in the job market, as the number of subjects cannot describe the different and possible work scenarios of nursing professionals. These data, however, are relevant because they indicate an excerpt from reality, reality, which the graduates faced in their job contexts, and can support the planning of curricular proposals to enable future professionals to deal with the peculiarities of the role they play as workers on a daily base.

The analysis of the interviews revealed a dialectic relation between the graduates and the job market. A conception of good and evil was identified, of pleasure and suffering, of accomplishment and dissatisfaction with work; contradictory feelings that interpenetrate and complement one another like the two sides of a coin. This dialectic relation is characteristic of the job world, as the workers' feelings, perceptions, aspirations and desires clash with the work organization, that is, with those who idealized and prescribed the work. Hence, greater or lesser estrangement between the workers and their work will always exist, which can result in suffering. If the workers can transform, create and recreate

within that work organization, however, this gives rise to satisfaction, gratification and the feeling of accomplishment⁽⁶⁾.

1st Category: the pleasure deriving from work

After analyzing the interview contents, it was verified that the subjects performed activities characteristic of nurses, in line with what they were taught during their undergraduate program. Only one subject mentioned that, on some occasions, she performed activities not characteristic of nurses, like when a nursing team member was absent, when she had to perform other team members' activities. A significant part of the subjects, however, established a coherent relation between their tasks and the competencies expected from nurses.

I believe that my responsibilities are actually nurse competencies. [...] I believe that, today, there at the hospital, I think I manage to perform those functions of when we graduate, with that in my head, I manage to deliver care, I manage to help the client, I manage to put in practice the knowledge learned in college (Graduate 10).

It should be highlighted that awareness of nurses' actual professional competencies is constructed throughout the undergraduate program. And, when the graduates get into the job world, they may have to deal with conflicting situations between the anxiety to develop their professional competencies and the job organization's true interests. When individual and organizational goals are coherent, both sides benefit from this harmony. Hence, when this harmonious understanding exists, there is great chance that the worker will feel satisfaction and pleasure.

Professional competency is the ability to mobilize and articulate knowledge, put values and skills in action, which are needed for the efficient and effective performance of activities the nature of the job demands and to respond to unforeseen problems and situations in a given situation and cultural context⁽¹⁶⁾.

Nursing work as an instrument in the health work process is subdivided in different work processes, including: care delivery, management, research and teaching. Among these, care delivery and management are the most evidenced processes in nurses' work.

Nurses' specific tasks are made official in Law No 7.498/86, which regulates professional nursing practice. Among these, heading the service and nursing unit, planning, organization, coordination, execution and assessment of nursing care services, consulting and auditing can be highlighted, besides direct nursing care to severely ill patients⁽¹⁷⁾.

When reporting what they thought about their work, answers remitting to satisfaction predominated. Most subjects reported complete personal and professional satisfaction. Less frequently however, good personal and professional satisfaction and complete personal satisfaction were reported, although the professionals considered themselves partially dissatisfied at the professional level, due to unfair wages.

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I'd say that I'm quite satisfied personally, because I like it a lot to be a nurse and be able to work in my area of preference [woman's health], as well as the opportunity to participate in teams that are very involved with the work that needs to be done. Professionally, I believe that our category has a lot to grow, as our lowest wage level is quite low, so that we need to have more than one job to maintain a reasonable life (Graduate 15).

Due to the low wages, most nursing workers are obliged to have more than one job, so that these categories remain in the health service environment for most of their productive lives. This situation extends the period of exposure to the risks that exist at these sites, which can impair their quality of life at work⁽¹⁸⁾.

Sometimes, when experiencing unfavorable conditions in the work environment, with precarious remuneration, workers may not have psychic or economic conditions to have a healthy life. Various experiences in the work environment can interfere in family and social life, as the individual is unique and complete in the experience of the different spaces that compose his/her existence⁽¹⁹⁾.

About the work aspects that offer pleasure to nurse graduates from FENF/UERJ, direct contact with clients, the possibility to contribute to the satisfaction of patients' needs and their recovery, teamwork, besides professional acknowledgement by clients and the multiprofessional team were present in the subjects' discourse.

I find dealing with clients quite gratifying, as I see it as an opportunity to help these people a little on their route to seek their health. Teamwork is another strong point to me, as I feel that actions, resolutions and undertakings become richer. Sharing feelings, frustrations, joy and relief is also strengthening (Graduate 09).

[...] when the client gives me a positive response, even more when working with severe clients, everyone says that he won't survive and time goes by and he gets discharged, walking. Look, that gives personal satisfaction too (Graduate 12).

These aspects grant pleasure and satisfaction to graduates and remit to relational issues that permeate the dynamics of nurses' work and health' work in general.

Health work is a relational process, produced to live work in the act, that is, based on the encounter between two people, where a game of expectations and productions is established, creating spaces of listening, talking, empathy and interpretation⁽²⁰⁾.

For the subjects, the possibility of exercising autonomy and practicing one's creative and inventive capacity in the work organization they were inserted in, besides the possible acknowledgement for the quality of their work, were characterized as a source of pleasure and satisfaction.

My pleasure rests in the acknowledgement of my work. When you get the opportunity to have new ideas and these ideas are, at least heard, accepted and put in practice, that

is quite pleasurable, to see that you work is important, that it works (Graduate 04).

The three subjects who conciliate care and teaching activities described pleasure-generating aspects in teaching practice. Thus, these aspects were mentioned: professional acknowledgement by the student, the possibility of giving classes, knowing people, renewing and exchanging ideas.

Something else is the student. It's when you serve as a mirror. But that the kind of thing that makes me feel happy, when he tells me like I want to be like you, I want to be a little of what you do, I want to continue believing and that, the student's recognition, I find that very important, I think that touches me (Graduate 02).

Look, I like it a lot to give classes, I've always liked it, I like it a lot to be here and give classes. So, first because you study, recycle, exchange knowledge, know people. I love to give class, so... I find it very good to know people, get updated, develop knowledge, I like it (Graduate 06).

2nd Category: suffering deriving from work

This category addresses situations involving work that cause bother, suffering and displeasure. Among these situations, the most repeatedly mentioned were incompetence and lack of commitment by the health team; precarious work conditions; lack of professional acknowledgement; lack of autonomy in decision making, unfair financial return and excessive involvement in purely administrative activities.

Teamwork, as discussed earlier, can be considered a source of satisfaction and mutual professional growth, but can also generate stress and lack of harmony regarding the goals of work and client care.

What most bothers me is dealing with incompetent people, people overdo it a little that we work as a team. Nurses cannot work alone, you also depend on other people's work. It entails greater responsibility to supervise and observe other people's work, like nursing technicians and auxiliaries, working with incompetent people, who do not like what they do, they're under your responsibility, that makes you more responsible for that. That's very bad (Graduate 20).

Precarious work conditions, which the subjects also described as the *chaos in health*, is part of the care scenario and characterized as a factor of psychic suffering for the nurses. Hence, the inadequacies of work conditions represent great hindrance for professionals, who find themselves impeded from doing their work in a complete, comprehensive and more effective way, and also for clients, who do not manage to use their right to dignified and comprehensive health care.

Often, precarious work conditions. Infrastructure, materials, human resources... You see that an employee is lacking at the sector and workforce is lacking, full of other clients and you don't have that worker and can't get another one anywhere else (Graduate 17).

A contradiction is revealed between the conditions faced at work and the view the graduates constructed on the con-



text of the profession. Most health institutions in Brazil are characterized by low remuneration, work overload, shift work, precious material resources, insufficient human resources, insecurity at work and communication and relational difficulties. All of these factors generate psychic suffering for professionals⁽²¹⁾.

Lack of acknowledgement for the work performed also appears as a cause of suffering at work. The vague roles of nurses make it difficult to construct their professional identity, blocking social return for the profession's importance, which ends up generating demotivation.

So that's quite a bad situation you have to deal with due to the non-recognition of nurses' role, then who's to blame? I don't know. Is it our fault, that we don't gain our ground? I don't know. Or can't we make people understand who we are? Or is it the Council's fault, who does not disseminate it? I don't know who's to blame, it's historical. [...] Everyone at the hospital is a physician, psychologist, nutritionist, pharmacist etc. and the nurse joins everything (auxiliary, technician, nurse and... they are all nurses). I don't want to demerit nursing technicians and auxiliaries at any time, but to define the role of each well. In my opinion, that's not well defined for the population (Graduate 08).

The object of nursing work is care, but nurses' tasks also include administrative activities, necessary to plan and acquire adequate environmental, material and organizational resources to guarantee effective care. Hence, management is also a scientific competency for nurses⁽¹⁶⁾. The subjects' statements, however, reveal that distancing from direct client care and excessive involvement in bureaucratic tasks contribute to nurses' dissatisfaction and, consequently, to the loss of professional identity.

[...] What bothers is to do work that you don't want to, you often know that it is necessary but, depending on the place, you just do administrative work. To give an example: you lose a lot of time to check psychotropic drug boxes, which you could delegate to another person. In private institutions, the secretary, a totally administrative person takes care of materials. You can make much better use of nurses' knowledge, which these administrative professionals do not have. About client care, comprehensive care (Graduate 16).

Direct client care constitutes the essence of nursing work and characterizes the essential function. The remaining functions of administration, teaching and research serve to manage, favor, support and broaden the care function. Hence, it is through direct client care that one can distinguish the nursing profession. In recent years, a trend towards distancing from direct client care is verified among nurses, imposed or not by the organization of work. This reality is characterized as a growing idiosyncrasy of nursing work⁽²²⁾.

CONCLUSION

It is not enough just to propose changes and put them in practice. Analyzing their results is fundamental to obtain a

reliable image of the transformations' efficacy, of their agreements with the initially determined goals and, mainly, of the confirmation that these desired changes actually occurred.

Preparing critical and reflexive professionals who participate in the permanent construction of nurses' professional identity is the primary goal, which guides the implementation of all curricular changes proposed by FENF/UERJ.

Hence, hearing the graduates about their views on the coherence between their attributions in the job world and the professional competencies expected from nurses permits concluding that the adopted curricular changes have been able to comply with the goals of the new paradigm that guides the teaching-learning process the FENF/UERJ has chosen.

This conclusion is strengthened by the fact that the work aspects the graduates described as a cause of bother are not directly related with the educational institution, but with the distortions the goals of the work organization they are inserted in provoke, and which in turn contribute to the fragility of the construction and maintenance process of nurses' professional identity.

Returning to the present study data, in which low remuneration, which demands the need for multiple jobs and thus spoils workers, the precariousness of work conditions, which required increasingly complex adaptation skills, the lack of acknowledgement for the professional role played and the negative distortions of teamwork, with role confusion and lack of defined competencies.

The fact that they understand their professional competencies and can formulate self-criticism on their activities in the job world favors the finding that the established curricular proposal has induced and/or sharpened its graduates' critical and reflexive sense.

The factors that aroused the graduates' pleasure in their job contexts were also revealed in the subjects' discourse and surpass the negative job aspects. Relational aspects, among different health team professionals and between graduates and clients, besides the exercise of autonomy in situations that demand the mobilization of their adaptive and creative abilities in decision making on care, as well as social acknowledgement of the role they played are factors that aroused the graduates' pleasure.

The dialectics of the job world is present in the graduates' discourse, where pleasure and suffering coexist in the job reality the subjects experience. Hence, they are neither mutually annulling nor drastically opposed, but live together in a uniqueness of opposites, which compose one and the same reality.

In conclusion, studies to evaluate the results of curricular changes should not end here. It is fundamental to proceed with this kind of studies so as to identify coherence between the evolution in what the job world has demanded from nurses and what the undergraduate program at FENF has been able to offer the graduates.

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The researchers admit that the data revealed here describe the local and particular reality of FENF/UERJ graduates and cannot generalize the job experiences of graduates from other teaching institutions, which is not the goal of this study. This research, however, supports the evaluation process about the repercussions of implanted curricular proposals, favoring the feedback process of planned and practiced educative actions, guiding future teaching strategies. This favors coherence between what the graduates are offered in terms of education and what they will be demanded when entering the job market.

Moreover, the researchers consider that the situational diagnosis of FENF/UERJ graduates and the job world permits a new look on this context, which permits strengthening changes, through nursing education, supporting the consolidation of professional identity, contributing to improve work conditions, humanizing the job organization and seeking more dignified salaries. It is through professional education that one starts to transform realities that do not befit the anxieties of a professional group.

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