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Editorial



The role of nursing education in the transformation of the U.S. health system

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ABSTRACT

The IOM report on Nursing Education for the twenty-first century emphasizes that the needs of patients as well as of care environment have become more complex, if compared to those of the last century. In order to promote high-quality health care education, nurses need to attain requisite competencies to deliver high-quality care. These competencies include leadership, health policy, system improvement, research and evidence-based practice, and teamwork and collaboration, as well as competency in specific content areas such as community and public health and geriatrics. Moreover, nurses have been called to fill expanding roles that require knowledge of technological tools and management information systems, as well as to collaborate and coordinate teams of health care professionals.

Keywords: education; nursing; united states

The IOM report on Nursing Education for the twenty-first century emphasizes that the needs of patients as well as of care environment have become more complex, if compared to those of the last century. In order to promote high-quality health care education, nurses need to attain requisite competencies to deliver high-quality care. These competencies include leadership, health policy, system improvement, research and evidence-based practice, and teamwork and collaboration, as well as competency in specific content areas such as community and public health and geriatrics. Moreover, nurses have been called to fill expanding roles that require knowledge of technological tools and management information systems, as well as to collaborate and coordinate teams of health care professionals.⁽¹⁾

To meet the increasing demands, the IOM committee suggests higher level of education for nurses in order to better prepare them for the needs of the population.

Many nursing schools have dealt with the rapid growth of health research and knowledge by compressing available information into the curriculum and adding layers of content that require more instruction. New approaches and educational models must be developed to respond to burgeoning information in the field. For example, fundamental concepts that can be applied across all settings and in different situations need to be taught, rather than requiring rote memorization. Competencies also must move from task-based proficiencies to higher-level competencies that provide a foundation for care management knowledge and decision-making skills under a variety of clinical situations and care settings. Additionally, emerging new competencies in decision making, quality improvement, systems thinking, and team leadership must become part of every nurse's professional formation.

Profound changes in the education of nurses, both before and after they receive their licenses, are required to develop a more highly-educated workforce. Nursing education should serve as a platform for continued lifelong learning and should include opportunities for seamless transition to higher degree programs. The committee recommends that nurses and nursing students and faculty continue their education and

engage in lifelong learning. Some programs and educational pathways, such as specialization programs, masters and doctoral degrees, are designed to facilitate academic progression to higher levels of education. Financial support for the implementation of these programs will be important, including funding programs such as scholarships and grants for nurses who wish to pursue this path that also offers opportunities for increasing the overall diversity of the student body and nurse faculty with respect to race and ethnicity, geography, background, and personal experience.

Although the composition of the nursing student body is more racially and ethnically diverse than that of the current workforce, diversity continues to be a challenge within the profession. Greater racial and ethnic diversity among all health care providers leads to stronger relationships with patients in non-white communities, which are likely to grow as the U.S. population becomes increasingly diverse. Nursing schools and other relevant groups need to create programs to recruit and retain more individuals from racial and ethnic minorities, as well as men—who make up just seven percent of all nurses in the profession⁽²⁾.

Thus, some questions related to Brazilian nursing education need to be made:

Regarding health care education, which option would be better: a unified or a non-unified course program?

Are the current pedagogical models able to encourage reflection and critical thought about the reality of the LGBT community in the socioeconomic, gender, ethnic and religious context?

Have poverty, hunger and inequities been addressed with due importance?

Do the *stricto sensu* academic programs meet the real demands of society or only reproduce the current hermetic social model that consider only its own interests?

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