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Historical Notes on Training for Specialists in Pediatric Nursing in Spain

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This paper looks at the development of nurses specialised in infant and child care in Spain. There is, at present, no doubt whatsoever of the need for specialised health care professionals able to deal with the different issues related to children and adolescents. However, as this paper shows, such has not always been the case in Spain.

As university teachers who have all worked in Pediatric care, the authors consider that suitable training for nurses who deal with children has always been, and still is, a priority. This paper highlights some of the peculiarities of training for specialists in Pediatric Nursing in Spain over the past 80 years.

Since the first official plan for nursing studies was implemented in 1915, the development of neonatal, child and adolescent care has undergone major changes in Spain due to the incorporation of nursing models leading to the provision of holistic and integrative care for children and their families. The training of specialist nurses in Spain can be divided into three periods.

The Second Republic: What Might have been but Never was

The first period corresponds mainly to the period of the Second Republic in the 1930s. The Second Spanish Republic was the democracy that existed briefly in Spain from 1931 to 1939, when the end of the civil war (1936-1939) gave way to the Franco dictatorship (1939-1975).

In this first period, there was a move from hospital-centred training to postgraduate training that started a path towards a public health service. The arrival of Gustavo Pittalugato to the National School of Health brought about the creation of the qualifications of Children's Health Visitor and General Health Visitor [1]. Between 1931 and 1936, an agreement between the Board of Further Studies and the Rockefeller Foundation allowed for 14 nurses [1,2], to travel to the United States for training and who, on their return, would join the teaching staff of the National School of Health, more specifically, at the National School of Health Visitors in Madrid.

With a view to reducing the high levels of infant morbidity and mortality, a basic condition of the agreement was that on their return to Spain, the 14 nurses would occupy specific posts directly related to their training, thereby ensuring that the practical nature of the training was put to good use. Unfortunately, the onset of the Spanish Civil War prevented this condition being fulfilled.

The Dark Period of Franco's Dictatorship: A Big Step Back

Following the establishment of Franco's authoritarian regime, nursing in Spain suffered a major setback and was relegated to being dependent on the more traditional hierarchy of Medicine, in terms of theoretical aspects and professional duties.

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The second period, between 1953 and 1977, corresponds to the training of specialists for the introduction of a new qualification in Spain, that of the Technical Health Assistant (ATS) that integrated the duties of nurses, midwives and practicante. Created in 1953, it finalized with the incorporation of Nursing as a university degree in 1977. The speciality training for this new qualification appeared in 1957 with the specialities of midwifery and physiotherapy, which were the first signs of the specialised qualifications in Infants' and Pediatric Nursing that developed from the 1960s. In 1964, the Decree 3524/64 of the Ministry of National Education established the specialization in Pediatrics and Child Nursing [1].

Training for this speciality –only open to qualified nurses was carried out at three kinds of boarding facilities: at the ATS schools, at independent (private) centres specially set up for this training or at the Pediatrics and Child Health departments at faculties of Medicine. Due to the mandatory residential aspect of the training, most specialists were women.

During the first year, the future specialists studied a total of 38 subjects including demography, morbidity and infant mortality, healthy children's life stages, all the preventive approaches for the newborn infant, breastfeeding, immunizations, hygiene and pathology of the newborn child. In the second year, they studied 36 subjects including all medical-surgical aspects and pediatric emergencies. In order to ensure that the students received adequate clinical training in Pediatrics, the different training schools had to have at least six hospital beds.

As in the speciality of midwifery, studies lasted two years. Annual leave was 30 days. The internship and boarding regime was mandatory, which has no rational explanation. Perhaps, and as a hypothesis, in both cases (Midwifery and Specialists in Pediatrics and Childcare), this planning allowed a maximum availability of trained nurses to alleviate the shortage of specialist professionals. Therefore, as they were subject to morning, afternoon and night shifts, the students were on hand for any incidence. It should be taken into account that this period coincides with the expansion of National Health Service hospitals, with many of the large Spanish hospitals, such as La Paz, in Madrid or La Fe, in Valencia, being built at this time.

In this way, the already fully qualified nurses wishing to acquire this speciality provided cheap, but specialized labour.

The University Era: A New Opportunity

The third period, 1977 to the present, corresponds to the specializations for university-trained nurses in Spain. So 2017 marks the 40th anniversary of Nursing as a university degree.

From those first beginnings to the present moment many vicissitudes and conflicts have passed in the exercise of the training of the Spanish nurses to see, among others, the works of various authors [3-5].

Unlike some other EU countries, such as Portugal or the United Kingdom, where the speciality of Pediatric Nursing is obtained as a Master at university, in Spain, the design of training for all graduates in Health Sciences has been made following the pattern of the training for medical specialists. This pathway is called Resident Internal Nurse (EIR). In Spain, doctors, psychologists, biologists, pharmacists follow this same training structure.

The training plan is included in the official two-year programme. During that period they cannot carry out any other type of paid professional activity, since their contract is for paid training. During this time they will acquire competences in clinical management, communication, teaching, research and advanced intervention in pediatrics. These competencies are evaluated based on criteria of learning outcomes. Clinical training is carried out both in the area of Primary Care (health centres, homes) and in Specialized Care (hospitals). The units they have to train in are the following:

- Primary Care: 7 months.
- Pediatric Emergencies: 2 months.
- Pediatrics units: 5 months.
- Neonatal unit: 2 months.
- Neonatal Intensive Care unit (NICU): 3 months.
- Pediatric Intensive Care unit (PICU): 3 months.

Training in Primary Care: Carried out in health centres, infants' schools, primary, secondary and special education centres. The resident nurse must participate in the following programmes that include at least the following aspects: care of the healthy child, care of the child / adolescent with chronic disease, care of the child and adolescent with acute pathology, school health and care of the adolescent.

Training in the field of specialized care is developed in the following hospital care services: Neonatology Unit, Units of Pediatrics (Infant, Preschool, School, Infant Surgery, Oncology, Mental Health, Day Hospital) and specialized clinics where there is a nursing agenda; Neonatal and Pediatric Intensive Care units and Pediatric Emergencies units.

We now fast-forward to 2010, the year in which the training programme for the speciality of Pediatric Nursing in Spain was approved and published. This had been a highly sought-after goal since the 2005 Royal Decree RD 450/2005 [6], was approved, regulating the new Nursing specialities in our country. In this training programme it is understood that the Specialist in Pediatric Nursing is: "The professional trained to provide specialized nursing care, including nursing diagnosis and treatment, for children and adolescents, including health promotion, prevention of illness and assistance to newborn, healthy or ill children and adolescents and their rehabilitation, within a multi professional team

and in collaboration with specialist nurses from other areas will head the area of care for the newborns, children and adolescents, whether healthy or with acute, chronic or disabling pathological processes, being able to plan, execute and evaluate health programmes related to their speciality and develop research and teaching to improve the quality of services and collaborate in the progress of the specialty".

Every year there is a public call for training. In 2017, 114 pediatric nursing positions were offered for the entire national territory.

Bearing in mind that 16% of the population in Spain is under 16 years old [7], this specialized training is essential. In addition, the problems of morbidity and mortality in childhood and adolescence are increasingly complex and require multidisciplinary approaches, in which the role of the Nurse is very relevant. As an example we can highlight problems such as emotional and behavioral problems, chronicity and disability, obesity, sedentarism, bullying, cyber bullying, gender violence in the family, etc.

Conclusion

The evolution of training for specialists in Pediatric Nursing in Spain over the past 80 years has been subject to vast variations, with long periods of obedience and total submission to the hegemony of the medical profession and leading to the current higher level of professional autonomy in the daily duties of nurses. A reality which is reflected in the current high demand for Spanish nurses in Europe.

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