Professional development and entering the labor market: the perceptions of nursing graduates*

FORMAÇÃO PROFISSIONAL E INSERÇÃO NO MERCADO DE TRABALHO: PERCEPÇÕES DE EGRESSOS DE GRADUAÇÃO EM ENFERMAGEM

FORMACIÓN PROFESIONAL E INSERCIÓN EN EL MERCADO DE TRABAJO: PERCEPCIONES DE EGRESADOS DE GRADUACIÓN EN ENFERMERÍA

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ABSTRACT

The professional history of nursing graduates allows for understanding and reflecting on higher education and the characteristics inherent in the job market. The objectives of the present study were to analyze the perceptions that nursing graduates of a private university have regarding their development process, focusing on the conditions of entering the job market and the demands they deal with in their professional life. The Collective Subject Discourse was the method of choice used in this study. Participants included 104 graduates who were divided into three groups according to their position after graduation. Discourse analysis allowed for deep reflection regarding their preparation, indicating the need to review the pedagogical project, particularly in terms of developing competencies in the four dimensions of care: management, healthcare, education, and research.

DESCRITORES

Nursing Job market Education, nursing Professional practice

RESUMO

A trajetória profissional dos egressos permite analisar, compreender e refletir sobre o ensino superior e as características inerentes ao mercado de trabalho. Os objetivos deste estudo foram: apreender e analisar percepções de egressos de curso de graduação em Enfermagem de instituição privada em relação ao processo de formação, frente às condições de inserção no mercado de trabalho e às demandas vivenciadas no cotidiano profissional. O método utilizado foi o Discurso do Sujeito Coletivo. Os 104 egressos foram divididos em três grupos de acordo com a atuação após a graduação. A análise dos discursos possibilitou uma reflexão aprofundada dessa formação, indicando a necessidade de revisão do projeto pedagógico, destacando o ensino voltado para o desenvolvimento de competências nas quatro dimensões do processo de cuidar: gerência, assistência, educação e pesquisa.

DESCRIPTORS

Enfermagem Mercado de trabalho Educação em enfermagem Prática profissional

RESUMEN

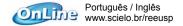
La trayectoria profesional de los egresados permite analizar, comprender y reflexionar sobre la enseñanza superior y características inherentes al mercado de trabajo. Los objetivos de este estudio fueron: aprender y analizar percepciones de egresados de curso de graduación en Enfermería de institución privada en relación al proceso de formación. frente a las condiciones de inserción en el mercado de trabajo y las demandas experimentadas en el quehacer cotidiano profesional. Se utilizó el método de Discurso del Sujeto Colectivo. Los 104 egresados se dividieron en tres grupos de acuerdo con su actuación posterior a la graduación. El análisis de los discursos posibilitó reflexión profundizada de dicha formación, indicando necesidad de revisión del proyecto pedagógico, destacando la enseñanza enfocada al desarrollo de competencias en las cuatro dimensiones del proceso de cuidar: gerenciamiento, atención, educación e investigación.

DESCRIPTORES

Enfermería Mercado de trabajo Educación en enfermería Práctica profesional

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INTRODUCTION

The history of the education of nurses in Brazil goes hand-in-hand with that of the health system, culminating in the expansion and diversification of nurse jobs through the creation of the national health system, the Sistema Único de Saúde (Sinale Health System - SUS). The number of nursing schools has increased intensely, particularly private schools, stimulated by the support from the federal government through funding programs and scholarships⁽¹⁾.

In 2007, there were 629 nursing courses (undergraduate level) in Brazil; 124 public and 505 private. Therefore, until that year, private education accounted for 80.2% of the nursing undergraduate courses in the country⁽²⁾.

In nursing education, from a general perspective, schools face difficulties to implement the proposals established by the national nursing curriculum guidelines to change how nurses are prepared, particularly those relating to the acquisition/development/evaluation of competencies and skills, primary contents, practice/internships,

and complementary activities. It is observed that there is no clear definition or consensus regarding the competencies required to prepare a nurse. However, these competencies are precisely what will associate the courses' curricular plan to the needs and objectives of the education of nurses(3).

There is a lack of definition regarding the concept of competency, which is associated with the notion of skill, when referring to education. Regarding work, it appears as a synonym for critical attitude, revised knowledge, professionalization, professional improvement, and updating, among others⁽⁴⁾.

Competency is defined by the capacity to be effective, based on knowledge, without, however, being limited to that knowledge. It means having the knowledge and critical attitude to act in the most varied circumstances. The outcome will be an effective action, based on a system that mobilized knowledge in association with judgment⁽⁵⁾.

In this context, the job market has growing demands of productivity and quality, with an increasing generalization of the implementation of models of education and workforce management based on professional competencies. Besides the demanded technical-instrumental flexibility, there is also a need for intellectual flexibility, considering the necessary continuous improvement of the production process of goods and services. Consequently, any work that is unqualified, fragmented, repetitive, and unchanging is replaced by new forms of organization, and work that is polyvalent, integrated, performed as a team and with more flexibility and autonomy. This type of work is covered with the unpredictability of the circumstances

in which workers must constantly make choices and decisions, expanding the mental and cognitive operations involved in the activities (6).

On the other hand, some situations show that undergraduate education poses difficulties to adjust to the demands of the job market, such as: education focused on "ideal" contents that do not translate into healthcare practice, or the (sometimes rigid) demand to accomplish technical knowledge during undergraduate studies, which is not always possible to follow in the professional life, besides the school preparing nurses to provide healthcare while the market is expecting nurses to be skilled at administration and management⁽⁷⁾.

The graduates' opinion is one of the many dimensions that permit to observe the effects that the curriculum have on transforming students. In their daily work life, students experience complex situations that put them face to face with the competencies they developed during the course, and confront them with what is required in professional practice. This confrontation allows them to

> evaluate if the pedagogical structure of their course was appropriate and which aspects affected their academic education process⁽⁸⁾.

> Knowing the professional history of graduates permits to analyze, understand and reflect about the issues related to higher education in nursing and to the characteristics inherent to the job market.

The objectives of this study were to identify and analyze the perceptions that nursing graduates from Faculdade Marechal characteristics inherent Rondon have regarding their education process in view of the conditions to enter the job market and the demands experienced in the daily professional life, and character-

ize the students in terms of sociodemographic, education, and occupational data.

METHOD

Knowing the

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The chosen method was the Collective Subject Discourse (CSD), which proposed to rank and associate a series of operations about the original material of the reports collected in empirical studies of opinion through open questions, operations that, at the end of the process, result in collective statements comprised of different excerpts from individual reports. The CSD, therefore, is a harmonic set of processes and procedures that, based on the collected reports, aim to, descriptively, comprise the opinion of a given group as a quali-quantitative produce, with a panel of discursive reports, i.e., qualities from socially situated individuals⁽⁹⁾.

The CSD were comprised through three operations: central ideas - synthetic formulas that describe the mean-



ing or meanings of the statements of each answer and also the groups of answers from different individuals, which have similar or complementary meaning; key-expressions – excerpts selected from the verbal material of each report, which better describe its content; collective subject discourse – the combination of the key-expressions present in the reports, which have central ideas of similar or complementary meanings⁽⁹⁾.

Subjects were graduates from the nursing course of Faculdade Marechal Rondon, who completed their studies in 2007. There were a total of 114 graduates, and 104 were located for data collection, using a list provided by the university's office. After contacting the graduates by phone or email, data were collected regarding their age, gender, occupation before and after they graduated in nursing, and their attending graduate courses. For the qualitative analysis, the located graduates were classified into three groups, and we calculated 35% of the students in each group:

Group 1: 35% (n=20) of the graduates who worked as nurses;

Group 2: 35% (n=7) of the graduates who worked as nurses' aides or nursing technicians;

Group 3: 35% (n=9) of the graduates who do not work in the nursing area.

Data collection was conducted through interviews, performed by the lead researcher, which were scheduled to a time and place suitable for the subjects. The interviews were recorded on cassette tapes.

The study was approved by the Research Ethics Committee at Faculdade de Medicina de Botucatu - UNESP (04/08/2008, document 302/08-CEP). The graduates who agreed to participate in the study signed the Free and Informed Consent Form.

RESULTS

Characterization of the graduates

Most subjects (32.69%) were aged between 26 and 30 years. Regarding gender, 89 (85.57%) were female and 15 (14.42%) were male. Table 1 lists the occupations of the graduates before entering the nursing course.

Table 1 – Distribution of graduates according to their occupation before the nursing course – Botucatu – 2009

Occupation	Frequency	Percentage
Nurses' aide	36	34.61
Nursing technician	18	17.30
Student	18	17.30
Others	32	30.76
Total	104	100%

The occupations reported by the graduates after completing the nursing course are listed in Table 2.

Table 2 – Distribution of graduates according to their occupation after completing the nursing course – Botucatu – 2009

Occupation	Frequency	Percentage
Nurse	58	55.76
Nurses' aide	13	12.5
Nursing technician	6	5.7
Unemployed	11	10.57
Others	16	15.38
Total	104	100%

Regarding their entrance as nurses in the job market, 55.76% achieved this goal.

Table 3 lists the areas in which the graduates worked as nurses.

Table 3 – Distribution of graduates working as nurses, according to the area of occupation – Botucatu – 2009

Workplace	Frequency	Percentage
Hospital	29	50
Family Health Unit	14	24.13
Secondary-level school (aide/technician)	4	6.8
Emergency room	7	12.06
Family Health Unit + Emergency room	2	3.44
Chemotherapy Unit	1	1.72
Nursing Home	1	1.72
Total	58	100%

Regarding their attending graduate courses, 65 (62.50%) graduates were enrolled or had completed the course and 39 (37.5%) had not, which agrees with previous studies^(8,10). Only one graduate had started the master's program, the other courses were *lato sensu*.

Perceptions about the students' education and their entrance in the job market

For the first group, which members work as nurses, the following questions were made, followed by the synthesis of the central ideas and the respective CSD:

Question 1 What are your criticisms regarding your professional education?

1. The theory covered everything, all students have to do is get involved and seek knowledge (E1, E5, E6, E7):

In terms of theory it covered everything, students just have to get involved and seek knowledge. It is the student who makes the college. We have to go after it. In theory, if I hadn't sought for more, today I would miss even more.

2. The internship became very repetitive and was never really good (E1, E3, E4, E7, E8, E9, E11, E12, E13, E15, E16, E20):



The internship became very repetitive. The field was limited to just certain hospitals, were weren't able to see everything we learned in theory, mainly complex procedures with patients in more critical conditions. The fields were never really good. Because this is the first class, we ended up suffering a bit more. It would be better to have more time in each area. Activities particular to nurses were below expectation, especially regarding administration practice, we didn't see anything specific of administration. In college we never even did the staffing, enteral catheterization, blood gas analysis, or about how to install a central venous pressure monitoring system.

3. I don't have any criticisms (E2, E6, E17):

I don't have any criticisms, I really enjoyed my course. I already had some experience, but assuming the role of a nurse mas is different, you have a completely different view of how to deal with the worker and the routine. This was the greatest difficulty I had, although I already have the experience and the technique, but the attitude is completely different.

4. Lacks theoretical and practical class hours (E9, E10, E20):

Because it was a night course, there were very few class hours, we could have explored better. It could have been full-time. I felt there could have been more internship hours, more field experience.

6. It was very poor and a lot below expectation (E11, E12, E14, E18, E19):

It was very poor in theory, in practice I guess we learned some things. Because it is the first class, it was very below expectation. There were a lot of flaws because the college is new. The content was good, but the professors were inexperienced. The internship field was very bad, these are things you only realize later, when you start working and face difficulties.

7. There was no support to do scientific initiation activities (E12):

I was really interested in getting involved in scientific initiation, I checked with a lot of people but didn't receive any support. We leave school without any activities on our curriculum except for the end-of-course monograph.

Question 2 What difficulties did you face to get your first job as a nurse?

1. Little experience (E2, E3, E4, E9, E11, E14, E20):

Little experience as a nurse, although I was a nursing technician, but the attitude is different to be a technician and then assume a nurse position, and be responsible for the institution, for the sector in which you work. The experience as a technician is not taken into consideration. The worse part is not being able to work in a volunteer internship at the same time, because you have to work to pay the college fees. It is difficult to be experienced when you are newly graduated.

2. Competition (E1, E5, E12, E14, E15, E16, E17, E18, E20):

The reason is competition, there are a lot of nursing colleges and many nurses. There are few opportunities and many candidates. Each year it gets more competitive, there are 400 new graduates in the region for 20, 30 job positions. There used to be only one Nursing college in the region, then, all of a sudden, a lot of new colleges opened, and graduates from private institutions face more difficulties.

3. I had no difficulties (E6, E7, E8):

I didn't have any difficulties to get my first job, because I already worked in the area. I actually think it was easy because of my previous experience.

4. Lack of research incentive (E10):

Lack of research incentive. In fact, there were no activity or project presentations, nothing was done. Only the monograph and it wasn't taken very seriously, and today I see the big difference. This makes getting a first job more difficult.

5. The salary was not worth it (E13):

The greatest difficulty I faced was that I already was a nursing technician and some things were not worth it for me. Several opportunities appeared, but the salary was almost the same as mine.

6. Insecurity (E19):

I was really afraid, because of the course I took, I was insecure for a long time, this work I am in now is the first competitive examination I took and passed, and now I developed a bit, but I think I wasn't ready. We look, talk, see tests and examinations and say, but I didn't learn that and they are difficult things, especially in the hospital area.

For the second group, who work as nurses' aides or nursing technicians, the following questions were made, followed by the synthesis of the central ideas and the respective CSD:

Question 1 What are your criticisms regarding your professional education?

1. It was satisfactory (E1, E3, E4, E5, E6, E7):

It was very good, because were had an idea from being a nurses' aide, and as a nurse we were able to see that it is different. I learned everything I was lacking to become a professional. I learned more in theory, because in practice, I knew most things because I've been a nurses' aide for 13 years. I also enjoyed the internship. The undergraduate course adds a lot. I had one view of the job, now I have the view of administration, of the whole structure. Besides the technical-scientific knowledge, anatomy, pathology. The undergraduate course was timely. It met the expectation.

2. It was mostly aimed on public health (E2):

It was good, but it was mostly aimed at public health, primary healthcare, that was what we most did in the intern-



ship, so it gets a bit difficult when you take a competitive examination for a hospital job.

Question 2: What difficulties did you face to get your first iob as a nurse?

1. The market is very competitive (E1, E2, E7):

The market is very competitive and disputed here in the region. I'm not desperate because I have a job, so I'm not worried, but there is a lot of competition.

2. The salary is not worth it (E3, E4, E5):

I didn't look for a job, I didn't take an examination, I quit. In my opinion, it isn't difficult, if you search there are many alternative. But for me the salary is not worth it. The market has many professionals, so they offer as much as they want and the salary is very low, so I still work as a technician. It demands more responsibility. So you should have a good salary.

3. Lack experience (E5, E6):

They always require experience and being a nurses' aide does not count. You must be experienced as a nurse. How can you be experienced if you have just graduated? The market demands something that doesn't make sense. I have years of experience as a nurses' aide, but not as a nurse. It counts for your practice, but for the nurse positions they want someone with experience as a nurse. They should look at the person's curriculum as a whole, their whole experience in the health area.

For the third group (graduates who do not work in nursing), the following questions were presented, followed by the synthesis of the central ideas and the respective CSD:

Question 1 What are your criticisms regarding your professional education?

1. The college is poorly accredited and does not offer any professional or academic support (E1, E5):

The college is barely accredited. It does not offer any support for you to prepare yourself, professionally or, ever less, academically. It does not help you to get involved in any type of research project and learn to do research correctly, it doesn't give you any material, any support to participate in conventions, or courses. The internship locations are bad. They prepare us merely for the clinical area. In terms of theory, it was below expectation, it could have provided a much better basis, instead of spending more time in mandatory internship hours. It lacked experience in nursing, of what nurses really do.

2. It depends exclusively on the students (E2):

It depends a lot on the person, completely on their effort, because regardless of all the problems we had in the internship field, as long as there is a will, the person will learn.

3. There were some weaknesses, but not harm was done (E7, E8):

Because it was the first class, there were some flaws, but nothing that harmed us in our search for a job. I learned a lot and took good advantage of the internships. I didn't leave the course with doubts or afraid of working. I think I was prepared.

4. It lacked practice (E3, E4, E6, E9):

Regarding the internship, more things could have been given, I felt a bit unprepared regarding the practice. There should have been a lot more about ICU, in terms of medication. The internship fields were deficient. Maybe because it was the first class. You learn a lot in nursing practice, but what nurses really do every day, you don't learn. There is very little time in each unit. There wasn't a good laboratory, pathology, and cytology classes. Some internships were very restricted.

Question 2: What difficulties did you face to get your first job as a nurse?

1. Difficulties because of competitive examinations, which are very difficult (E1, E6):

Competitive examinations are very disputed and we know there are some inside policies, a lot of indications, you realize the tests have a determined intention. When the time comes you realize you don't master that practice because you never worked in that area.

2. Few positions for the region and too much competition (E2, E3, E4, E5, E9):

There are few positions, such as 300 candidates for two positions, and many include interviews, practical examinations, some things raise questions about the institution's credibility. The field is very competitive. We compete for a discouraging salary.

3. Lack of experience (E3, E6, E7, E8, E9)

The opened an examination for people with years of experience. How can a person who has just graduated have any experience? They ask at least a year. Nobody gives us the opportunity to gain that year of experience. I even worked as a volunteer for a year.

DISCUSSION

A similar study was performed with graduates of private higher education institutions and also found an age group of 26 to 30 years as prevalent⁽⁸⁾. When public education institutions are considered, a younger age group is found, i.e. between 20 and 25 years⁽¹⁰⁻¹¹⁾. The difference between public and private institutions also becomes evident in a comparative study of the two types of institution⁽¹²⁾. It draws attention to the relatively high number of graduates older than 40 years (19.22%); this was also



associated with these graduates needs to work to pay for their studies. The course was offered at night, which helped students who worked.

Regarding the students' gender, previous studies were confirmed, which found that nursing remains a profession that is primarily feminine^(1,8,10-14).

Most students were already employed when they started the nursing course, and already worked in the nursing area, which is in agreement with previous studies^(8,12-13). However, one study performed in a full-time course points out that the minority of the students worked before their graduation⁽¹¹⁾.

Similar studies report a higher percentage of students working as nurses. However it should be stressed that these studies were performed between 1998 and 2004, a time when there was a smaller number of nurses available in the job market ^(8,10).

Most graduated already had a job in the nursing area, which agrees with one study⁽⁸⁾, but disagrees with another (performed in the state of Goias), in which most graduates worked in public health, which has an important role in the Family Health Program/Strategy (FHS) in cities in the interior of the state⁽¹⁰⁾. The hospital market requires a greater number of professionals. A FHS team needs only one nurse, whereas a hospital requires at least four nurses because it has continuous shifts. It also has units of higher complexity, such as emergency rooms and ICUs, which demand even more nurses due to the specificities of care and correlated legislation⁽¹⁵⁾. Therefore, it is expected that they occupy more hospital positions, in terms of occupation.

The first group, whose members work as nurses, made criticisms based on everyday experiences they dealt with at work.

Preparation schools have faced difficulties to develop learning associated with actual practice activities. Teaching is based on ideal actions, marked by the unbalance between what is proposed and what is actually experienced in healthcare practice. There is incompatibility between the education and professional practice based on pedagogical investments that are dissociated from the real development of students⁽¹⁶⁾.

The real role of educational institutions is to teach the minimal competencies for professional practice. Teaching applied science and preparing nurses should be associated activities with the goal to develop reflection-action, so that the professional is prepared for the challenges involved in the practice⁽¹⁷⁾.

Therefore, students entering the job market and fulfilling the demanded roles would take place more naturally. In this sense, it can be stated that the education is ideal, though it is not, in its overall use, practical. When professionals enter the market, they must have a new education, or a new construction and structure of knowledge, based

on concepts created by their personal experience, the education proposed by the educational institution and their experiences, besides the culture and philosophy of the new institution where that professional enters. Internships are an important part of this process, and also a point of discussion, which are described as repetitive and a limited field.

Some professors follow the conduct of restricting the opportunities of practice in clinical education to *primary care*, thus harming other practices, considered essential for the nurses' development⁽⁸⁾.

Internships account for almost the whole practical education of nurses. However, the precarious situation of the practice fields is also a factor with significant limitations for this development. The facilities and resources of the locations should provide students with the opportunity to face typical nursing problems and situations. However, the deficiencies that the Brazilian health sector and health centers go through, which involve precarious facilities and equipment, the shortage and poor quality of professionals. These conditions interfere and disqualify most practice fields used by the students. On the other hand, this is the contact that future professionals will have with the reality of work they will find, because public institutions in Brazil offer most job positions to the graduates (17).

In general, locations used for the internships of the present study subjects show this reality. The setting shows a lack of financial resources, which appears through the poor physical structure and scarce basic materials. There is a lack of qualified human resources. These elements will reveal students a work situation that they will find after graduating, but, eventually, it has a negative effect on their education. The development of inadequate techniques due to the scarcity of material or the observation of inadequate conducts by other professionals because of the situations of professional disqualification are some examples.

Regarding the teaching of administration or management in nursing, in terms of the evaluation of the nurses' education according to the graduates' perception, the analyzed discourses revealed a need to improve the teaching of nursing administration, related to the class hours and the distribution and development of the class contents. Furthermore, the graduates also suggested strengthening interdisciplinary practice and pointed to the need to *optimize* the distribution of the content and class hours that aimed at developing administrative competencies⁽⁸⁾.

For this class, the curricular program contemplated a theoretical discipline in the fourth semester, with a class load of 36 hours. The practical activities were developed in the internship fields, during the mandatory internship of other classes, according to the judgment of the professor coordinating these fields, without any specific planning for the administration content. It should be stressed that come contents should be planned cross-disciplinarily in the nursing curriculum. Nurses' working process is comprised by four dimensions: management, healthcare, education



and research. To comprise and cover these dimensions, one must consider pedagogical projects that provide theory-based practical experience mediated by faculty that is capable to make a bridge with the reality in health.

One subject pointed out finding a first job and the lack of incentive for research as difficulties. Over the last years, it had been observed that the processes to hire nurses, mainly in public institutions, have involved theoretical-practical examinations in addition to curriculum analysis. Public university hospitals, which most hire nurses in the region of the present study subjects, follow the criterion of assigning considerable scores to the research studies and dissemination in scientific events. This new working market behavior indicates the demand of professionals who are also capable of producing knowledge to solve problems that emerge in the professional practice.

Regarding the total hour load of the course, the Ministry of Education establishes a minimum class hour load of 3,500 hours to be covered in, at least, four hours⁽¹⁸⁾. For this class, the contemplated course hour load was 4,008 hours. Therefore, this factor was not determinant in their development. Although it is an essential factor, one should consider how this hour load is handled, if any true contribution to the integration of knowledge is made.

The reasons for nurses' aids and nursing technicians to seek nursing courses are the chance of improving their professional activities, professional growth, improving their scientific knowledge and the chance to change their status within the team, being acknowledge by the profession, because their current categories are undervalued and receive a low salary in the health sector^(11-12,19-20).

Through the discourse it is observed that undergraduate studies are a way to structure and improve knowledge that was once only practical and now also have a theoretical foundation. Therefore, the graduates report their course was satisfactory. Some criticisms also were made, but most of them considered it satisfactory, mainly in the sense of having provided the necessary theoretical-scientific foundation. This theoretical foundation acquired in the undergraduate course continues being used in their work as nurses' aids and nursing technicians, an important aspect to be emphasized, as these professionals continue working under the direct supervision of a nurse, and, for this reason, their effective work as nurses may not have emerged.

For the second group of graduates, not all the reasons for their seeking the undergraduate course were contemplated. The most underlined aspect is salary. It was observed it was a limiting factor for searching a job position as a nurse. As nurses' aides and nursing technicians, theses professionals, considering their time in the job, have a better salary than new nurses.

Another aspect worth discussing is the issue regarding their being experienced, which helped in learning situations, both theoretical and practical. Therefore, these nursing professionals had already participated in health services, but with a view limited to the health-disease process.

This previously acquired technical knowledge is an aspect that facilitates the educational process. In nursing education, establishing a correlation with reality and acquiring scientific knowledge through performing practical skill should be considered essential⁽¹⁹⁾.

However, being experienced in the area, when searching for a job as a nurse, did not have this facilitating character. Therefore, the demand of the job market for experience is also a hindrance for this group.

The history of nursing is comprised by specific professional groups that, besides education, have particular characteristics. Therefore, it is not instantly that nurses' aides and nursing technicians will, just by completing the undergraduate course, "undress" from their experience to absorb a new culture⁽²⁰⁾.

Schools are not prepared to discuss about the issue of professional mobility and all its consequences. It is necessary to change behaviors. The concern should not only involve the technical-scientific domain, but also the attitudes, aiming at the social transformation of these subjects⁽²⁰⁾.

The difficulties to enter the job market can be characterized by personal development and security when taking competitive examinations and evaluations. Furthermore, the graduates also report difficulties related to the nursing undergraduate courses and the nursing areas *per se* in the country.

Regarding competition, it is possible to make a historical recollection of the development of the job market in nursing. In the 1980's, there was an uncontrolled proliferation of schools, disregarding the regional needs, in addition to a great diversity of curricular across courses. The search for nursing courses was little, although it was observed there was a high employment rate in health institutions/services⁽²¹⁾.

The change began in the 1990's, with an upturn in the nursing educational system and and expressive expansion of courses and slots. An expansion is observed in the private sector. The growth of the educational system might be associated with the implementation of the Sistema Único de Saúde – SUS (national health system), with the expansion of job posts and the implementation of the Family Health Strategy (FHS), which became an attractive perspective in the nurses' job market⁽²¹⁾.

There are currently a large number of individuals entering the job market. It cannot be stated that nurses are not needed. There are only 0.6 nurses for every 1,000 people, considering Brazil as a whole. This mark is far below the rates of European countries, where the ratio is 5 to 10 nurses per 1,000 people, depending on the country. However, this setting should be observed and followed through regulatory measures for the educational sector, aiming at the quality of the graduates⁽²¹⁾.



It is observed that the growth in slot number is still insufficient to meet the multiple and varied demands of population healthcare in the local, regional, and national levels⁽¹³⁾.

The south and southeast regions of Brazil, which are the most economically developed, are home to the greatest number of nursing courses, compared to the other regions. As a consequence, there is an uncontrolled and centralized increase of undergraduate courses in the country, casting a large number of professionals in the market and increasing the competition for jobs in those regions.

It is important to emphasize that, in view of this setting, it is essential that the job market is not made the goal of nursing education. The goal should actually be to build a new society, to prepare individuals who think critically and are capable of always searching for new solutions and taking risks. The true essential goal is to develop critical thinking⁽²²⁾.

Thus, this study shows the need to develop knowledge to make nurse professionals critical thinkers who are able to discuss and propose changes, so that nursing is no longer a profession facing difficulties to be established in the health sector and in the society as a whole.

CONCLUSION

The chosen methodology permitted to achieve the proposed goals through the analysis of the graduates' discourses, which evidences relevant facts in this education. It allowed for a deep reflection of the theoretical and practical concepts, related to the educational process they experienced, in view of the demands of the daily work in

nursing, indicating the need to review the pedagogical project of the course in this institution.

In this reflexive perspective, these considerations are an excerpt of the reality that portrays the difficulties that the graduates face when searching to enter the job market, establishing an interlocution with the educational proposal and the market itself.

Some perceptions regarding education appeared very clearly, with emphasis on the lack of knowledge about management, because the administration class is not included in the course; internships and classes with insufficient hour loads; besides a lack of research incentives. Therefore, among the contributions that the study provided to review the political-pedagogical project, we highlight the need for education aimed at the development of competencies, covering nurses' practice in the four dimensions of the care process: management, healthcare, education and research.

Transformation cannot be achieved without making effective changes in the teaching practice, which involve: an appropriate preparation of the faculty; internship fields and integration between curriculum, pedagogical practice and the reality, meeting common needs by designing a professional education model that is consistent with the social demands.

The search for excellence requires continuous evaluation to make, based on the collected data, the necessary adjustments, constructions and reformulations to the teaching-learning process. This is a highly valued instrument to achieve satisfactory levels in this process.

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