

## Competencias profesionales para la atención de las adicciones, en los programas de licenciatura en enfermería de la universidad autónoma de Querétaro, México.

*Professional competencies for treatment of addictions, in undergraduate programs in nursing at the Autonomous University of Queretaro, Mexico.*

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### Resumen

El currículo está basado en necesidades cambiantes y en avances disciplinarios continuos, por ello, la Evaluación Curricular y el consecuente Rediseño o Reestructuración de los programas académicos son fundamentales para la pertinencia y calidad académica de los Programas Educativos. Para efectos de este documento y para dar cuenta sobre el proceso de incorporación del Modelo de Competencias al Currículo de Enfermería en el Plan 2011 del Programa de Licenciatura en Enfermería, se formuló una redimensión de su práctica profesional al incluirse, temas de geriatría y adicciones, representativos de los problemas sociales contemporáneos de la salud no sólo de nuestra entidad, sino latentes en nuestro país y en el mundo, en el entendido que como se menciona por la CICAD, que el personal de enfermería es un agentes clave para la educación sanitaria, la promoción y prevención en diferentes ámbitos (familiar, comunitario y asistencial), desde una visión innovadora. El modelo por Competencias además desarrollar en el estudiante los conocimientos, habilidades, destrezas y actitudes que le capacitan para aplicar un juicio crítico en la toma

de decisiones, lo forma en el marco de la política pública en salud y bajo el más alto nivel de ética profesional.

**Palabras clave:** Adicciones, Competencia Profesional, Curriculum, Enfermería.

### Abstract

The curriculum is based on changing needs and continuous disciplinary advances, therefore, Curriculum Evaluation and the consequent Redesign or Restructuring of academic programs are fundamental to the relevance and academic quality of Educational Programs. For the purposes of this document, and to report on the process of incorporation of the Competence Model to the Nursing Curriculum in the 2011 Plan of the Bachelor's Degree Program in Nursing, we formulated a new measure of his practice to include, geriatric issues and addictions, representative of contemporary health not only of our social problems, but latent in our country and the world, with the understanding that as mentioned by CICAD, the nursing staff is a key agents for health education, promotion and prevention in different fields (family, community, and health care), from an innovative vision. Competency model in addition to develop in the student the knowledge, abilities, skills, and attitudes that enable you to apply a critical judgment in decision making, is within the framework of public policy on health and under the highest level of professional ethics.

**Key words:** Addictions, professional competence, Curriculum, Nursing.

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### Introduction

The curriculum is based on changing needs and disciplinary advances that are continuous, therefore two of the fundamental processes to improve academic quality and social relevance of Higher Education Institutions (HEIs), are the Curricular<sup>1</sup> Evaluation and the consequent redesign or restructuring of academic programs. The Autonomous University of Querétaro, always worried about academic excellence, has been supporting evaluations and

Curricular restructuring inside the schools as a strategy to strengthen academic quality offering of Queretaro society.

Similarly, in recent years the Faculty of Nursing has dedicated much of his efforts to the evaluation of its educational programs, in order to contribute to the improvement of solid academic and professional training that ensures excellence that the University is looking for. For the purposes of this document, and to report on the process of incorporation of the Competence Model to the Nursing Curriculum, we will briefly resume curriculum modification that precedes the 2011 Plan of the Bachelor's degree program in nursing, restructured in 2010, under these pedagogical guidelines.

Amendments to the 1997 Plan for the degree course in nursing, were core to the construction of an educational vision that facilitated subsequent educational innovations incorporated into the curriculum. Such restructuring developed a flexible, multidisciplinary studies, and plan with a didactic proposal focused on learning. Just as the degree was extended to 10 semesters, five years including the Social Service in Clinical and Community forms. Also the number of subjects from 41 to be had in the 1997 plan to 68 subjects that structured the Plan of studies 2004. Its foundation focused on the definition of epistemological axis and curricular areas where the formation of intellectual autonomy in student was the premise of academic consolidation for the Bachelor's degree.

At that time, the 2004 Plan became an alternative for the country proposal, to guide an innovative training beyond the professional intervention, incorporating other demands such as investigate social problems of health and therefore of professional practice, for a better understanding of these phenomena.

Based on this curriculum and derived from the combined efforts of a group of academics (as) that began in 2010 approach, and in response to the concern of the authorities to maintain high levels of educational quality, consistent with the Mission , Vision and Quality Policy of the University, that title says:

"To participate positively in the development of the State of Queretaro and the country through providing education in their different types and forms of school and higher level, ensuring that training professionals with the needs of society; develop, both basic and applied, based primarily on state issues, regional as well as national and conditions regarding the historical development of scientific and humanistic and scientific research. Create, preserve and disseminate the culture and the dissemination of knowledge; be an agent of change and social promotion through its substantive tasks "(Article 6, Organic Law).

The Nursing program was restructured, emerging Plan 2011 also is derived from Education Project proposed in the Development Plan 2006-2009 School of Nursing in response to his call to "contribute with imagination and determination to strengthen foundations, consolidate progress and direct the new course at the School of Nursing to continue as the best option in the state of Queretaro "(Plan for Development 2006-2009, p. 02). So with this plan, it is intended to meet the growing demands of society for better health and quality of life, renewing the social and professional commitment of the professionals of health.

The current educational model that underlies the program in question, raises the four dimensions that should be given priority in the construction of all educational approach: Learning subjects, who through the development of their cognitive structures and metacognitive manipulate learning objects, thereby achieving, conceptual, procedural and axiological-to values appropriations.

The sequencing of content: understood as to grasp objects and in accordance with the principles that derive meaningful learning are organized starting with the most general and simple to gradually introduce progressively more detailed and complex elements.

The methods and teaching strategies: aimed at generating learning environments that allow students to acquire knowledge and practice in the context of use as realistic as possible.

The social organization adequately exploiting the positive effects of an environment of sharing in the construction of knowledge, students develop relations of cooperation and collaboration.

As shown, these dimensions allow the student to a significant learning experience, which often comes closest to their needs than traditional systems offered from other models we have used in Education.

Similarly, the curricular approach is founded on Model-Based Education Skills (MEBC)<sup>1</sup>, integration of "knowledge" or theoretical and conceptual learning, the "know-how" or procedural heuristic learning, together with the "how to be" or axiológico-attitudinal learning. That is, the convergence of social, emotional and cognitive behaviors, psychological, sensory and motor skills that allow you to perform an activity or a specific task (Argudín, 2001).

In this sense, the epistemological and pedagogical basis underpinning the Nursing Program 2011 Plan and promote the incorporation of MEBC are as follows:

It is aimed at the scientific and humanistic education. The program amalgam a humanistic education with scientific rigor, where the integration of various disciplines provide theoretical and methodological elements to train students in thinking skills and manuals, for cultivating intellectual autonomy, founding imperative of this proposal, which is expressed in students trained with historical consciousness, theory and criticism, as essential means of their thinking, doing and acting and face reality and their formation as a person linked to economic, political and social context.

The same disciplines proposals constitute curricular areas that are integrated with each other and exceed previous plans in its depth and wealth; socio-historical, psychosocial, technical-vocational and research, where moral education is also political awareness

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<sup>1</sup> El concepto de competencia se puede ver desde tres acepciones: la que refiere a la competitividad en ser mejor que los demás; la que se relaciona con un ámbito de responsabilidad, y la que propiamente hemos asumido en esta propuesta que se vincula con la capacidad para hacer algo, saber cómo, por qué y para qué se hace, de tal manera que pueda ser transferible. Por tanto la noción de competencia que sostiene el planteamiento que se presenta, descansa en los saberes básicos que poseerán nuestros egresados: el saber por sí mismo, como conocimiento base y explicativo que considera la comprensión; el saber hacer, como la puesta en juego de habilidades basadas en los conocimientos; el saber ser, como la parte más compleja por sus implicaciones de carácter actitudinal e incluso valoral; y el saber transferir, como la posibilidad de trascender el contexto inmediato para actuar y adaptarse a nuevas situaciones o transformarlas.

education, science and technology; at large extend, interest, commitment and intervention in favor of alternative anticipate challenges pose problems of health and disease.

Enhances learning. Its design and pedagogical-didactic application, is primarily focused on letting students learn through processes that promote dilemmatic, analytical thinking and problematizador; both the reality of nursing and social environment, as disciplines that explain, from personal and collective, to question, rebuild and create experiences, which directs the process of organization of thought and reason. Teaching both the theory and development of skills, the curriculum raises the didactic-pedagogic perspective pedagogical constructivism.

It integrator. In the training process, the curriculum map amalgam shafts training (theoretical and professionalizing, technical and methodological and disciplinary), which in turn articulate the functions performed by the nurse, with curricular areas: Biological, Nursing, methodologically instrumental, Community and Social Psychology and Human Development, constituting a meaningful integration of knowledge and specificity for the profession.

It is open and systematic. Because the process of teacher training and curriculum evaluation are assumed to be permanent and mutual feedback, engaging the discussion in collegiate work to solve problems and investigate the daily teaching practice with the didactic-pedagogical updating and discipline in the areas that constitute the program facilitating both the agile and coordinated incorporation of new knowledge. Also open in the sense of curricular flexibility that favors the effective mobility of students through strategies no serialization of content and electives.

It is innovative. As a formative experience in the field of degree, the curriculum is innovative, at least in the three major categories (the dimensions of the educational model, the competition approaches and areas of curriculum integration) that are strengthened.

This panorama requires the need to transform the training of graduates (as) in nursing to help improve health standards in the preventive and curative level, with sound scientific

and humanistic education based on meaningful learning that enable them to assess, investigate and intervene in different areas of action. Where research constitutes one of the fundamental supports as a means to bring nursing theory our social reality as well as including new knowledge and practices necessary to act on their local and regional environment. A new type of professional committed to their reality and elucidate creative and open to other possibilities of professional practice.

### **Importance of including drug content in the curricula of Nursing**

The explosion of worldwide addiction is now considered not only as a result of the various difficulties faced by individuals and groups in contemporary life, but also the systematic lack of health education. As already mentioned, the increase in the consumption of both legal and illegal drugs and the negative consequences associated with addiction affecting physical, psychological sphere (cognitive and emotional) and in the spiritual life of a person, together with situations socio-economic measures, is a major concern of the health sector.

In the Americas, as well as the challenge of the world, has been raised by the Organization of American States (OAS), indicating that an alarming increase in addictions in various population groups, where the largest group risk in adolescents. Regarding this problem, the Hemispheric Alliance Against Drugs, undertaken by the OAS, through the Inter-American Commission for the Control of Drug Abuse (CICAD), proposes strategies to reduce this phenomenon where it is considered nurses undertaken key intervention agents to provide greater health education, research and propose this problem.

In Mexico, particularly in our state, it worrying increase in the use of legal and illegal drugs and the negative consequences associated with addiction. The National Survey of Addictions (INPRFM, 2011) found that women ages entre 18 Queretaro to 65, have the highest prevalence of alcohol consumption country, in addition to the opportunity for increased adolescent use drugs, which is required for joint actions with the State and Municipal Councils through preventive and curative programs, as well as certification and regulation centers and clinics for addiction. This is one of the areas in which nursing makes

presence, particularly our faculty, through the Program of Nursing and Health Interactive (ENSAIN) and its Prevention of Addictions (PA) division, whose outreach in preventive and community health. They are made through interagency agreements and intra-institutional programs.

Finally, the challenges and strategies of the health sector aimed at improving the health status of the population through universal access to health services, strengthening prevention and care programs with a humanistic approach. The strategies to be followed to achieve objectives that are geared particularly to the problem of addiction, raised by the Secretary of Health in the state, are:

- Strengthening protection and health prevention strategy based on the Guaranteed Basic Package Promotion and Prevention for Better Health.
- Prevention of addictions
- Strengthening of human capital, research and health education (SESEQ, 2010)

Purposes that are articulated guidelines of international organizations working to improve the health of populations: The World Health Organization (WHO), the specialized instance United Nations that conducts research, coordination and distribution Information on all countries of the world, the Pan American Health Organization (PAHO), the Organization for Economic Cooperation and Development (OECD), the Organization for Human Rights of the UN, the Inter-American Commission for Drug Abuse Control (CICAD) of the same unit, and Health Systems and Health Departments.

Due to the above, under the idea that a key element for assessing the relevance of an educational program is its relationship to social problems a resizing of the professional practice of nursing, to be included in the discussion for the construction of formulated curriculum, geriatric issues and addictions, representative of contemporary social problems of health not only our organization, but latent in our country and the world.



As already mentioned, CICAD, says the nurses are key actors to intervene in the major social and health problems of our country. Therefore, within the study program content of the revised extension, so that our graduates come to the understanding of this phenomenon in all its comprehensiveness (political, economic, cultural, biological and psychological) aims addictions with sufficient domain knowledge to problematize in its many manifestations. Seeks, therefore, consider this health problem as a research and systematic intervention by the health professional, emphasizing a sense more sociologist intervention, ie, health education, promotion and prevention in different areas of family, school, work, community, regional or municipal environment.

Thus, the professional profile of Nursing 2011 Plan was oriented to the development of skills that allow the graduate, managing health services, working professionally in educational programs in nursing from an innovative vision and develop in the health care setting; also develop in him, knowledge, skills and attitudes that enable it to apply critical judgment in decision-making, distinguished for his contribution and leadership within the health team, in the framework of public health policy and under the highest level of professional ethics.

These tasks are specified in the fields of training from the functional view, hence it follows that the graduate (a), be able to perform the following professional roles:

- Promoter (a) health: Professional develop this function in the, neighborhood, school, clinical, labor, community or regional home environments. Assumes the roles of counselor (a) health promoter (a) and adviser (a) health self-management, where people know and people necessary to promote health and disease prevention measures and thus assume attitude and face the will to stay healthy.
- Provider (a) of care: Contribute to the comprehensive biopsychosocial care is provided to the person to meet the basic needs of daily life and alterations of body functions through secondary and tertiary health care institutions, as well will perform outpatient interventions, primary, secondary and rehabilitation care, where

gerontology and addictions acquire special significance as emerging professional fields and disciplinary and interdisciplinary intervention.

- Educator (a) health: Design, intervene and evaluate prevention programs, conservation and recovery of health, based on nursing diagnoses individual, family or community as well as epidemiological diagnoses. Well education, updating and assessment personnel health institutions and community people running the role of health carers.
- Manager (a) services: Perform tasks of planning, design, coordination and management evaluation of care and nursing services and health programs in general.
- Researcher (a): Perform design and development of research addressing the problems posed profession, from the epistemological and everyday practice, to the requirement for solutions or alternative proposals (socioacademic Fundamentals of Nursing Program, Plan 2011).

### *Curriculum implementation strategies for skills development*

The phenomenon of addiction is a public health problem that has grown in the last twenty years exponentially, confronting family values and effectiveness of education represents a major challenge in terms of resources and infrastructure for care, Special emphasis on demand reduction and promotion and health prevention. Therefore, it is important that prevention programs include the family and programs aimed at getting people with problems in alcohol treatment approach to be strengthened.

Adolescents and young people today are more exposed to the opportunity to use drugs than previous generations; therefore, currently the use and abuse of these is in greater proportion. Hence the need to direct prevention against the risk strengthening them. It is therefore a phenomenon that mainly affects the younger age groups. Epidemiological profiles especially in the population in question, are strongly influenced by psychosocial factors involved in the adoption of unhealthy life styles. Many of the health problems of adolescents and young people, including the problems of

excessive morbidity and mortality are generated by avoidable behaviors, such as accidents, violence and sexually transmitted diseases, risk linked to addictions.

Although, as already mentioned, the problem of addiction responds strongly to stereotypes and male roles, the consumption of these substances by women shows a rising trend, so it is essential to deepen the knowledge and the means of prevent and attend to considering the differences between women and men.

The participation of the nurse in health promotion and disease prevention, using epidemiological surveillance tool or strategic monitoring provides social epidemiology, should ensure an integrated view of the components in the promotion and prevention addictions that are incorporated into the analysis and solution of a problem like this, from the profession. Thus, the use of the nursing process to study the etiology of drug dependence is important to consider non-pharmacological factors such as availability, trends, peer pressure and prior learning with socially tolerated but not without substance risk. Also, consider that vulnerability to drug dependence is also related to some characteristics of the individual having been recognized in some cases even the existence of hereditary factors.

The Nursing Process is fundamentally translated from scientific methodology and has been legitimized by the nursing as the conceptual and methodological framework for excellence, for intervention in the care of the sick. It is a systematic method to manage nursing care, where deliberation and technical and deliberation and practical reflection reflection are constitutive to assess, identify alterations of health or state of equilibrium, plan, intervene and evaluate human-social and biological needs individuals.

In that perspective, it is incorporated as one of the integrative themes of the curriculum for training discipline and methodology of students as one of the basic tools (in conjunction with other methods: Scientific, clinical, administrative, epidemiological) to enable them to problematize nature and justification of the aims and practical objectives, developing the capacity of observation and analysis related to the manual and intellectual.

On the other hand, in the origin and maintenance of a drug involves many variables, therefore the study and understanding requires a multidisciplinary approach. Some variables that are worthy of note are the pharmacological properties of the substances, the physiological and psychological conditions of the consumer as well as various social and environmental factors. So as to enable them to know and to respond to problems arising from its use in the different stages (childhood, adolescence, adulthood and old age) life cycle, at the community and clinical settings using the nursing process method. The emphasis will continue to be the pre-eminence of health education and intervention strategies to help the process of social reintegration of interdisciplinary and inter-agency cooperation. Emphasizing the genesis and maintenance of addiction involves many variables, therefore the study of this phenomenon requires a multidisciplinary approach.

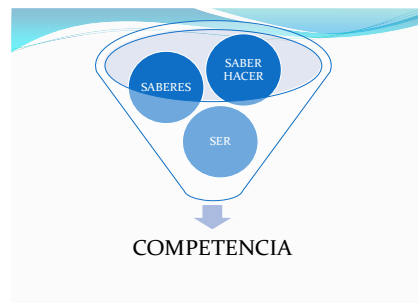
The nursing process is an orderly and systematic method used to gather information and identify the problems of individual, family and community (Alfaro 2007), in order to plan, implement and evaluate nursing care, which deals maintain, promote and protect the health, care for the sick and help rehabilitation. Therefore, it is the application of scientific method in the nursing task, defining their specific field of action and denotes the development of numerous actions that go beyond the fulfillment of a prescription (Rodriguez 2000). Therefore, applying it to the study of the etiology of drug use and abuse and dependence, considered important to consider non-drug factors, physiological and psychological conditions of the consumer as well as various social and environmental factors that can lead to availability, trends, peer pressure and substance prior learning with socially tolerated, but not without risk; Additional vulnerability to drug dependence is also related to socioeconomic and cultural factors.

As we have mentioned, the study of nursing is based on the knowledge of the person from a holistic perspective that interrelates with its cultural and natural environment (human body structure, society and psychological development and social support), with the knowledge of hospital and community health and the acquisition of skills and the very foundations of the profession. From this holistic and comprehensive vision, vocational training and promote the development of certain attributes (skills, knowledge, attitudes, skills and values), consider the occurrence of various tasks (intentional actions) that occur

simultaneously within the context arises which the action takes place, yet allow some of these intentional acts are generalizable (Gonczi, 1996).

The curriculum objective that determines the profile of graduates of the academic program, explicit knowledge, and knowledge to be of future graduates, themselves, in direct application in professional situations become skills<sup>2</sup> to develop in the students of the Bachelor of Nursing. (Figure 1).

**Figure 1. Formation of competition**



Thus, for achieving curricular objective proposed and according to the educational model that underlies the education in our country, this curricular approach is structured under the competency model, being the Basic those that support training and serve as pillar transit and development of disciplinary powers as a whole with the first, are the professional skills developed by the students of the Bachelor of Nursing, Plan 2011.

From the foregoing, it is intended that at the end of their studies program graduates possess the knowledge, skills, abilities and attitudes -competencias professionals-that allow them to behave and act like a professional nursing. Thus becoming agents of change able to analyze

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<sup>2</sup>En este sentido, el estudio de la Enfermería se basa en el conocimiento de la persona desde una perspectiva integral que la interrelaciona con su entorno sociocultural y ambiental (estructura del cuerpo humano, desarrollo psicológico y sociedad y apoyo social), con los conocimientos de salud comunitaria, la adquisición de habilidades y los fundamentos propios de la profesión. Desde esta visión holística e integral se plantea una formación profesional que además de promover el desarrollo de ciertos atributos (habilidades, conocimientos, actitudes, aptitudes y valores), considere la ocurrencia de varias tareas (acciones intencionales) que suceden simultáneamente dentro del contexto (y la cultura del lugar de trabajo) en el cual tiene lugar la acción; y a la vez permita que algunos de estos actos intencionales sean generalizables" (Gonczi, 1996).

and promote the changes, individually and collectively, allow continued conceptual, scientific and technological developments of Nursing.

Importantly traits or characteristics listed in the professional profile not correspond exclusively to one subject or activity: some, such as the domain of certain content and techniques are identified primarily with defined curriculum areas in the curriculum; others, such as the consolidation of intellectual skills or values training correspond to the styles and educational practices to be promoted in all the courses.

Thus, the curricular approach of Plan 2011, is organized around three axes of training:

Theoretical Axis I - Professionalizing where languages essential for the training of graduate Nursing promoted. Through this ensures the domain of disciplinary basis and foundation is in the process of Nursing.

Curriculum areas and subjects included training this axis are:

- BIOLOGICAL (BIO01 / 10): Biochemistry, Anatomophysiology I and II, Ecology and Health, Pathophysiology I and II, Pharmacology, Gerontology and Geriatrics, Pediatrics and Gynecology and Perinatology Obsetricia.
- NURSING (ENF01 / 26): Introduction to Nursing, Nursing Process, Nursing Fundamental, Adult Care, Surgical Care, Elderly, Care trinomial mother-father-child, child care and teen Care Community Health I and II, Health and safety at work, alternative care, upgrade Seminar discipline, Laboratories, Practices and Social Service.

Axis II Methodological instrumental mediation contributes to the articulation of all knowledge in solving problems within the professional, labor and social context. Curriculum areas and subjects included training this axis are:

From this perspective, the inclusion of explicit content on Addictions, has been linked directly with the axis of same-disciplinary training that brings important matters for the exercise of the profession. Curriculum areas and subjects included training this axis are:

- SOCIAL-COMMUNITY (SC01 / 07): State Society and health, Activation Physics I and II, Enabling Physical and Rehabilitation, Health Care, Addictions I and II.

Then the powers provided in the Curriculum 2011, which promote professional approach in the field of addictions, as well as the subjects that underpin since its contents are as follows:

COMPETENCIAS	ASIGNATURAS
<p>En el transcurso de su aprendizaje desarrolla la comprensión y el compromiso de una participación interdisciplinaria, <u>para la instrumentación de programas de salud dirigidos a la población e intervenir en acciones de salud en los diferentes niveles de atención con base en el perfil epidemiológico predominante</u>. Bajo una postura consciente de apertura a la búsqueda y construcción de nuevos conocimientos en su vida profesional y personal.</p> <p>Revaloriza la práctica profesional de la enfermera (o) en el <u>espacio de intervención comunitaria, sobre la base de un trayecto formativo, enfatizando en forjar una conciencia social, analizar, problematizar y aprehender la realidad y resolver la problemática de salud ahí presentes</u>.</p>	<p>Estado, sociedad y salud Cuidado de la salud pública Cuidado de la salud comunitaria I y II</p>
<p>Genera propuestas para la atención de enfermería tendientes a cuestionar patrones de conducta obsoletos de la enfermera, <u>a modificar la conducta y actitud de la población ante su proceso salud enfermedad</u> y promoviendo la creación de propuestas que garanticen la calidad de la atención de enfermería, en la realidad de una práctica profesional dinámica y compleja.</p> <p><u>Analiza y toma decisiones de acuerdo a las circunstancias prevaletientes en la problemática de salud o enfermedad de los individuos</u>, ajustándose a los hábitos y creencias de las personas, en el contexto de la conservación de la salud o curación y rehabilitación de esta.</p> <p>Transforma paulatinamente la práctica profesional en los campos dominantes y emergentes <u>enfrentando una sociedad dinámica y compleja, utilizando como medios a la investigación, la gestión, el liderazgo y la intervención</u>; a través de la vinculación de conocimientos, saberes, habilidades, técnico profesionales y técnico cognitivas, actitudes.</p>	<p>Adicciones I y II</p>
<p>Disposición <u>para aplicar los diversos métodos: clínico, epidemiológico, científico, en la investigación de resolución de problemas de los procesos de interacción comunicativa</u>, proceso de atención de enfermería, en el campo de acción enfermero.</p>	<p>Cuidado de la salud comunitaria I y II Cuidado de la salud pública</p>
<p>Cultiva y promueve valores, derechos humanos, universales y los valores culturales regionales y nacionales, en el ejercicio de la enfermería.</p>	<p>Estado sociedad y salud</p>
<p>Fomenta una conciencia histórica y crítica sobre los problemas que el contexto histórico plantea a la profesión.</p>	<p>Estado Sociedad y salud Adicciones I y II</p>
<p>Contextualiza, interpreta y confronta desde la experiencia y la conceptualización, los fenómenos particularmente problemáticos de la práctica profesional en su vinculación con el proceso de salud-enfermedad, profundizando en la especificidad de la estructura social y antropológica de esa vinculación.</p>	<p>Estado sociedad y salud Cuidado de la salud pública</p>
<p>Aplica cuidado integral de enfermería, reconociéndose como parte integrante del equipo multidisciplinario, en la atención de las necesidades del individuo o colectividad sana o enferma, reconociendo los ámbitos y niveles de competencia y perspectivas de cada uno.</p>	<p>Cuidado de la salud comunitaria I y II</p>
<p>Sustenta la búsqueda y generación del conocimiento empírico y conceptual, desarrollando progresivamente habilidades conceptuales - metodológicas, <u>integrando y confrontando contenidos y discursos asimilados en su proceso formativo con las vividas en los escenarios teóricos y ejercitando aproximaciones teórico-empíricas como medida de aproximación a la investigación sobre sus prácticas</u> y las relaciones con la realidad social institucional, política y de racionalidad económica con su entorno.</p>	<p>Estado sociedad y salud Cuidado de la salud comunitaria I y II</p>



**Conclusions**

The participation of the nurse in health promotion and disease prevention, using epidemiological surveillance tool or strategic monitoring provides social epidemiology, should ensure an integrated view of the components in the promotion and prevention addictions that are incorporated into the analysis and solution of a problem like this, from the profession. Thus, the use of the nursing process to study the etiology of drug dependence is important to consider non-pharmacological factors such as availability, trends, peer pressure and prior learning with socially tolerated but not without substance risk. Also, consider that vulnerability to drug dependence is also related to some characteristics of the individual having been recognized in some cases even the existence of hereditary factors.

In the origin and maintenance of a drug involves many variables, therefore the study and understanding requires a multidisciplinary approach. Some variables that are worthy of note are the pharmacological properties of the substances, the physiological and psychological conditions of the consumer as well as various social and environmental factors.

The emphasis will continue to be the pre-eminence of health education and intervention strategies to help the process of social reintegration of interdisciplinary and inter-agency cooperation. Emphasizing, in the genesis and maintenance of an addiction involves many variables, therefore the study of this phenomenon requires a multidisciplinary approach.

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