

FROM THEORY TO PRACTICE: RESILIENCE, FORMAL CURRICULUM, AND NURSING EDUCATION IN EDUCATIONAL SCIENCES

DA TEORIA À PRÁTICA: RESILIÊNCIA, CURRÍCULO FORMAL E FORMAÇÃO EM ENFERMAGEM NAS CIÊNCIAS DA EDUCAÇÃO

DE LA TEORÍA A LA PRÁCTICA: RESILIENCIA, CURRÍCULO FORMAL Y FORMACIÓN EN ENFERMERÍA EN LAS CIENCIAS DE LA EDUCACIÓN



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ABSTRACT

This chapter examines resilience within the context of nursing education, integrating theoretical foundations from Educational Sciences with empirical evidence from higher education in health. Adopting a from theory to practice perspective, resilience is understood not merely as an individual trait, but as an educational competence developed throughout the academic trajectory and shaped by curricular, pedagogical, and institutional factors. The study is based on a longitudinal quantitative design conducted with undergraduate nursing students, enabling the analysis of changes in resilience levels over time. The findings indicate that resilience is a dynamic and multidimensional construct, positively associated with psychological well-being, reduced academic stress, and student retention. Factors such as social support, supervised clinical experiences, intentional pedagogical practices, and adaptive coping strategies were identified as central to strengthening student resilience. The discussion highlights the role of the formal curriculum, in conjunction with the hidden curriculum, in fostering socio-emotional competencies. It is concluded that integrating theory and practice through the lens of resilience significantly enhances nursing education and contributes to the advancement of Educational Sciences, emphasizing the importance of institutional policies and pedagogical strategies aimed at promoting healthier, more inclusive, and sustainable learning environments in higher education.

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RESUMO

Este capítulo examina a resiliência no contexto da formação em Enfermagem, integrando fundamentos teóricos das Ciências da Educação com evidências empíricas do ensino superior em saúde; adotando uma perspectiva da teoria à prática, a resiliência é compreendida não apenas como um traço individual, mas como uma competência educacional desenvolvida ao longo da trajetória acadêmica e moldada por fatores curriculares, pedagógicos e institucionais; o estudo baseia-se em um delineamento quantitativo longitudinal realizado com estudantes de graduação em Enfermagem, permitindo a análise das mudanças nos níveis de resiliência ao longo do tempo; os resultados indicam que a resiliência é um construto dinâmico e multidimensional, positivamente associado ao bem-estar psicológico, à redução do estresse acadêmico e à permanência estudantil; fatores como apoio social, experiências clínicas supervisionadas, práticas pedagógicas intencionais e estratégias adaptativas de enfrentamento foram identificados como centrais para o fortalecimento da resiliência estudantil; a discussão destaca o papel do currículo formal, em conjunto com o currículo oculto, na promoção de competências socioemocionais; conclui-se que a integração entre teoria e prática sob a ótica da resiliência potencializa significativamente a formação em Enfermagem e contribui para o avanço das Ciências da Educação, enfatizando a importância de políticas institucionais e estratégias pedagógicas voltadas à promoção de ambientes de aprendizagem mais saudáveis, inclusivos e sustentáveis no ensino superior.

Palavras-chave: Resiliência. Formação em Enfermagem. Ciências da Educação. Currículo. Ensino Superior.

RESUMEN

Este capítulo examina la resiliencia en el contexto de la formación en Enfermería, integrando fundamentos teóricos de las Ciencias de la Educación con evidencia empírica de la educación superior en salud; adoptando una perspectiva de la teoría a la práctica, la resiliencia se entiende no solo como un rasgo individual, sino como una competencia educativa desarrollada a lo largo de la trayectoria académica y moldeada por factores curriculares, pedagógicos e institucionales; el estudio se basa en un diseño cuantitativo longitudinal realizado con estudiantes de grado en Enfermería, lo que permite analizar los cambios en los niveles de resiliencia a lo largo del tiempo; los resultados indican que la resiliencia es un constructo dinámico y multidimensional, asociado positivamente con el bienestar psicológico, la reducción del estrés académico y la permanencia estudiantil; factores como el apoyo social, las experiencias clínicas supervisadas, las prácticas pedagógicas intencionales y las estrategias adaptativas de afrontamiento fueron identificados como centrales para fortalecer la resiliencia estudiantil; la discusión destaca el papel del currículo formal, en conjunto con el currículo oculto, en la promoción de competencias socioemocionales; se concluye que la integración entre teoría y práctica desde la perspectiva de la resiliencia potencia significativamente la formación en Enfermería y contribuye al avance de las Ciencias de la Educación, enfatizando la importancia de políticas institucionales y estrategias pedagógicas orientadas a promover entornos de aprendizaje más saludables, inclusivos y sostenibles en la educación superior.

Palabras clave: Resiliencia. Formación en Enfermería. Ciencias de la Educación. Currículo. Educación Superior.

1 INTRODUCTION

Social, scientific, and technological transformations over recent decades have profoundly reshaped higher education training processes, particularly in the health sciences. The expansion of access to universities, the diversification of student profiles, and the increasing complexity of health systems have demanded new competencies from future professionals, extending well beyond the strictly technical dimension of knowledge (BREWER et al., 2019; SANDERSON; BREWER, 2017; TUR PORCAR et al., 2020).

Within the context of nursing education, these transformations manifest with particular intensity. Nursing is a professional field characterized by high cognitive, emotional, and practical demands, in which students are progressively exposed to human suffering, ethical responsibility, academic pressure, and institutional requirements. National and international studies indicate that these factors contribute to elevated levels of stress, anxiety, and emotional vulnerability among nursing students, with direct repercussions for academic performance, mental health, and student retention (SOUZA et al., 2020; RODRIGUES; RODRIGUES; CARVALHO, 2020; TUR PORCAR et al., 2020).

Within this context, resilience has emerged as a central construct for understanding processes of positive adaptation in the face of adversities encountered throughout the educational trajectory. Far from being understood as an innate or exclusively individual characteristic, resilience is conceptualized as a dynamic process, developed over time and shaped by multiple factors, including personal, social, educational, and institutional dimensions (BRANDÃO; MAHFOUD; GIANORDOLI-NASCIMENTO, 2011; STACEY; COOK, 2019).

The literature indicates that students with higher levels of resilience tend to demonstrate greater emotional balance, enhanced capacity to cope with academic stress, and stronger engagement in the learning process. Conversely, low levels of resilience are associated with an increased risk of psychological distress, academic dropout, and difficulties in adapting to the demands of higher education in the health sciences (LI; HASSON, 2020; TUR PORCAR et al., 2020).

From the perspective of Educational Sciences, conceptualizing resilience as an analytical category entails shifting the focus beyond the exclusively individual level toward an approach that acknowledges the role of the curriculum, pedagogical practices, and institutional culture in student development. The formal curriculum, as articulated in pedagogical projects and course syllabi, as well as the hidden curriculum composed of implicit values, relationships, and practices, constitute privileged spaces for either the

promotion or the undermining of resilience throughout undergraduate education (BREWER et al., 2019; SANDERSON; BREWER, 2017; TUR PORCAR et al., 2020).

Thus, this chapter proposes a reflection that integrates theory and practice, aligning with the aims of the book *From Theory to Practice: A Modern Approach to Educational Sciences*. It is grounded in the assumption that resilience constitutes a relevant educational competence within Educational Sciences, particularly in the context of nursing education, as it brings together human development, meaningful learning, and preparation for professional practice in complex and challenging settings (BRANDÃO; MAHFOUD; GIANORDOLI-NASCIMENTO, 2011; STACEY; COOK, 2019).

1.1 HEALTH EDUCATION AND CONTEMPORARY CHALLENGES

Health education within the context of higher education faces challenges that reflect transformations in the contemporary world, such as the intensification of professional demands and changes in student profiles (BREWER et al., 2019; WALSH et al., 2020).

From the perspective of Educational Sciences, it becomes essential to rethink teaching and learning processes by recognizing students as active agents in their own educational trajectories. In this regard, health education must incorporate pedagogical strategies that promote not only the acquisition of technical knowledge but also the development of socioemotional competencies, which are fundamental for qualified and humanized professional practice (MEJIA, 2018; YESENIA, 2023; CRISTINA, 2023).

1.2 RESILIENCE AS AN EDUCATIONAL AND PSYCHOSOCIAL CONSTRUCT

Resilience, originally discussed within fields such as psychology and sociology, has gained increasing prominence in educational discourse, particularly in the context of health professional education (BRANDÃO; MAHFOUD; GIANORDOLI-NASCIMENTO, 2011; STOFFEL; CAIN, 2018).

Within the educational field, resilience should not be understood as an innate or exclusively individual characteristic, but rather as a dynamic process influenced by personal, social, and institutional factors. Consequently, pedagogical practices, interpersonal relationships, curricular organization, and institutional support emerge as central elements in the promotion of student resilience (SILVA, 2017; MEJIA, 2018; MORAES FILHO et al 2020; SOUZA et al 2020; CRISTINA, 2023; YESENIA, 2023).

1.3 NURSING EDUCATION BETWEEN THEORY AND PRACTICE

Nursing education is characterized by the continuous articulation between theoretical knowledge and practical experiences, requiring students to demonstrate a high capacity for adaptation and coping. The transition between classroom instruction, laboratory activities, and real-world care settings imposes challenges that directly affect students' academic trajectories and emotional well-being. Within this context, understanding how the formal curriculum contributes to the development of resilience becomes essential, as the curriculum embodies pedagogical intentions and institutional values that directly shape student formation. By intentionally and reflectively integrating theory and practice, nursing education can foster the construction of healthier, more coherent academic pathways that are aligned with the contemporary demands of health education (SILVA, 2017; MEJIA, 2018; MORAES FILHO et al 2020; SOUZA et al 2020; CRISTINA, 2023; YESENIA, 2023).

2 THEORETICAL FOUNDATIONS OF RESILIENCE IN HIGHER EDUCATION

2.1 CONCEPTS AND THEORETICAL MODELS OF RESILIENCE

Resilience has been extensively investigated in the fields of health and education, particularly through psychological and educational approaches applied to professional training. From a conceptual standpoint, resilience is understood as a dynamic process involving the capacity for positive adaptation in the face of adverse situations. It is not limited to an individual trait, but rather emerges from the interaction among personal, social, and contextual factors (BRANDÃO; MAHFOUD; GIANORDOLI-NASCIMENTO, 2011; STACEY; COOK, 2019).

Within the context of nursing education, studies demonstrate that resilience plays a central role in coping with the academic and emotional demands experienced by students throughout undergraduate training (BREWER et al., 2019; SANDERSON; BREWER, 2017). Contemporary theoretical models emphasize that the presence of protective factors, such as social support, coping strategies, and supportive educational environments, contributes significantly to the strengthening of student resilience (LI; HASSON, 2020).

Furthermore, systematic reviews and scoping studies indicate that structured educational interventions embedded within the curriculum can foster the development of resilience among health sciences students, reinforcing the notion that resilience constitutes a competence that can be taught and learned (DIFFLEY; DUDDLE, 2022; WALSH et al., 2020).

2.2 RESILIENCE, MENTAL HEALTH, AND EDUCATIONAL PROCESSES

The relationship between resilience and mental health has received increasing attention in the scientific literature, particularly within the context of nursing education. Evidence indicates that students in this field experience high levels of stress, anxiety, and psychological distress, arising both from academic demands and from experiences encountered in clinical practice settings (SOUZA et al., 2020; RODRIGUES; RODRIGUES; CARVALHO, 2020).

Empirical studies demonstrate that higher levels of resilience are associated with more favorable indicators of psychological well-being, a lower incidence of academic burnout, and greater persistence throughout the course of study (CHOW et al., 2018; RÍOS-RISQUEZ et al., 2018). In this regard, resilience functions as a mediating factor between academic stressors and students' mental health, contributing to healthier educational trajectories (LI; HASSON, 2020).

The literature further indicates that educational strategies aimed at promoting self-care, social support, and emotional development exert positive effects on resilience and student well-being, reinforcing the need for intentional pedagogical approaches in higher education health programs (HIGGINS et al., 2024; MOORE; MONTGOMERY; COBBS, 2021).

2.3 THE FORMAL CURRICULUM AND THE HIDDEN CURRICULUM IN HEALTH EDUCATION

The curriculum, as a structuring element of university education, exerts a direct influence on the development of academic and socioemotional competencies. Within the context of health education, the formal curriculum, as expressed through pedagogical projects, course syllabi, and curricular activities, defines the content, objectives, and methodologies that guide the educational process (WALSH et al., 2020).

However, beyond the formal curriculum, the hidden curriculum, constituted by interpersonal relationships, institutional practices, and implicitly conveyed values, plays a significant role in student formation. Studies indicate that experiences encountered within academic environments and clinical practice settings significantly influence the development of resilience, either positively or negatively (DIFFLEY; DUDDLE, 2022; STACEY; COOK, 2019).

In nursing education, the articulation between the formal and hidden curricula becomes particularly relevant given students' exposure to situations of high emotional complexity. Accordingly, understanding the curriculum as a potential space for the promotion

of resilience contributes to strengthening the integration between theory and practice, in alignment with the contemporary demands of Educational Sciences (SILVA, 2017; MEJIA, 2018; MORAES FILHO et al 2020; SOUZA et al 2020; CRISTINA, 2023; YESENIA, 2023).

3 STUDY METHODOLOGY

3.1 STUDY DESIGN AND METHODOLOGICAL APPROACH

This chapter is based on a longitudinal study employing a quantitative approach, conducted with undergraduate nursing students, with the aim of analyzing changes in resilience levels throughout the educational trajectory. The choice of a longitudinal design is justified by its capacity to capture changes over time, thereby allowing resilience to be understood as a dynamic process, in accordance with the relevant literature (RÍOS-RÍSQUEZ et al., 2018; LI; HASSON, 2020).

The quantitative approach proved appropriate for the objective measurement of resilience and its dimensions, as it has been widely employed in research involving nursing students and other health sciences populations (TUR PORCAR et al., 2020; CHOW et al., 2018).

3.2 STUDY CONTEXT AND PARTICIPANTS

The study was conducted at a public higher education institution located in the interior of the state of São Paulo, Brazil, which offers a full-time undergraduate nursing program. The participants comprised 40 regularly enrolled students, all of whom entered the program in 2021 and were reassessed in 2022 and 2023, being followed from the time of entry into the course through the subsequent years of training.

The sample composition followed previously established inclusion criteria, encompassing students aged 18 years or older who were formally enrolled in the program, in line with similar investigations conducted within the context of nursing education (RUAS et al., 2019; SOUZA et al., 2020).

3.3 DATA COLLECTION INSTRUMENTS

Resilience was assessed using a validated psychometric scale that has been widely employed in studies involving nursing students and health professionals. The selection of this instrument was based on evidence of its validity, reliability, and cultural appropriateness, as documented in national and international studies (WAGNILD; YOUNG, 1993; PESCE et al., 2005).

In addition to the resilience scale, sociodemographic and academic data were collected, including age, sex, stage of the program, and information related to students' academic trajectories, given the relevance of these factors for the analysis of student resilience (MORAES FILHO et al., 2020).

3.4 DATA COLLECTION AND ANALYSIS PROCEDURES

Data collection was conducted at different points throughout the educational trajectory, allowing for a comparative analysis of resilience levels over time. The procedures adopted followed ethical and methodological protocols consistent with research involving university students (SILVA, 2017).

The data were analyzed using appropriate statistical techniques with the aid of the R software, current version, which is widely recognized for scientific data analysis (R Core Team, 2023). To assess data normality, the Shapiro–Wilk test was applied, in accordance with classical methodological recommendations (SHAPIRO; WILK, 1965).

These analyses enabled the identification of trends, associations, and variations in resilience levels throughout the training process, thereby contributing to an understanding of the role of the formal curriculum and academic experiences in the development of resilience among nursing students.

3.5 ETHICAL CONSIDERATIONS

This study was duly submitted to the Research Ethics Committee of the São José do Rio Preto School of Medicine (CEP–FAMERP) and constitutes an integral part of the parent project entitled Social and Human Sciences in Health Sciences Programs: Evaluation of the Impact of Nursing, Medicine, and Psychology Curricula on the Development of Professionalism. The project received approval under CAAE number 41220020.8.0000.5415, Ethics Committee opinion number 4,543,158, and was approved on February 17, 2021.

All necessary measures were and will continue to be taken to ensure the confidentiality and anonymity of the research participants.

4 RESULTS AND DISCUSSION

4.1 SOCIODEMOGRAPHIC AND ACADEMIC PROFILE OF THE STUDENTS

The findings indicate that the sociodemographic profile of the nursing students analyzed exhibits characteristics similar to those reported in the national and international literature, particularly with regard to the predominance of female students, a young adult age range, and full-time dedication to the program. Studies suggest that these characteristics

directly influence students' academic experiences and the levels of stress encountered throughout their training (SOUZA et al., 2020; RODRIGUES; RODRIGUES; CARVALHO, 2020).

Factors such as age, socioeconomic conditions, and early clinical experiences may function both as risk factors and as protective elements in the development of resilience, as indicated by studies conducted with health sciences students (MORAES FILHO et al., 2020; PERRY et al., 2023).

4.2 LEVELS OF RESILIENCE AND ITS DIMENSIONS ACROSS THE TRAINING PROCESS

The sample comprised 40 nursing students from FAMERP, predominantly female (85%), with a mean age of 19.5 years (SD = 1.8). Table 1 presents the descriptive statistics for the resilience dimensions across the three years of the study, revealing moderate to high resilience levels among the participants.

Table 1

Descriptive analysis of resilience factors over three years (2021–2023). (n = 40, FAMERP, 2025)

Resilience Factor	Year		
	2021	2022	2023
Self-Sufficiency	28.15 (3.85)	28.43 (4.22)	27.13 (4.72)
Meaning of Life	27.95 (2.19)	26.33 (3.42)	26.75 (2.84)
Equanimity	24.55 (4.38)	25.25 (4.62)	23.33 (4.15)
Perseverance	30.40 (3.37)	27.95 (4.70)	27.85 (4.68)
Existential Singularity	27.83 (4.45)	27.10 (4.88)	27.23 (5.20)

Results are presented as mean (standard deviation).

Table 1 presents the descriptive statistics for resilience factors, indicating moderate to high levels of resilience among students, particularly in Self-Reliance and Perseverance.

To understand how the resilience factors changed over time, a repeated measures ANOVA was conducted. Table 2 summarizes the results of this analysis, highlighting the statistical significance and effect sizes for each factor.

Table 2

Comparative analysis of resilience factors over three years (2021–2023). (n = 40, FAMERP, 2025)

Resilience Factor	Year			Valor p*	TDE†
	2021	2022	2023		
Autossuficiência	28.15 (3.85)	28.43 (4.22)	27.13 (4.72)	0.3857	0.0241
Meaning of Life	27.95 (2.19)	26.33 (3.42)	26.75 (2.84)	0.1200‡	0.0927
Equanimity	24.55 (4.38)	25.25 (4.62)	23.33 (4.15)	0.1148	0.0540
Perseverance	30.40 (3.37)	27.95 (4.70)	27.85 (4.68)	0.0131	0.1051
Existential Singularity	27.83 (4.45)	27.10 (4.88)	27.23 (5.20)	0.7851	0.0062

Results are presented as mean (standard deviation).

* Repeated measures ANOVA; † Effect size = partial eta squared. ‡ Estimated mean p-value after applying bootstrapping technique due to non-normal distribution of residuals. Bold formatting = Significant p-value.

Given the significant finding for the Perseverance factor, post-hoc tests were performed to pinpoint where the differences occurred. Table 3 details these comparisons between the years, providing adjusted p-values and Cohen’s d effect sizes.

Table 3

Post-hoc comparisons for perseverance factor (2021–2023). (n = 40, FAMERP, 2025)

Resilience Factor	Pairwise Comparisons					
	2021 x 2022		2021 x 2023		2022 x 2023	
	p-Value	TDE (IC 95%)	p-Value	TDE (IC 95%)	p-Value	TDE (IC 95%)
Perseverance	0.027	0.570 0.147; 0.994	0.021	0.594 0.171; 1.016	1.000	0.023 - 0.479 ; 0.525

ES, Effect Size = Cohen’s d; CI, Confidence Interval; Bold formatting = Significant p-value.

While the decrease in Perseverance was statistically significant, it is important to consider the practical implications of this change. A decrease of 2.55 points on the scale may indicate a reduced capacity to cope with academic stress and pressure, potentially affecting performance and well-being.

To illustrate the trend in Self-Sufficiency, which remained relatively stable over the study period, Figure 1 presents the scores for this factor across the three years. In contrast to Self-Reliance, the Perseverance factor showed a significant decline. To further emphasize the importance of this finding, we have added a more detailed explanation of the observed decrease in Perseverance scores. Specifically, the Perseverance scores decreased significantly from 2021 ($M = 30.40$, $SD = 3.37$) to 2022 ($M = 27.95$, $SD = 4.70$) and 2023 ($M = 27.85$, $SD = 4.68$), as revealed by repeated measures ANOVA ($p = 0.0131$). Post-hoc comparisons indicated significant differences between 2021 and 2022 ($p = 0.027$) and between 2021 and 2023 ($p = 0.021$). Figure 2 visually represents this decrease in Perseverance scores from 2021 to 2022 and 2023, highlighting the impact of academic progression on this aspect of resilience.

Figure 1

Self-Reliance scores across the three years of the study (2021–2023) demonstrate the stability of this resilience factor. ($n = 40$, FAMERP)

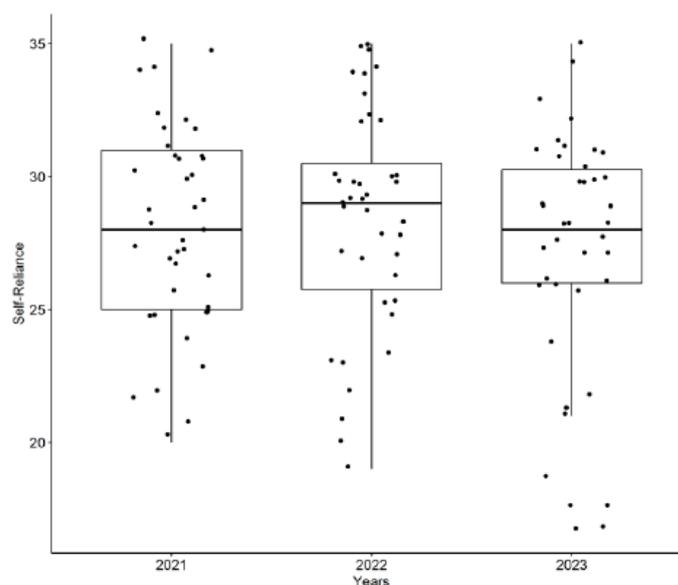
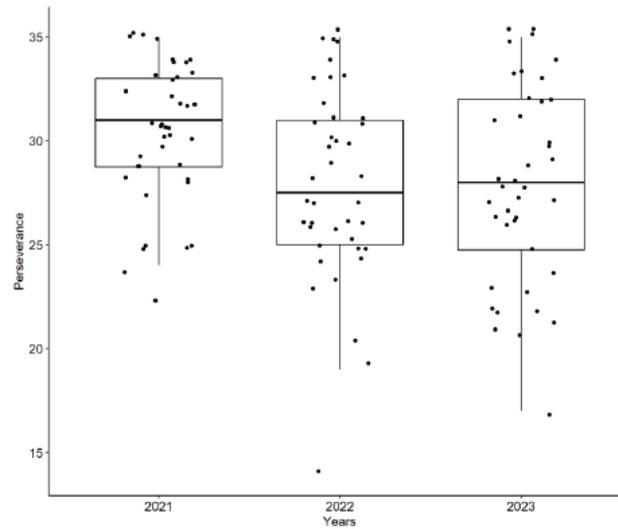


Figure 2

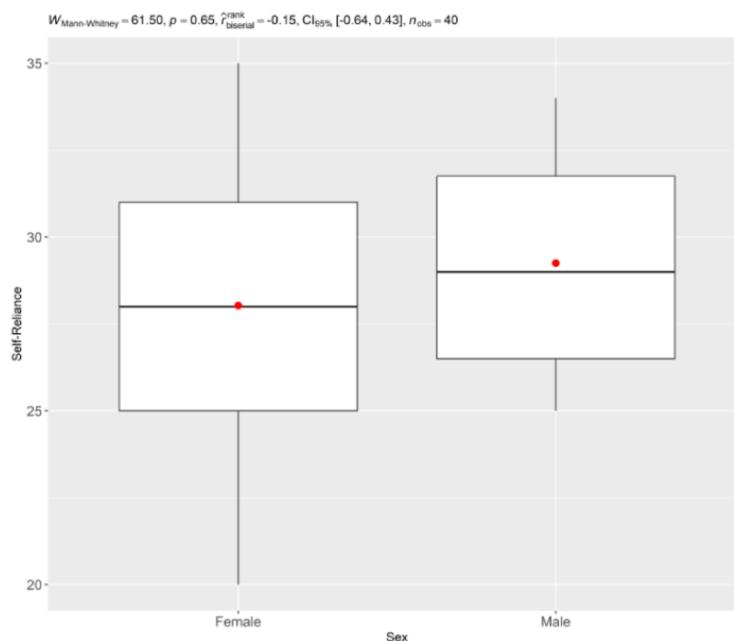
Comparison of Self-Reliance by Sex, indicating no significant differences between groups. ($n = 40$, FAMERP, 2025)



To explore whether sociodemographic factors influenced resilience, comparisons were made between different groups. Figure 3 presents the comparison of A Self-Reliance by sex, showing that there were no significant differences between male and female students in this resilience factor.

Figure 3

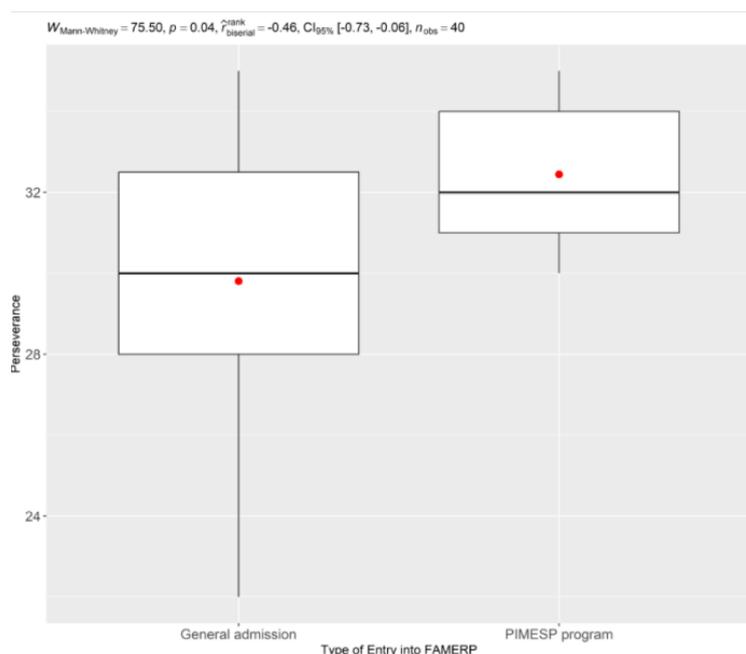
Comparison of Self-Reliance by Sex, indicating no significant differences between groups. ($n = 40$, FAMERP, 2025)



Finally, Figure 4 presents a comparison of Perseverance scores based on the type of entry into FAMERP, revealing that students entering through the PIMESP program (Inclusion Program with Merit in Public Higher Education of São Paulo State) exhibited higher scores in Perseverance compared to those entering through general admission.

Figure 4

Comparison of Perseverance by Type of Entry into FAMERP, demonstrating higher scores for students entering through the PIMESP program (Inclusion Program with Merit in Public Higher Education of São Paulo State). (n = 40, FAMERP, 2025)



Independent samples t-tests were conducted to determine if there were statistically significant differences in Perseverance scores based on sex and type of entry into FAMERP. The t-tests comparing Perseverance scores by sex were not significant for any of the time points (2021, 2022, and 2023). However, the t-test comparing Perseverance scores by type of entry into FAMERP revealed a significant difference in 2021 ($t = 2.5$, $p < 0.05$), with students entering through the PIMESP program exhibiting higher Perseverance scores. This difference was not significant in 2022 or 2023.

These results indicate that while nursing students at FAMERP begin their course with promising resilience levels, there is a notable decline in the Perseverance factor over time. Additionally, the type of entry into the university appears to influence students' perseverance levels.

The analysis of resilience levels revealed moderate to high values among the students, corroborating evidence that resilience constitutes a competence progressively developed

throughout nursing education (CHOW et al., 2018; AMSRUD; LYBERG; SEVERINSSON, 2019). Validated psychometric instruments have demonstrated consistency in the measurement of this construct across different educational contexts (TUR PORCAR et al., 2020; PESCE et al., 2005).

Dimensions related to perseverance, emotional balance, and sense of purpose proved to be particularly relevant, aligning with studies that associate these factors with reduced academic stress and the promotion of psychological well-being (RÍOS-RÍSQUEZ et al., 2018; SMITH; YANG, 2017).

4.3 RESILIENCE, STRESS, AND PSYCHOLOGICAL WELL-BEING

The results indicate a positive association between higher levels of resilience and more favorable indicators of psychological well-being, including lower perceived stress and greater satisfaction with academic life. Similar evidence is widely documented in the literature, which identifies resilience as a mediating variable between academic stressors and mental health outcomes (LI; HASSON, 2020; ZHANG et al., 2024).

In addition, social and institutional support emerges as a central factor in strengthening resilience, operating in an integrated manner with individual coping strategies (BUTTON; FALLON; FOWLER, 2023; AVELAR; FARINA, 2024).

4.4 PEDAGOGICAL IMPLICATIONS: FROM THEORY TO EDUCATIONAL PRACTICE

The findings highlight the need to intentionally incorporate pedagogical strategies aimed at fostering resilience within undergraduate nursing curricula. Educational interventions grounded in mindfulness, emotional intelligence, and self-care have demonstrated positive effects on strengthening resilience and enhancing student well-being (SILVA, 2017; CLEARY et al., 2018; MORAES FILHO et al., 2020; SOUZA et al., 2020; VEIGH et al., 2021; YEO; SO; CHAE, 2023).

These strategies reinforce the articulation between theory and practice within Educational Sciences by recognizing students' holistic development as a central axis of the educational process. Structured resilience-promotion programs have shown positive impacts on both students' mental health and the quality of future professional training (MOORE; MONTGOMERY; COBBS, 2021; DIFFLEY; DUDDLE, 2022).

5 FINAL CONSIDERATIONS

This chapter aimed to analyze resilience within the context of nursing education by articulating foundations from Educational Sciences with empirical evidence derived from

studies conducted in higher education in health. By adopting a theory-to-practice perspective, resilience was examined not merely as an individual attribute, but as an educational competence developed throughout the training trajectory and influenced by curricular, pedagogical, and institutional factors.

The findings discussed indicate that resilience exhibits a dynamic and multidimensional character, manifesting progressively throughout undergraduate nursing education. Elements such as social support, intentional pedagogical practices, supervised clinical experiences, and adaptive coping strategies emerged as central to strengthening students' psychological well-being and academic persistence, in line with the specialized literature (LI; HASSON, 2020; BREWER et al., 2019).

From the perspective of Educational Sciences, these findings reinforce the relevance of curricula that explicitly integrate the development of socioemotional competencies with technical and scientific content. Educational interventions aimed at promoting resilience, self-care, and emotional intelligence demonstrate strong potential to enhance professional training, contributing to the preparation of nurses who are better equipped to cope with contexts of high complexity and emotional pressure (WALSH et al., 2020; DIFFLEY; DUDDLE, 2022).

In addition, this study advances knowledge by demonstrating that resilience can be fostered through intentionally structured pedagogical practices and institutional policies. This understanding broadens the role of higher education institutions, assigning them an active responsibility in creating healthy and inclusive learning environments aligned with the contemporary demands of health education.

As a limitation, the study is confined to a specific institutional context, which may restrict the generalizability of the findings. Nevertheless, the evidence presented offers valuable insights for future research and for the implementation of educational strategies aimed at strengthening resilience across diverse educational settings.

In conclusion, integrating theory and practice through the lens of resilience represents a promising pathway for enhancing nursing education and strengthening Educational Sciences. By recognizing resilience as an essential educational competence, this chapter contributes to critical reflection and to the development of more humane, sustainable, and context-responsive educational practices in contemporary higher education.

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