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TEACHING COMMUNICATION IN NURSING DEGREES: A CURRICULAR ANALYSIS AND PERCEPTIONS OF STUDENTS AND PROFESSORS

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Abstract

Introduction: Communication is essential for nursing professionals, impacting healthcare quality and evolving nursing roles. It must be integrated into training programs. In Spain, study plans must be registered in the Registry of Universities, Centers, and Degrees (RUCT), including subject-specific competencies. This study examines the presence of communication competencies in nursing education and the perceptions of students and faculty regarding their importance and acquisition. **Methodology:** A curriculum analysis of 61 universities offering a Nursing Degree was conducted, reviewing 38 identified communication-related courses. Additionally, questionnaires were administered to 282 students and 230 faculty members to assess their perceptions of communication competencies. **Results:** Recurrent competencies from Order CIN/2134/2008 and ANECA were identified. All were positively evaluated, with CE8 and CE16 receiving the highest ratings, while CE6 the lowest. Overall, 65% of students were satisfied with their communication training, though 10% expressed dissatisfaction. **Discussion:** There are no standardized criteria for defining and classifying communication competencies. Information in the RUCT is heterogeneous and lacks a clear structure. **Conclusions:** Despite its recognized importance, the lack of clear criteria hinders the integration of communication competencies into nursing curricula. A more defined and standardized framework is needed to ensure consistent and effective training aligned with healthcare demands.

Keywords:

Nursing, Communication, Professional Competence, Nursing Education, Health Communication.

1. INTRODUCTION

Communication is essential for human beings due to their social nature, since through interaction with others they are able to learn and share experiences, feelings, values, and goals (Ruiz Moral, 2014). From the moment a person is born, they begin to develop the communication skills they will need throughout their life, in all areas, in order to relate to others. Recently, with the incorporation of technology, the communication paradigm has changed, also modifying the way in which people interact with one another. This progress has had a significant impact on various sectors, including healthcare, where information technologies have transformed the way professionals interact with patients and among themselves.

Since the end of the twentieth century, advances in the health sciences have been remarkable, both in the scientific and technological fields, improving diagnostic, therapeutic, surgical, and patient follow-up techniques. At the same time, information technologies have transformed society, facilitating global access to information and affecting areas such as the economy, education, and health. These changes have given rise to a more comprehensive view of health, linked not only to medical aspects but also to social and cultural factors. As a result, a transformation has occurred in the way health problems are addressed, promoting more inclusive and global policies (Martínez Martín & Chamorro Rebollo, 2023).

The creation of the National Health System in Spain, following the General Health Law (Law 14/1986, 1986), marked a milestone in the evolution of the healthcare system, establishing a

health model based on comprehensive and universal care. Over the years, various regulations have been implemented that have made it possible to improve healthcare provision and promote the professionalization of Nursing. This approach has transformed Nursing into a scientific and human discipline that not only provides care, but also extends its functions to teaching, research, and management, playing a fundamental role in healthcare teams and in evidence-based decision-making.

In the process of the evolution of Nursing in Spain, a key moment was the integration of Nursing education into the university system in 1977. Following movements initiated in the United States and Canada, a group of nurses promoted the transformation of Nursing into an academic discipline. Prior to this date, the studies of Technical Health Assistant (ATS) were officially recognized in 1970, but it was not until the creation of the University Diploma in Nursing (DUE) in 1977 that the training was established as a three-year university program, balancing theory and practice, with the objective of promoting professional mobility within the European Economic Community (EEC).

Throughout the following decades, changes in university education and Spain's integration into the European Higher Education Area (EHEA) marked the modernization of Nursing studies. In 1983, the University Reform Law introduced a credit system and greater autonomy for students (Ley Orgánica 11/1983). Furthermore, the reforms promoted by the Bologna Declaration in 1999 fostered the creation of a more homogeneous and competitive higher education system in Europe (Espacio Europeo de la Enseñanza Superior, 1999), which led to the restructuring of Nursing education in 2007, when the diploma system was abolished and the bachelor's degree in nursing was established, with a duration of four years and 240 ECTS credits.

At the same time, nursing research began to gain importance. From 2003 onward, with the approval of new regulations and the promotion of research, the number of doctoral theses related to Nursing began to increase significantly, especially from 2008 onwards, reflecting a greater research commitment within the field (Rodríguez et al., 2012). Despite representing a minority within the research sphere, Nursing has begun to gain presence in specialized journals and conferences.

The university constitutes the point of convergence between educational training and professional practice, especially in the field of Health Sciences, where not only theoretical knowledge is valued, but also the development of competencies, skills, attitudes, and values necessary for professional performance. At present, academic training must be accompanied by a series of generic competencies, other specific competencies, and some transversal competencies, such as initiative, problem-solving, empathy, and interpersonal skills, which are highly demanded in the labor market. This shift in perspective toward a comprehensive education, which considers both the cognitive and the social and affective aspects of the student, reflects an evolution from the traditional educational model toward a more collaborative one. In this context, the teaching and assessment of communication competencies have become essential components in the training of healthcare professionals. In particular, competence in Nursing is defined as the ability to effectively apply knowledge and skills in practical situations, which implies a critical integration of theory and practice and the use of available resources to address professional problems that may arise.

The Spanish university system is composed of a network of public and private universities offering undergraduate, master's, and doctoral programs in various academic disciplines. These universities are subject to regulations and quality standards established by the government and by

evaluation and accreditation agencies, thereby guaranteeing educational quality. At the national level, Order CIN/2134/2008 (2008) establishes the requirements for the verification of university degrees that qualify graduates for professional practice in Nursing, defining a set of general and specific competencies that students must acquire. In this context, universities must be registered in the Registry of Universities, Centres and Degrees (RUCT²) (Ministerio de Ciencia Innovación y Universidades³, 2025a), regulated by Real Decreto 1509/2008 (2008), of 12 September, which provides updated information on university institutions, study programs, and academic degrees, constituting an essential administrative tool for the Spanish university system.

Among the existing regulatory bodies, the principal one is the Agencia Nacional de Evaluación de la Calidad y Acreditación⁴ (ANECA, 2004), a key organization in the continuous improvement of the higher education system, responsible for evaluating and certifying the quality of academic programs and institutions, and which is also linked to the Red Española de Agencias de Calidad Universitaria⁵ (REACU). At the international level, initiatives such as the Tuning Educational Structures in Europe Project (González & Wagenaar, 2003) and the Consejo Internacional de Enfermería (CIE)⁶ (Alexander & Runciman, 2013) contribute to the development of transversal competencies that promote adaptability and the comprehensive training of professionals, with a particular focus on the communicative competencies essential in Nursing practice.

2. OBJECTIVES

The general objective of this study was to carry out a comprehensive analysis of the current state of communication competencies in the education of Nursing Degree students in Spain. To this end, the following specific objectives were established: first, to describe the current state of communication competencies in the curricula of Nursing Degree programs at Spanish universities; second, to analyze the profile and content of the subjects dedicated to communication within the training programs of the Nursing Degree; third, to determine the perception of students and faculty regarding the importance and scope of communication competencies in the field of Nursing; and finally, to describe students' perceptions of their process of acquiring communication competencies throughout their academic training.

3. METHODOLOGY

In the first phase of the study, an in-depth analysis was carried out to present the current situation of nursing competencies registered by universities. To this end, a descriptive observational study was conducted. This phase took place between May and September 2023.

To describe the current state of nursing competencies in student training, a documentary review study was designed, collecting the data registered in the RUCT. In an initial consultation, a list was compiled of the universities offering the Nursing Degree in Spain.

² by its Spanish acronym

³ Ministry of Science, Innovation and Universities

⁴ National Agency for Quality Assessment and Accreditation

⁵ Spanish Network of University Quality Agencies

⁶ International Council of Nurses (ICN)

In order to analyze which communication competencies existed, it was first necessary to identify the communication-related subjects within the Nursing Degree and to analyze their profile. To collect the information, a new specific database was created in which data from university websites and, in parallel, the data observed in the RUCT were recorded. This information was collected between December 2023 and February 2024.

Taking into account the results of the previous phase, the most frequently cited competencies were taken as a reference and classified into the same categories (basic, general, specific, and transversal). For the review and analysis of the data, the Excel application of the Microsoft 365® cloud-based productivity platform was used, incorporating the data through databases designed for this purpose.

For the second phase of the study, a cross-sectional descriptive observational study with a quantitative methodology was carried out through a self-administered questionnaire in order to determine the perception and assessment that nursing professors and students have regarding communication competencies. A non-probabilistic purposive sampling method was employed to access the sample. This choice was based on the large number of university centers, their geographically dispersed distribution, and the possible difficulties in accessing certain profiles, factors that could negatively affect the proper design of other methodologies (Sharma, 2017).

For both study groups, sociodemographic variables were collected anonymously, and participants were asked about the importance they attributed to communication competencies, in which subjects they considered these competencies to be mainly taught, and, in the case of students, their satisfaction and perception regarding the acquisition of these competencies. The use of the 5-level Likert scale in questionnaires addressed to nursing students and faculty offered several advantages, such as its ability to obtain a nuanced assessment of perceptions and attitudes, which facilitated a precise measurement of the phenomena studied (Hernández-Marín et al., 2024; Matas, 2018).

To examine differences in the importance attributed to communication competencies according to student characteristics, on the one hand, and faculty characteristics, on the other, non-parametric tests for comparison of medians were employed. Specifically, the Mann-Whitney U test was applied for categorical variables with two levels, and the Kruskal-Wallis test for variables with three or more levels. For significant comparisons in groups with two levels, effect size (Cohen's d) was calculated to determine the magnitude of differences between groups. Effect sizes were interpreted as small ($|d| < 0.2$), moderate ($0.2 \leq |d| < 0.5$), or large ($|d| \geq 0.5$). In the case of a significant Kruskal-Wallis result, Dunn's post hoc test with Bonferroni correction was performed to determine between which pairs of groups significant differences in the median existed.

The management of the information collected in this project is governed by the current legislation on data protection, both European —Regulation 2016/679 of the European Parliament and of the Council of 27 April 2016 (RGPD⁷)— and Spanish, Ley Orgánica 3/2018, of 5 December, on Personal Data Protection and Guarantee of Digital Rights. The research methodology proposed in this study was submitted to the Ethics Committee of the University Pontificia of Salamanca for review and received a favorable opinion on 19 April 2024.

⁷ General Data Protection Regulation (GDPR)

4. RESULTS AND DISCUSSION

In a context of social transformation driven by technological advances and Artificial Intelligence (AI), nursing has undergone significant evolution, particularly in its professionalization and academic training (Rubio Martín & Rubio Martín, 2021). Despite efforts to establish homogeneous criteria in the teaching of this discipline, differences persist in the application of teaching methodologies and in the evaluation of competencies among educational institutions (Pérez Martín, 2022). Although current legislation, such as Real Decreto 861/2010 (2010), establishes structural foundations for undergraduate programs, the lack of a clear consensus regarding methodologies and criteria generates disparities in the training of professionals.

In this context, the definition and classification of competencies in nursing have been the subject of various studies and frameworks of reference. Sabater Mateu (2007) compared the competencies proposed by organizations such as ANECA, the Consejo General de Enfermería (CGE)⁸, the Tuning Project, and the Consejo Internacional de Enfermería⁹, identifying similarities and differences among them. While the Tuning Project emphasizes values, leadership, and interpersonal skills, the ICN prioritizes management and the provision of care. In particular, communication competencies show notable variability: the Tuning model assigns them a relevance of 20% within its structure, whereas the ICN model assigns them only 7.14% (Sabater Mateu, 2007).

The establishment of common criteria at the international level faces challenges due to the diversity of healthcare professionals' roles and differences in legislation and health policies. Nevertheless, nursing shares basic functions that make it possible to define a common starting point (Sastre-Fullana et al., 2014). The lack of clear criteria regarding communication competencies has implications for the training and evaluation of professionals, since each institution adopts different approaches, generating inconsistencies in the teaching of these essential skills

The Marco Español de Cualificaciones para la Educación Superior (MECES)¹⁰ (Real Decreto 861/2010, 2010) establishes that nursing students must demonstrate mastery of advanced knowledge, apply this knowledge in professional practice, analyze relevant data for decision-making, communicate effectively, and develop autonomy in their learning. However, the data show that general, specific, and transversal competencies in study programs present considerable heterogeneity.

The analysis of the competencies registered in the RUCT revealed a consensus regarding the five basic competencies imposed by the MECES. However, 1,153 general competencies (446 unique records), 3,137 specific competencies (948 different), and 526 different transversal competencies (269 unique) were recorded across 64 Nursing Degree curricula.

In the specific case of communication-related subjects, 38 subjects from 61 universities were identified. Data were obtained from the subject syllabi available on their websites and compared with the data published in the RUCT. It was found that only 14 institutions contained the same competency records in both sources. The differences in the way universities register their

⁸ General Council of Nursing

⁹ International Council of Nursing

¹⁰ Spanish Qualifications Framework for Higher Education

curricula in the RUCT also highlight the absence of homogeneous criteria for the classification of competencies. Although the data analyzed across various sources follow similar patterns, significant discrepancies exist between the information published on university websites and that registered in the RUCT. This lack of coherence suggests the need to review the role of the RUCT as a reference tool in higher education.

Despite the heterogeneity of the data, certain competencies with greater presence were identified. In particular, the sources of the most frequently cited competencies were Order CIN/2134/2008 and the White Paper on the Nursing Degree (ANECA, 2004). The communication-related subject competencies with the highest number of references were the basic competencies CB2 and CB4, the general competency CG11, the specific competencies CE6, CE8, and CE16, and several transversal competencies (CT1, CT6, CT11, CT15, CT16, CT17, CT18, and CT21) (Appendix 1).

González Luis (2022) had already identified competencies CG11, CE6, CE8, and CE16 as communication-specific competencies, coinciding with the present study. Pérez Martín (2022) identified similar competencies, although the focus of these competencies on the clinical field already indicates the need to address other areas of nursing.

The debate regarding the inclusion and evaluation of communication competencies in nursing programs is extensive. Although many universities include these competencies in their curricula, they are generally addressed transversally and do not occupy a priority position in academic training (Vázquez-Calatayud & González-Luis, 2023). In response to this need, some curricula have begun to assign greater relevance to specific subjects on communication and information technologies, although without following homogeneous criteria in their structuring.

Given that nursing is a discipline in constant evolution, it is essential to adapt training programs to the new demands of the healthcare sector. This includes the integration of advanced communication skills, the use of emerging technologies, and the evaluation of care interventions (Martínez Martín, 2007). Likewise, the consolidation of advanced practice roles in Spain requires a continuous review of nurses' competencies and functions, particularly in areas such as home care and case management (Sastre-Fullana et al., 2014).

Nursing education faces the challenge of establishing unified criteria for the teaching and evaluation of competencies, particularly in the field of communication. Although regulatory frameworks and assessment tools exist, the variability in the implementation of these criteria suggests the need for greater academic and institutional consensus. The future of nursing education will depend on the ability of institutions to balance regulatory requirements with the preparation of highly qualified professionals capable of addressing the challenges of the current healthcare system.

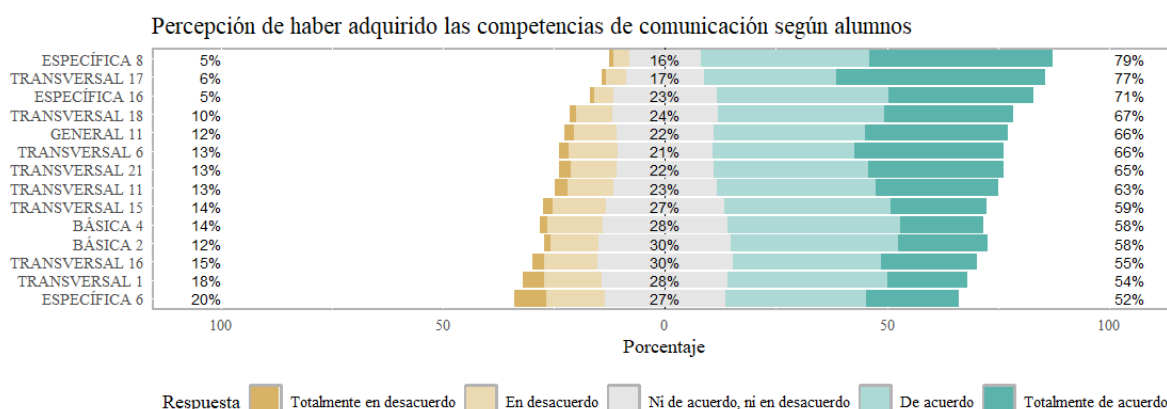
The sample of participants, composed of 282 Nursing students, was representative for the purposes of the study. Eighty-five percent were women, a figure similar to the distribution of Nursing students in Spain (Subdirección General de Actividad Universitaria Investigadora de la Secretaría General de Universidades¹¹, 2023). The median age was 21 years, in line with other studies (Almazor Sirvent et al., 2021; Escribano et al., 2021). However, the majority of participants were from private universities (67%), which does not reflect the national reality,

¹¹ Subdirectorato General for University Research Activity of the General Secretariat for Universities

where public universities predominate (Ministerio de Ciencia Innovación y Universidades¹², 2025b).

Geographically, the participants came from various regions, but the sample did not reflect the distribution of available places in the country in an equitable manner (Ministerio de Ciencia Innovación y Universidades, 2025b). Regarding communication training, 77.6% of the students reported having received specific training in this field. A 5-point Likert scale was used to assess the perception of competency acquisition, showing a positive trend in the responses.

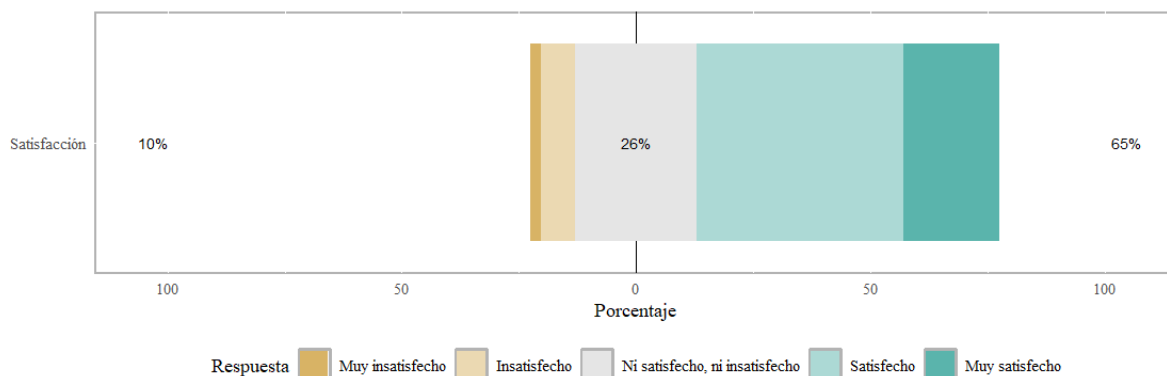
Figure 1. *Students' perception regarding the acquisition of communication competencies.*



Source: Own elaboration.

Competencies CE8, CT17, and CE16 received the highest scores regarding the perception of acquisition, whereas CE6 obtained the lowest score. Sixty-five percent of the students expressed satisfaction with the acquisition of communication competencies. Factors such as specific training and the type of university influenced the perception of acquisition, with higher evaluations among students from private universities and those who had taken communication-related subjects.

Figure 2. *Degree of satisfaction with the acquisition of communication competencies.*



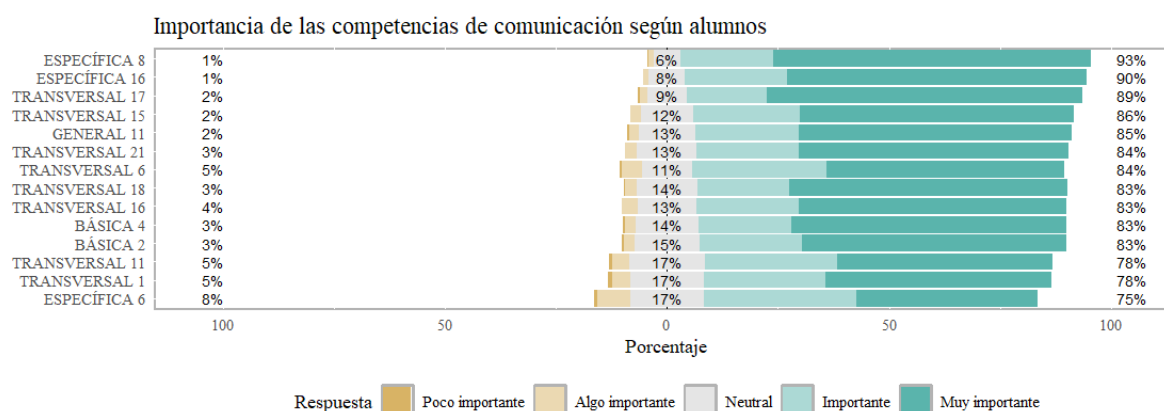
Source: Own elaboration.

¹² Ministry of Science, Innovation and Universities

Significant differences were identified according to age and academic year in key competencies, suggesting that experience and progression throughout the degree program impact the perception of skill acquisition. Variations were also found in the assessment of technological competencies according to the autonomous community and the type of university, possibly due to differences in resources and access to technology.

Overall, the results highlight the importance of communication training in Nursing, as students who received specific instruction showed a more positive perception of their competencies. The teaching of these skills should be strengthened within the curriculum in order to improve the preparation of future healthcare professionals.

Figure 3. *Students' perception regarding the importance of communication competencies*



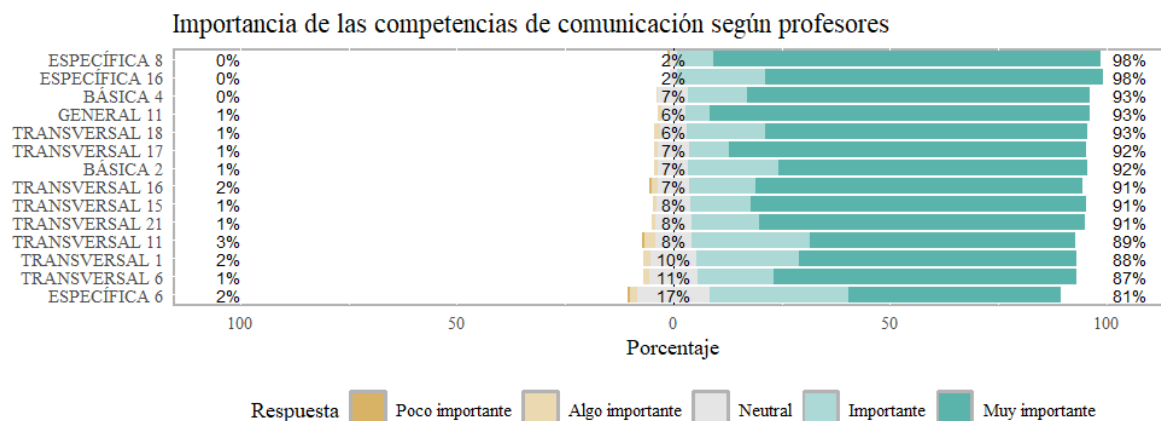
Source: *Own elaboration.*

The profile of the surveyed faculty members ($n = 230$) reflects a median age of 46 years, with a predominance of women (69%), figures consistent with national data on Nursing Teaching and Research Staff (Conferencia Nacional de Decanas y Decanos de Enfermería¹³, 2021). The majority of faculty members belong to public universities (60.4%), with greater representation in regions such as Madrid, Catalonia, Andalusia, and the Valencian Community, in accordance with the national distribution of university faculty. However, 74.3% of the respondents do not teach subjects exclusively dedicated to communication, suggesting that these competencies are generally addressed transversally within the Nursing Degree curriculum. A total of 71.8% of the faculty members have Nursing as their foundational training and 10% Psychology, with the greatest teaching load concentrated in subjects such as Practicum, Clinical Nursing, Community Nursing, and Basic Sciences. Only 3.4% of the surveyed faculty teach specific communication-related subjects, which may have influenced the value assigned to these competencies.

¹³ National Conference of Deans of Nursing

In general terms, communication competencies were highly valued, with CE16 and CE8 standing out with 98% positive responses. However, CE6, related to the application of information and communication technologies and systems, obtained the lowest score in terms of importance.

Figure 4. Faculty members' perception regarding the importance of communication competencies.



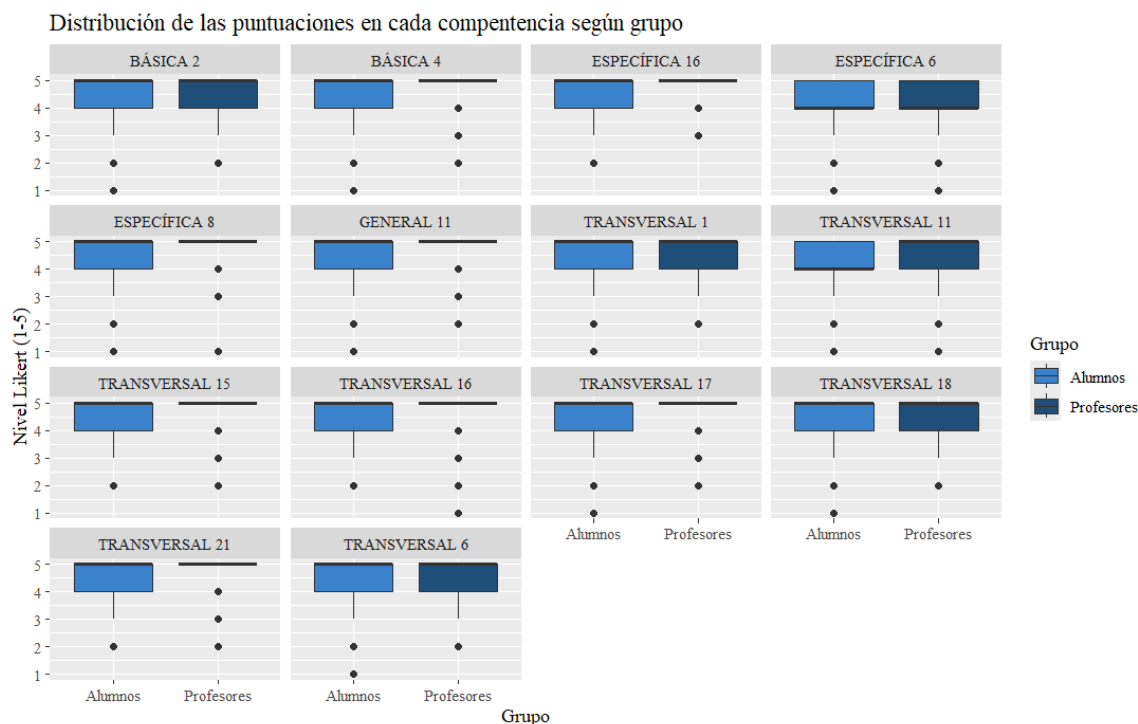
Source: Own elaboration.

No statistically significant differences were identified in the assessment of competencies according to age, sex, or autonomous community. However, a tendency was observed for faculty members who teach communication-related subjects to assign a higher value to CE6. These results reflect the need to continue exploring the integration and teaching of communication competencies in Nursing education, given their impact on the therapeutic relationship with patients and on the professional development of future nurses.

In the comparison of competency assessments between faculty members and students, both groups assigned high scores to all competencies, with no statistically significant differences except for competency CT11 (Information Management). In this case, faculty members assigned a higher score than students, possibly due to the multifaceted nature of their work, which encompasses teaching, research, and academic management, requiring more advanced information management skills.

On the other hand, competency CE6, related to the use of technologies and information systems in healthcare, presented a lower median in both groups (4 on the Likert scale). This finding suggests that, despite its importance, it may be considered an area of lower priority in Nursing education or perceived as a domain presenting greater difficulties in its practical implementation.

Figure 5. *Distribution of scores for each competency according to students and faculty members*



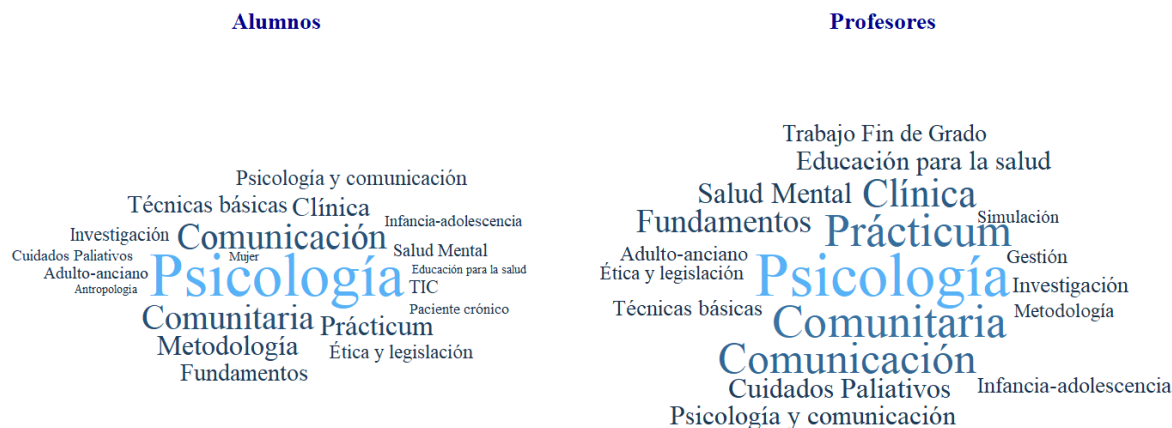
Source: *Own elaboration.*

The analysis of the subjects contributing to the development of communication competencies reveals that both students and faculty members predominantly identify courses such as Psychology, Communication, or Psychology and Communication. However, although these subjects are referenced as compulsory, a significant proportion of respondents perceive them as elective. It is noteworthy that students assign greater importance to Psychology as the main source for the acquisition of communication skills in comparison with faculty members.

Likewise, subjects such as Practicum and Community Nursing are also identified as key in the development of these competencies, possibly influenced by the profile of the participating faculty members, given that a considerable proportion ($n = 40$) teach in the latter area. However, the results suggest a possible lack of compulsory subjects specifically designed to strengthen communication in nursing practice.

Despite recognition of the relevance of communication, the subjects most specialized in this area do not occupy a central position within the compulsory curriculum; rather, their teaching is distributed transversally. The divergence in the perception of the importance of certain subjects between students and faculty members reflects the need for greater alignment in teaching-learning approaches. Furthermore, a difference was identified in the assessment of the Final Degree Project (TFG), mentioned by faculty members but not by students, which may be due to the educational stage of the respondents.

Figure 6. Word cloud according to the compulsory subjects most frequently mentioned in relation to communication competencies (Left: Students. Right: Faculty members).



Source: Own elaboration.

In the field of nursing education, communication is presented as a transversal and essential competency for clinical practice, interprofessional interaction, and patient-centered care. However, various studies have shown that communication skills do not receive systematic development within study programs, generating deficiencies in the training of future professionals (Vázquez-Calatayud & González-Luis, 2023). Effective communication is intrinsically linked to decision-making, problem-solving, and teamwork, which underscores the need for more structured teaching in this area. Despite its importance, training in these competencies is perceived as insufficient, which may compromise the quality of care and increase the incidence of adverse events in healthcare delivery (González Luis, 2022).

Furthermore, the limited integration of technological tools and information systems in nursing education reflects an obstacle in the modernization of healthcare processes. The low assessment of competency CE6, referring to the use of technologies in healthcare, reveals a gap in the digital literacy of students and professionals, which impacts the efficiency of clinical information management and the production of scientific knowledge (Arandojo Morales, 2016). The need to update academic programs is reinforced by the identification of biases in competency-based teaching, where faculty members themselves define the content and evaluation criteria, which may generate fragmented approaches that are misaligned with the real demands of the healthcare environment (Climent Bonilla, 2010).

In this context, a curricular reform that equitably integrates communicative, digital, and research competencies becomes essential, promoting continuous learning that prepares nurses to face the current and future challenges of the profession (Tizón Bouza, 2021). The findings of the present study reinforce the need for a more structured approach to the teaching of communication competencies in nursing. Designing programs that integrate the perspectives of both faculty members and students would make it possible to optimize the balance between personal development and the acquisition of professional skills, ensuring more effective training aligned with the demands of professional practice.

5. CONCLUSIONS

Regulatory bodies have worked on the definition of competencies within the Nursing Degree; however, a notable heterogeneity persists in the inclusion and development of communication competencies in the curricula of Spanish universities. Despite efforts to adapt training to regulatory and social demands, the absence of homogeneous criteria hinders the standardization of these competencies.

The analyzed data reflect a tendency to include compulsory specific communication-related subjects (34 out of 61 universities), mostly in the first academic year and with 6 ECTS credits, although with variations in their content and approach. The most commonly used competencies derive from Order CIN/2134/2008 (CB2, CB4, CG11, CE6, CE8, CE16) and from ANECA (CT1, CT6, CT11, CT15, CT16, CT17, CT18, CT21). All received high ratings regarding their importance, with CE8 and CE16 standing out as the most highly valued by both students and faculty members. However, competency CE6, related to the use of technologies and information and communication systems, obtained the lowest evaluation (although still positive). The perception of competency acquisition is greater among those students who have received specific communication training. Given the importance of these skills in professional practice, greater harmonization in their teaching is required, ensuring comprehensive training that strengthens both healthcare performance and the new emerging roles in nursing.

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Appendix 1.

Table 1. *Description of the competencies analyzed.*

N.º	Competencia	Descripción
1	Básic 2 (CB2)	That students know how to apply their knowledge to their work or vocation in a professional manner and possess the competencies usually demonstrated through the development and defense of arguments and the resolution of problems within their field of study.
2	Básic 4 (CB4)	That students are able to communicate information, ideas, problems, and solutions to both specialized and non-specialized audiences.
3	General 11 (CG11)	To establish effective communication with patients, families, social groups, and colleagues, and to promote health education.
4	Específic 6 (CE6)	To apply information and communication technologies and systems in healthcare.
5	Específic 8 (CE8)	To identify the psychosocial responses of individuals to different health situations (particularly illness and suffering), selecting the appropriate actions to provide assistance in such situations. To establish an empathetic and respectful relationship with the patient and family, according to the individual's situation, health problem, and stage of development. To use strategies and skills that enable effective communication with patients, families, and social groups, as well as the expression of their concerns and interests.
6	Específic 16 (CE16)	Ability to describe the foundations of primary healthcare and the activities to be carried out in order to provide comprehensive nursing care to individuals, families, and the community. To understand the role, activities, and cooperative attitude that professionals must develop within a Primary Healthcare team. To promote the participation of individuals, families, and groups in their health-disease process. To identify health-related factors and environmental problems in order to care for individuals in situations of health and illness as members of a community. To identify and analyze the influence of internal and external factors on the health status of individuals and groups. To apply the methods and procedures necessary in their field to identify the most relevant health problems within a community. To analyze statistical data from population studies, identifying possible causes of health problems. To educate, facilitate, and support the health and well-being of community members whose lives are affected by health problems, risk, suffering, illness, disability, or death.
7	Transversal 1 (CT1)	Capacity for analysis and synthesis.
8	Transversal 6 (CT6)	Oral and written communication in the native language.
9	Transversal 11 (CT11)	Information management skills (ability to search for and analyze information from various sources).
10	Transversal 15 (CT15)	Problem-solving.
11	Transversal 16 (CT16)	Decision-making.
12	Transversal 17 (CT17)	Teamwork
13	Transversal 18 (CT18)	Interpersonal skills.
14	Transversal 21 (CT21)	Ability to communicate with non-experts in the field.

Source: *Own elaboration based on information from ANECA (2004), Order CIN/2134/2008 (2008), and Real Decreto 861/2010 (2010).*

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