

# Soft Skills: an answer to improve the care of health professionals

## Habilidades Blandas: una respuesta para la mejora de la atención de profesionales de la salud

Rafael Vargas, Marisa Zaldivar\*

Faculty of Education, Autonomous University of Yucatán, Mexico; [a19213846@alumnos.uady.mx](mailto:a19213846@alumnos.uady.mx), <https://orcid.org/0009-0000-8409-6967>; [marisa.zaldivar@correo.uady.mx](mailto:marisa.zaldivar@correo.uady.mx), <http://orcid.org/0000-0001-8936-0587>.

\* Correspondence: [marisa.zaldivar@correo.uady.mx](mailto:marisa.zaldivar@correo.uady.mx)

Received: 7/5/23; Accepted: 8/31/23; Posted: 9/11/23

**Summary:** The prevalence of chronic non-communicable diseases such as diabetes and obesity is increasing in Yucatán, Mexico. One of the main factors is the low rate of adherence to treatment, which requires health professionals to be highly trained to face this challenge. Among the demands in the training of health personnel, the main characteristic is the development of soft skills, which are not estimated in the formal teaching process, but are given through experience. Soft skills are teachable and allow professionals to offer a comprehensive service that is focused on patient care and their context. Soft skills such as empathy, effective communication and collaborative work will make it possible for the health professional to detect areas of opportunity where intervention can be made to improve adherence to treatment and for this to translate into improvement in the patient's health. .

**Keywords:** higher education, health professional, soft skills, therapeutic adherence.

**Resumen:** La prevalencia de enfermedades crónicas no transmisibles como la diabetes y la obesidad está en aumento en Yucatán, México. Uno de los principales factores es el bajo índice de adherencia al tratamiento, el cual exige que los profesionales de la salud estén altamente capacitados para hacer frente a este reto. Entre las exigencias en la formación del personal sanitario se encuentra como principal característica el desarrollo de habilidades blandas o soft skills, las cuales no son estimadas en el proceso de enseñanza formal, sino que se dan a través de la experiencia. Las soft skills son educables y permiten que los profesionales ofrezcan un servicio integral que sea centrado en la atención del paciente y su contexto. Las soft skills como la empatía, la comunicación efectiva y el trabajo colaborativo harán posible que el profesional de salud detecte las áreas de oportunidad en donde se puede intervenir para mejorar la adherencia al tratamiento y que ésta se traduzca en la mejora de la salud del paciente.

**Palabras clave:** educación superior, profesional de la salud, soft skills, adherencia terapéutica.

---

### 1. Introduction

According to the World Health Organization (WHO) (1), the prevalence of mortality related to chronic noncommunicable diseases has increased, mainly in low- and middle-income countries. These diseases represent a significant burden on public health in Latin American countries. Faced with this situation, 193 Heads of State and Government met at the United Nations General Assembly where the Agenda for Sustainable Development was approved, in which 17 objectives and 169 goals of universal application were established for global achievement in the 2030. The third sustainable objective was called Health and Well-being, which seeks to guarantee a healthy life and promote the well-being of all throughout life. Therefore, the care of non-communicable chronic diseases from their prevention, are part of this work agenda. These intentions of the WHO

have been discussed for more than a decade, proposing various strategies to reduce the prevalence of this type of disease, although it has been seen that there are multiple factors that prevent the achievement of the proposed objectives, one of these is the lack of adherence to treatment, a global impact problem (2).

Among the factors that influence a patient with a chronic non-communicable disease to abandon their treatment, life habits, self-care and family support can be mentioned; therefore, recent studies show that the responsibility always falls on the patient. In this sense, programs with a focus on Primary Health Care have been proposed to work on self-care and treatment follow-up with the patient and their families (3). In the case of adherence to the treatment of these chronic diseases, methodologies are proposed in which emphasis is placed on the desirable soft skills in the facilitator to direct it (4), so the perspective for adherence to the treatment of chronic diseases non-communicable changes, paying attention to the training of health personnel.

Historically, in the field of health, the importance of technical and cognitive skills has been recognized, however, currently soft skills, also known as socio-emotional skills or soft skills, are addressed from the curriculum during the training of health professionals. These skills play a crucial role in the comprehensive development of new health professionals, since they contribute to achieving the goals of patients and their families in improving their well-being. Skills such as empathy, effective communication, and teamwork allow establishing a closer and more trusting relationship with patients, which in turn favors quality care and greater satisfaction in the healthcare experience (5). The integration of the Agenda for Sustainable Development with the focus on soft skills in the field of health offers an opportunity to address the challenges of chronic non-communicable diseases and promote the well-being of people in Latin America (1). By strengthening the socio-emotional skills of health professionals, their ability to provide more humane and patient-centered care can be enhanced.

Taking into account the above, the purpose of this essay is to create a space for reflection to analyze the importance of soft skills in health professionals to adequately respond to the treatment needs of their patients and families in the face of the challenges of the century. XXI. In the same way, with this reflection, it is intended to offer a proposal of this type of skills necessary for the practice of the professional in health care. For this reason, a literary review was made that supports this theme and supports the analysis of this problem.

## 2. Soft skills

Soft skills are characteristics that determine how an individual interacts with their context. Unlike hard or cognitive skills, these are developed through interaction with other people. Soft skills are part of behavior and personality acquired in various contexts. Other definitions refer to soft skills as attitudes and practices that affect a person's behavior towards learning and how they interact with the world around them. Therefore, it can be said that soft skills are personal and social characteristics that allow individuals to adapt and effectively solve the problems that arise (6).

Buxarrais (7) classifies skills into hard and soft. Hard skills are obtained through education and the formal environment and are related to content. Soft skills go beyond the professional direction, they allow the values for the development of the individual to be put into practice in different areas. In such a way that the conjunction and integration of the two types of skills will allow health professionals to offer patient-centered care according to their context, which will be evidenced in the improvement of patient treatment. For his part, Urbina (8) refers to the importance of soft skills in the professional performance of any individual. Currently, with the support of technology, there is a tendency for professionals to distance themselves from the interpersonal relationships they can create with their peers, patients and family. In that sense, work is being done from the higher education curriculum so that future health professionals upon graduating have already developed the soft skills necessary for humanitarian service. An example is practice in hospitals and offices,

each student is entrusted with treating the patient gently, being honest with the information and trying to reach consensual agreements with their colleagues for the best treatment. These actions are supervised and evaluated with instruments validated by the teachers in charge of the student's performance in the work context.

### 3. Soft skills for health care

Given the previously stated, Pades (9) mentions that soft skills are used to complement cognitive skills, therefore, this type of skills complete the identity or role as a professional. Soft skills, in health professionals, will allow their development both on a personal level and in professional practice. In this way, Urbina (8) recommends that the health professional must be conceived as an integral being with many more responsibilities than those granted to him from a technical paradigm, so he must not only fulfill diagnostic tasks, research, , communication, analysis, treatment and resolution. Therefore, the professional must fulfill the role of accompanying his patient and their families throughout the entire care process in order to improve adherence to treatment. In this regard, the authors of this essay have paid special attention to self-assessment in the work context every day to detect the soft skills that they have not developed and that influence the treatment of the patients in their care, since during their professional training they do not There was awareness of the development of these skills, both at a curricular and personal level.

According to the WHO (10), low rates of adherence to treatment generate the incidence and prevalence of many chronic degenerative diseases even with the advancement of medicine. In this sense, the WHO defines treatment adherence as the degree to which the patient's behavior corresponds to the instructions given by a health professional. Likewise, it mentions that among the factors that influence non-adherence to treatment, one of the main ones is those related to the healthcare team. Therefore, health personnel who do not develop soft skills will not be able to meet the needs of their patients. Adherence to treatment serves as an instrument to measure the extent to which the patient follows health instructions (11). Consequently, poor adherence to treatment translates into lack of acceptance of a diagnosis that will most likely affect the prognosis of the disease. In response to this challenge, the Food and Drug Administration (FDA) of the United States proposes that the health education that the health professional issues in the patient care process should do so using soft skills such as empathy and effective communication. However, it is important to add collaborative work between health professionals in charge of patients with these characteristics, it may be a multidisciplinary team or not, the point is that respect, ethics, honesty and availability to service are also soft skills necessary for the success of the treatment, as mentioned by Dr. Julien Picard <sup>1</sup>, professor of anesthesiology and resuscitation at the Grenoble University Hospital, who adds that soft skills can intervene in two areas: the internal one, which occurs in the organization of the health personnel themselves in the application of their own cognitive skills, that is, in collaborative work. And the external sphere, which is carried out in the direct care of patients. In this way, it is recognized that soft skills in the external field such as leadership and collaborative work, in tune with internal skills such as empathy and effective communication, contribute elements together for the benefit of the patient.

With the aim of generating in patients and their families optimal interactions for professional practice in an appropriate climate, Tipismana (12) proposes the following actions: make critical reflections on the goals and objectives in the treatment of patients, analyze and evaluate trends in the world regarding their personal health competencies, provide new ways of carrying out patient treatment, and finally, build and provide a new paradigm of patient-centered care. The work of health professionals is in a scenario immersed in the exercise of constant negotiation, which requires making decisions in synergy with the patient and their work team or collaborators, therefore, a pleasant organizational climate is a strategy for development of soft skills. The above is understood as the professional aligned with his work team developing the ability to empower the patient so that he offers information about what he knows about his illness and the treatment. The

---

<sup>1</sup> <https://www.rfi.fr/en/programs/science-world/20220603-the-importance-of-soft-skills-or-soft-skills-in-the-world-m%C3%A9dico>

authors of this essay, during their work in the educational and health context, reflected on raising awareness of the importance of the development of their soft skills during comprehensive care, which is why over the last five years they have promoted in this way adherence to treatment of patients with chronic non-communicable diseases through self-assessment and self-criticism of their work.

#### 4. Soft skills for health professionals

Health personnel face interpersonal situations every day that have nothing to do with their technical and cognitive skills, but rather with their soft skills. According to Ducci (13), integrating soft skills into a health system is not an easy task. The demands of a quality service in the health sector not only demand cutting-edge technology, timely diagnosis and correct treatment (8), but also require the development of skills that allow these elements to be applied in a timely and effective manner, especially humanizing them. his work. Cognitive competencies through knowledge, experience and good management of soft skills guarantee an optimal relationship between the patient and health personnel. In this way and through the literature review, the following soft skills are proposed as essential in the treatment of patients with chronic non-communicable diseases with the aim of improving adherence to treatment and thus their quality of life:

##### 4.1 Empathy.

Worldwide, one of the most important axes is humanized care, therefore, it is vitally important that health professionals clearly understand the needs and emotions of patients. In that sense, empathy is the psychological act of putting oneself in the patient's shoes (2). Empathy is made up of 3 dimensions: cognitive, which refers to the ability to understand the experience and emotions of others and have the ability to understand the world from their perspective. The emotional dimension involves paying special attention to the experiences of others and the motivational dimension is understood as the feeling of caring for others in society (14). In Mexico, Primary Health Care is a priority for health authorities; however, in the public sector the number of beneficiaries of health institutions exceeds the number of health personnel, which makes the development of this soft skill difficult. In this sense, it is important to pay attention to the needs of health personnel who work in these institutions, since their professional development can be diminished by fatigue when caring for a high number of patients per day.

Empathy is necessary to effectively establish the relationship between the health professional, their collaborators, patients and their families. This process occurs through the professional's understanding of the needs of the people around him. In this way, healthcare personnel are required to respond sensitively to the patient's call (15). Therefore, one of the ways for a health professional to develop empathy with patients and their families is through reflective criticism from their peers, which will allow them to have an objective point of view of their daily work, as well as Likewise, the reflective journal is a tool that the authors of this essay put into practice to raise awareness of their actions and thus develop empathy.

##### 4.2 Effective communication.

Although it is expected that the patient has good adherence to the treatment, that the family is satisfied with the care of their relative and that the health professional's collaborators are optimally integrated for the benefit of the patient's treatment, it is necessary that there be effective communication between them and of them with the patient and their families. On many occasions, the health professional is responsible for communicating sensitive information either to the patient or their family members, which is why they must be able to develop and apply strategies and tools that allow them to do so effectively. These tools are: the correct use of language, critical thinking, a comprehensive skill of respect, a sense of tolerance and an adequate use of non-verbal language (12).

Making use of good effective communication can be the big difference between success or failure in the treatment of a patient. For communication to be effective, healthcare personnel must focus on the use of the previously described tools. In short, communicating at a level of professional competence demands the use of complex interrelated competences and learning, maintaining and improving them is a periodic requirement. For example, in the field of nutrition for patients with obesity, communication skills serve as the basis for a correct interview and reaching a pertinent, adequate diagnosis, as well as nutritional interventions that improve the patient's eating and health behaviors (16). This practice is also done in the work context of the authors of this essay, which has allowed them to improve their verbal and non-verbal communication, as well as in the development of the soft skill of effective communication.

#### *4.3 Collaborative work.*

It is not only enough to have good effective communication between health professionals and patients with chronic non-communicable diseases, but it is necessary that everything that is communicated is based on the justification of previous collaborative work carried out between the professional and his or her team. job. According to the WHO (17), collaborative work or practice is the process in which individuals belonging to the same or different professional disciplines interact with the purpose of solving challenges and participating in decision making, recognizing the shared responsibility of the results, to establish a treatment focused on the comprehensive care of the patient and their family with a humanized approach.

The humanization of health services is increasingly necessary and evident. In this way, collaborative work implies that a health professional cannot work in isolation if it is recognized that comprehensive patient care is structured by several components other than the physical, such as social and emotional (18). The above is supported by The National Health Service Management Executive of the United Kingdom, which maintains that the best results for patients are obtained when they are operated on by a team of professionals who work and learn in a joint and coordinated manner.

This is why, when a team of health professionals works collaboratively, the following elements occur, according to Miró (19): clear goals are established for the comprehensive care of the patient and their family, they are made clear and by consensus the roles and responsibilities of each member of the work team, a group identity is created that generates empowerment and mutual respect within the group, interdependence and integration is achieved between members and their professional practices, efforts are joined to make face challenges and there is open and fluid communication in all directions, so different points of view are respected. This is a difficult strategy, but necessary and is complemented by skills such as tolerance, respect and ethics, as well as the humility to recognize mistakes and always be willing to serve despite fatigue. This has been achieved through constant communication between the members of the work team of the authors of this essay, efforts have been made to address their needs and take care not to saturate them with work activities, always trying to be equitable, even so, it is recognized that each individual He has a personality that characterizes him and distinguishes him from others, which is also respected to maintain cordiality and a good work environment.

## **5. Conclusions**

- Soft skills, soft skills or socio-emotional skills are the key to developing a person's full potential; they are the characteristics that will give meaning to the knowledge of professionals who face the challenges of the workplace at the time of graduation from their studies. university students
- The development of soft skills must be promoted in higher education institutions in order to provide highly trained personnel to face the challenges of the 21st century. This recommendation is made in response to the increase in chronic non-communicable diseases in

Mexico, such as diabetes and obesity. Therefore, offering comprehensive, quality healthcare is possible with the support of soft skills.

- It is necessary that the development of soft skills begin to work from basic training, through a curriculum where the development of socio-emotional skills is sought, evaluating the process of each strategy and using the most appropriate methodologies for the context. This will allow the student self-confidence and leadership in decision-making, as well as conflict resolution, skills that are also considered soft and that through self-evaluation and self-criticism with the help of their teachers, each student will be able to improve them.
- The contribution of a curriculum that incorporates the development of soft skills will contribute to improving the skills of future professionals and prepare them for a changing, competitive and dynamic world in which ethics, teamwork, leadership and collaboration prevail. effective communication, as main skills in the selection and employability processes (20).
- As a last point, it is proposed for future work regarding this topic to carry out a constant and strategically planned evaluation, using data collection instruments, as well as through daily reflection and feedback on one's own practice, this will allow the professional to of health, including the authors of this essay, detect the strengths and above all the areas of opportunity, in order to work on them for the benefits of their patients and society.

**Financing:** There has been no financing

**Declaration of conflict of interest:** The authors declare that they have no conflict of interest.

**Author contributions :** Please indicate here the contributions to the article by each of the authors.

## References

1. World Health Organization. *Report on the global situation of non-communicable diseases* . Geneva: WHO 2022. <http://www.who.int/nmh/publications/ncd-status-report-2014/es/>
2. Dilla, T., Valladarea, A., Lizán, L. and Sacristán, J. Adherence and therapeutic persistence: causes, consequences and improvement strategies. *Elsevier* , 2009, 41(6): 342-348. <https://doi.org/10.1016/j.aprin.2008.09.031>
3. Domínguez, A., Oudhof van Barneveld, J., González-Arratia, N. and Flores, M. Effect of a primary health care program on Mexican patients with chronic non-communicable diseases. *Journal of Psychology* , 2020, 38 (2): 529-552. <http://dx.doi.org/10.18800/psico.202002.007>
4. Molina, N., Ureña, I. and deBeausset, I. Methodology of linked group nutritional consultation. *Population and Health in Mesoamerica*, 2023, 20 (2). <https://doi.org/10.15517/psm.v20i2.48477>
5. World Health Organization. 2016 in review: WHO global health in review. <https://www.who.int/es/news-room/feature-stories/detail/2016-year-in-review-key-health-issues>
6. Molinari, LR *Socio-emotional skills in teachers in a private school in the city of Quito*. Thesis, 2017. Quito: University of the Americas. <http://dspace.udla.edu.ec/handle/33000/8154>
7. Buxarraís, M. New values for a new society. *Edetania: studies and socio-educational proposals*. 2013, 43. 53-65. <https://dialnet.unirioja.es/ejemplar/342477>
8. Urbina, M. Soft skills in health sciences. *Hispano-American Journal of Health Sciences* . 2019, 5 (4):125–126. <https://uhsalud.com/index.php/revhispano/article/view/408>
9. Pades, A. Soft skills in health professionals. *ROL Nursing Magazine* , 2021, 44 (5): 386-388. <https://medes.com/publication/162036>
10. World Health Organization. *Adherence to long term therapies: evidence for action* . Geneva, 2003.
11. Ortega, J., Sánchez, D., Rodríguez, O., and Ortega Legaspi, J. Therapeutic adherence: a health care problem. *Grupo Angeles medical record* . 2018, 16(3): 226-232. [https://www.scielo.org.mx/scielo.php?script=sci\\_arttext&pid=S1870-72032018000300226](https://www.scielo.org.mx/scielo.php?script=sci_arttext&pid=S1870-72032018000300226)
12. Tipismana, O. Development of personal skills for learning knowledge in primary health care. *Electronic Journal of Humanities, Education and Social Communication* . 2011. 10(6). <https://dialnet.unirioja.es/servlet/articulo?codigo=3675562>
13. Ducci, M. *The Labor Competence Approach in the International Perspective in: Labor Competence-Based Training* . 1997. Uruguay. Cinterfor/ILO.

14. Cordero da Sailva, J., Pereira, C., Azevedo, D., Ferrerira, D., Lima de Carvalho, M., and Morais, R. Teaching empathy in health: an integrative review. *Bioethics Magazine* , 2022, 30 (4): 715-724. <http://dx.doi.org/10.1590/1983-80422022304563ES>
15. Triana, M. Empathy in the nurse-patient relationship. *Advances in Nursing* , 2017, 35 (2): 121-122. <https://doi.org/10.15446/av.enferm.v35n2.66941>
16. Camacho, S. Ethical communication in nutrition. *REDCieN* , 2020, 3 (3): 7. <http://redcien.com/index.php/redcien/article/view/42>
17. World Health Organization. *Framework for action on Interprofessional education and collaborative practice* . Geneva, 2010. Department of Human Resources for Health.
18. Lafaurie, M., Perdomo A., Tocora, J. et al. Humanization in health: reflections of teachers, students and administrative staff of a dental school. *Forest Health Magazine* , 2018, 8 (2): 97-105. <https://doi.org/10.18270/rsb.v8i1.2498>
19. Miró Bonet, M. Interprofessional collaborative practice in health: key concepts, factors and perceptions of professionals. *Educ. Med* . 2016, 17(1):21-24. <https://www.elsevier.es/en-revista-educacion-medica-71-resumen-practica-colaborativa-interprofesional-salud-conceptos-X1575181316539806>
20. Fuentes, G., Moreno-Murcia, L., Rincón-Tellez, D. and Silva-García, M. Assessment of soft skills in higher education. *University Training*, 2021, 14 (4): 49-60. <http://dx.doi.org/10.4067/S0718-50062021000400049>



© 2023 University of Murcia. Submitted for open access publication under the terms and conditions of the Creative Commons Attribution-NonCommercial-No Derivatives 4.0 Spain (CC BY-NC-ND) license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).