

Competency profile of university professors and their impact on future healthcare professionals

Perfil de competencias del docente universitario y su repercusión en el futuro profesional de las áreas de la salud

Doménica D. Villacís^{1*}  , Nahin I. Defas² , Henry A. Farfán³ 

Jessica E. Silva⁴ , Kelly L. Rosado⁵ 

¹*Carrera de Medicina, Universidad San Gregorio de Portoviejo, Manabí, Manabí, Ecuador.*

²*Hospital General IEES Quevedo, Los Ríos, Ecuador.*

³*Centro Médico H-Med, Guayaquil, Guayas, Ecuador.*

⁴*Centro Médico de Especialidades Dra. Jessica Silva, La Libertad, Guayas, Ecuador.*

⁵*Clínica Viteri, Bahía de Caráquez, Sucre, Manabí, Ecuador.*

*Corresponding author

Recepción: 02-03-2025

Aceptación: 09-06-2025

Publicación: 31-07-2025

ABSTRACT

The expectations of a student entering health-related careers are high; the quality of these future professionals depends on the teacher, who is more than an instructor — they are a mentor and guide. A qualitative and descriptive literature review was conducted on the main competencies of faculty in the Health Sciences. Key phrases were used in academic search engines, and 50 articles published between 2000 and 2025 were selected. The fundamental competencies included disciplinary knowledge, pedagogical skills, communication, cultural and sociological understanding, empathy, ethics, adaptability, digital literacy, and language proficiency. The specific competencies encompassed technology integration, research and development, clinical mentoring, clinical simulation, assessment and feedback, continuous growth, and curriculum internationalization. Faculty preparation in the Health Sciences must adapt to a changing academic and professional environment, emphasizing research, collaborative, and ethical competencies in line with the needs of the society in which the future professional will be integrated.

Keywords: teaching competencies, health sciences, medical education, professional training, clinical mentoring.

RESUMEN

Las expectativas de un estudiante que ingresa a las carreras de la salud son altas, sobre el docente recae la calidad de estos futuros profesionales, siendo más allá de un maestro, su mentor y guía. Se realizó una revisión bibliográfica cualitativa y descriptiva de las principales competencias del docente en Ciencias de la Salud. Se utilizaron frases clave en buscadores académicos y se seleccionaron 50 artículos publicados entre 2000 y 2025. Las competencias básicas incluyeron conocimiento disciplinario, habilidades pedagógicas, comunicación, comprensión cultural y sociológica, empatía, ética, adaptabilidad, competencia digital e idiomas. Las específicas abarcaron la integración de tecnologías, investigación y desarrollo, mentoría clínica, simulación clínica, evaluación y retroalimentación, desarrollo continuo e internacionalización del currículo. La preparación del docente en Ciencias de la Salud debe adaptarse a un entorno académico y profesional cambiante, enfatizando competencias investigativas, colaborativas y éticas, siguiendo las necesidades de la sociedad donde se insertará ese futuro profesional.

Palabras clave: competencias docentes, ciencias de la salud, educación médica, formación profesional, mentoría clínica.

Cite as: Villacís, D. D., Defas, N. I., Farfán, H. A., Silva, J. E., & Rosado, K. L. (2025). Competency profile of university professors and their impact on future healthcare professionals. *Revista Gregoriana de Ciencias de la Salud*, 2(2), 176-193. <https://doi.org/10.36097/rgcs.v2i2.3175>

© Author(s) 2025

INTRODUCTION

A student's expectations when entering university are high; they hope to have made the right decision regarding the career they believe they have a calling for. They are convinced that they are embarking on a path that will enable them to become professionals, acquiring the necessary knowledge to dedicate themselves to an area that will allow them to earn an honest living and achieve all the goals they have set for themselves in life. This is a person in late adolescence, at the beginning of youth, with many expectations about their future. In the case of students of health careers, such as medicine, nursing, psychology, dentistry, health technologies, nutrition, among others, it corresponds to a truly transformative journey, where the vocation of service and the desire to contribute to the health of society prevail, being willing to make efforts and sacrifices that the achievement of their dreams will reward. Therefore, their expectations are much higher than in other professions; they expect their self-denial to be rewarded with an excellent education (Karnieli-Miller et al., 2010). This is why the academic environment in which this student will develop will be decisive for the type of professional he or she will become, since it directly influences the professional skills he or she will acquire and the quality of care he or she will provide to his or her patients in the future (Bárcena & Prado, 2017).

A “good teacher” must be able to inspire and motivate their students, encourage critical thinking and research, and provide a learning environment that is inclusive, respectful, builds trust, and allows for open debate. They must be a model of professionalism and empathy, essential qualities in healthcare careers (Bętkowska-Korpała et al., 2022). According to a guide produced by the Center for Medical Education at the University of Dundee in the United Kingdom (Crosby, 2000), healthcare teachers are described as not being “class lecturers”. They recommend being providers of accurate and up-to-date information, role models, facilitators who guide and orient students in the learning process, and mentors and tutors. They must also be planners and evaluators of the curriculum for the subjects and courses they teach, as well as developers of resources, including educational guides and materials. Furthermore, it is essential to incorporate evidence-based medicine into their expertise (Albarqouni et al., 2018).

Likewise, part of the education that healthcare students need must include coping with failure, considering that young professionals graduate from their faculty after receiving a first-class education, with empathetic and organized teachers and the best academic results. They then

face the reality of a healthcare system that cannot always respond to the population's needs, or poorly organized hospitals, where the best results are not always achieved. Sheperd et al. (2020) believe that there should be greater openness in teaching failure in medical education, emphasizing that sharing experiences of vulnerability can be a powerful tool for fostering resilience and learning in medical students; as well as the importance of creating a learning environment that not only prepares students for success but also teaches them how to handle failure constructively.

On the other hand, there are "bad teachers" who behave oppressively and/or are poorly prepared to teach, which can have a significant negative impact on students' learning. A hostile and unsupportive academic environment can erode the confidence and motivation of future healthcare professionals, potentially leading to subpar clinical practice and a lack of empathy toward their patients in the future. Developing empathy and ethical standards is critical for preparing future professionals to deliver comprehensive care to vulnerable populations such as the elderly. Angulo et al. (2024) emphasize the significance of psychosocial factors in enhancing the quality of life for this group.

Gottlieb et al. (2021) refer to epistemic trust, which should be regulated by epistemic humility, defined as a moderating virtue that recognizes the limits of knowledge and wisdom. Although epistemic trust should reflect verifiable certainty and reliability, if trust exceeds verifiability, it can lead to arrogance and reckless behavior. On the other hand, trust can fall short of verifiable certainty and lead to timidity or insecurity, which can trigger erroneous or unsafe decisions. Proper calibration of confidence and its support in real-world competencies is crucial for both teachers and students in health sciences education, as it directly impacts the quality of training and the safety of future clinical practice.

Therefore, the quality of education received directly influences the quality of care that these professionals will provide; therefore, it is essential to ensure that teachers in health careers are adequately prepared and committed to their training role (Albarra et al., 2022). According to a study conducted by a medical school in the United States (Roberts et al., 2014), where they interviewed their graduates from the last 5 years, they referred to as bad teachers those who had deficits in the teaching of their subjects and above all they emphasized those who had a terrible interaction style, indicating as frequently encountered problems the lack of respect towards students and residents, as well as denigration of their colleagues, being rude in their treatment,

arrogance and condescension with which they responded to students, insensitive jokes or derogatory comments about patients and family members, mainly in hospital environments, specifically in surgical specialties. The authors conclude that it is important that the training of health professionals, substantially those dedicated to teaching, include programs that seek the development of human competencies, which allow improvement in interaction styles with students, colleagues, patients and family members, the creation of a culture of professionalism and comprehensive training; In addition, they recommend feedback mechanisms and awareness of these problems in teachers and students (Spooner et al., 2023), so that they can be equipped with the tools to navigate and respond effectively to such behaviors, thus promoting a healthier learning environment.

Consequently, not only the profile of the university professor, but also the profile of the health sciences school itself, will influence the student's future, considering that the teaching model it follows will be decisive in defining the type of professionals it trains (Zabalza, 2005). An example of the influence of the type of university on the student corresponds to a study carried out in Angolan medical schools (Fronteira et al., 2021), where they divided them into four main groups: the oldest and most traditional schools in the country, private schools, schools sponsored by Cuban teachers, and military schools. They found that professionals trained in military and private schools tended to choose hospital and private work environments more frequently. In contrast, graduates from Cuban schools had a profile focused on Primary Health Care and dedicated themselves to work in the public and community sectors. This shows that medical education cannot be separated from medical workforce planning; important professional decisions, such as choosing rural over urban practice, have a profound influence on the labor market for medical professionals.

Therefore, considering that the relationship between the profiles of teachers and their schools and the future of healthcare professionals is well established, the question arises: What is the optimal competency profile for health science teachers?

UNESCO defines professional competencies as the acquired knowledge, skills, and values that enable an individual to perform effectively, autonomously, and flexibly in specific work and social contexts.

A study by the Enrique Cabrera School of Medicine (Oramas et al., 2013) concludes that the development of professional competencies in medical sciences employs a human-centered approach. This method contrasts with structuralist or instrumentalist approaches, facilitating student development and aligning the microcurriculum with the program's macrocurriculum.

In this context, it is established that these competencies must include knowledge (knowledge), skills (know-how), and values (being), which will be fundamental for the training of professionals with a high scientific and human level. The objective of this literature review was to characterize the profile of competencies, both basic and specific, that university professors in Health Sciences should possess, considering their importance as mentors for future professionals.

METHODOLOGY

A qualitative and descriptive literature review was conducted to identify the core competencies of health science teachers. This enabled us to create an optimal profile for university professors, considering their role as mentors for future healthcare professionals.

Key phrases were used such as: Medical Education, Competency Profile in Health Sciences, Competency-based Education, Teaching in Health Sciences, Medical Education, Role of the teacher, Health Education, Teaching Competencies in Health Education; in search engines such as Google Scholar and on the Web of Science, taking into account keyword matching, as well as the relevance of the authors and the number of citations to the selected articles, is a reliable indicator of the article's impact on the study of this topic. Among the authors, 50 articles that met these criteria were selected, published between 2000 and 2025; 30 were written in Spanish and 20 in English.

Based on the information collected, the authors conducted an analysis, enabling them to characterize a proposed competency profile for a health sciences teacher, taking into consideration their importance as mentors for future professionals.

RESULTS AND DISCUSSION

According to the analysis conducted in this bibliographic review, the basic and specific competencies that a health science teacher should possess are described. Core competencies refer to the fundamental skills and knowledge that all university professors, including those in Health

Sciences programs, must possess to perform their duties effectively (González & González, 2008); they include theoretical and practical mastery of the discipline, pedagogical skills, communication skills, empathy, ethics, and adaptability, and are necessary to ensure that students receive an adequate education and develop both academically and professionally (Galdeano & Valiente, 2010; Ibarra et al., 2024).

Specific competencies encompass specialized skills and knowledge that enable health sciences teachers to perform advanced and specialized functions in their field. These competencies include technology integration (Sánchez & Rodríguez, 2021), research and development, and clinical mentoring. These competencies are essential for teachers to guide students in applying their theoretical knowledge in practical, real-life contexts, thus enriching their educational experience (Baños & Pérez, 2005).

The comprehensive training of university teachers in Health Sciences, based on competencies (Perea et al., 2016), is closely aligned with the changing demands of the academic environment and professional practice (Hinestrosa et al., 2019), so they must be dynamic and versatile (Andrade et al., 2024), adapting to the diverse cultural, social, and political-administrative needs of the societies where they develop (Shava et al., 2006; Fernández & Castillo, 2023). The acquisition of specific competencies, aligned with the needs of the health field, facilitates the training of competent and ethical professionals (Díaz et al., 2024). This includes not only theoretical knowledge, but also practical skills and ethical values that are fundamental in inpatient care and professional practice.

Promoting research skills among university teachers is considered essential, as research is vital in higher education (Correa, 2009). As highlighted by Richard (2024), strengthening research competencies is crucial to enhancing teaching quality in health sciences programs, particularly in contexts such as Ecuador. These skills enable teachers to integrate scientific learning into their teaching, thereby improving student education (Lancaster et al., 2014). A teacher who lacks research skills will be unable to guide their students along the path of science. Teachers need to teach students research skills, which they will develop throughout their careers (Richard, 2025). This formative role is also emphasized by Escudero et al. (2024), who examined clinical health contexts and underscored the importance of mentoring in interpreting and addressing community health challenges.

English language proficiency is a tool that enables research development, given that most information published in international journals is in English. It also guarantees communication at scientific events held in countries outside the region. García (2025) also highlights the need for global perspectives in health education programs, emphasizing the importance of internationalizing the curriculum as essential for Latin American academic contexts.

Health career teachers must be able to integrate investigative, collaborative and ethical skills in the training of health professionals (Martínez-González et al., 2008; López & Gutiérrez, 2010), which has a direct impact on improving the quality of care and interaction with patients (Pinilla-Roa, 2015); based on an active and participatory methodology, using strategies such as Problem-Based Learning or Collaborative Learning, emphasizing the construction of skills in practical contexts (Jarrett et al., 2024).

In the current pedagogy of teaching health careers, the use of clinical simulation in all its forms must be included (Scalese et al., 2008), both in the use of software, interactive atlases, models and simulators, which allows for safer practice and the gain of skills of students, being also a way of evaluating competencies; it is therefore essential to acquire the necessary expertise for teaching in simulation (Grainger et al., 2024).

Another important element that teachers should include in their curriculum is emotional education. The systematic review conducted by Galarza et al. (2023) demonstrated that emotional competencies in medical training have a significant impact. The relationship between emotional education and learning is based on the need to boost students' self-esteem, which enables them to become more confident, emotionally balanced, and empowered to achieve academic and professional success. This influences their ability to provide safe and more compassionate medical care.

At the 2022 World Conference on Higher Education, it was noted that, with the advent of ICTs, information is no longer the focal point of education as it was more than 500 years ago; the current paradigm shift in higher learning introduces a focus on problem-solving, critical thinking, basic skills, such as languages and digital competences (Rhoney & Meyer, 2024); wisdom and knowledge (Karakhanyan, 2022; Cepeda & García, 2020). These elements are key for students who choose a higher learning path, also considering that there may be a relevant gap between the

digital competence of teachers and that of students, who may be more accustomed to this type of resource (Cabero-Almenara et al., 2021; Andersson et al., 2022). Amid today's rapid transformations and changes, people need to learn and unlearn, applying and adapting what they have learned.

There are other challenges affecting university teaching, which were addressed at the 2024 Regional Conference on Higher Education (CRES+5), such as low pay and annual contracts resulting from budget cuts, which negatively impact the quality of the teaching staff (Gussi & de Moraes, 2024). In addition to the migration of academics and researchers to countries with better working and salary conditions, it hurts programs in less favored regions. On the other hand, the need for internationalization of the curriculum (Nigra, 2024), to find new ways to allow the development of a competency-based curriculum that responds to not only national but also regional needs and contrasted with global requirements, of what is expected of the future health professional (Korsunsky, 2023). One way to achieve this is through work in networks and associations of teachers in health careers, following models such as the Tuning Project, which was carried out in Europe in 2003, as well as the use of ICT to facilitate the creation of online communities (Keiller et al., 2022).

Another relevant problem in higher education (Ángel-Macías et al., 2017) is the lack of pedagogical preparation among teachers. It is often believed that a professional or postgraduate degree is sufficient to teach, but health teachers often rely on their experience and inherited models, which are not always adequate (Parson et al., 2018). Therefore, it is urgent and necessary to create teacher training spaces in pedagogy, curriculum, didactics, and evaluation to develop a high-level professional profile that meets the requirements for high-quality education in health sciences (Barreiro et al., 2024).

Teaching training for university professors, their self-assessment, and ongoing reflection on their teaching practice are necessary to achieve quality in higher education in the Health Sciences (Acosta & Quiles, 2021). One example of this training was the University Teaching Training Program implemented by the University Institute of the Italian Hospital of Buenos Aires (Schwartzman et al., 2014), which developed a series of competencies for healthcare professionals whose primary activity was not teaching, but rather specialized patient care. One of the pillars of this program was the participation and evaluation of teaching activities in controlled environments.

According to a study conducted at the Technological Institute of Sonora (Espinoza et al., 2015), teaching training for healthcare professionals who will be responsible for educating future generations is becoming increasingly important. Therefore, they propose a program that enhances teaching practice with government support.

The introduction of specialized master's and doctoral programs in Health Sciences Teaching worldwide promotes the development of the desired profiles of university professors in medical and health careers (Henao & Moreno, 2023). In Ecuador, there is currently only one master's program in Health Sciences Teaching, offered by the Universidad San Gregorio de Portoviejo; however, to date, no doctoral programs in this area have been established.

Table 1 summarizes the proposed profile of basic and specific competencies that a teacher in the field of Health Sciences should possess, based on the analysis of specialized literature reviewed by the authors. This proposal is based on the understanding that teaching in this field requires a harmonious integration of disciplinary knowledge, pedagogical skills, communication abilities, sociocultural sensitivity, and ethical commitment. At the same time, it requires ongoing technological and linguistic updates to respond effectively to contemporary challenges in the education of health professionals. Among the basic competencies, the most relevant include: in-depth disciplinary expertise; the ability to design and implement student-centered teaching strategies; clear and empathetic communication; intercultural awareness; professional ethics; adaptability to curricular and technological changes; digital competence, including the ethical use of artificial intelligence; and proficiency in foreign languages, particularly English. These competencies form the foundation for fostering reflective, ethical, and socially committed professionals.

In turn, the specific competencies comprise the effective use of Information and Communication Technologies in educational processes; promotion of research from a formative perspective, encouraging critical thinking and ethical inquiry; clinical mentoring grounded in ethical principles and real-world application; incorporation of clinical simulation as a pedagogical tool to enhance safety and confidence; fair and constructive evaluation practices with timely feedback; strong commitment to professional development through academic training and lifelong learning; and internationalization of the curriculum as a means of preparing professionals with a global outlook, capable of responding to diverse and complex health contexts.

Table 1. Proposed profile of basic and specific competencies of the teacher in Health Sciences

Basic skills	Description
Disciplinary knowledge	A deep knowledge of their area of expertise, encompassing both theoretical and practical aspects, enables them to be confident when teaching.
Pedagogical skills	Design, implement, and evaluate teaching strategies tailored to the needs and learning styles of students, as well as the needs of the society in which they operate, based on a competency-based curriculum.
Communication skills	Clear and effective communication, both verbal and in writing, to foster an environment of empathy, open dialogue, and respect.
Cultural and sociological	Understand and respect students' cultural traditions, values, and practices. Prepare students to work in teams, in multicultural environments, and with social inequalities, promoting inclusive and equitable clinical practice.
Empathy and ethics	Demonstrate empathy toward students, acting with high ethical and professional standards, both in the workplace and society, with patients, students, colleagues, and people in general.
Adaptability	Adjust teaching techniques to changes in the curriculum, new technologies, and teaching methods. Learn to unlearn; modify or change what needs to be corrected or changed.
Digital competence	The dimensions of digital teaching competence include information and information literacy, communication and collaboration in virtual environments, digital content creation, safety in the use of digital environments, and problem-solving in the use of technology, including the correct and ethical use of artificial intelligence in education and research.
Languages	The ability to master additional languages, especially English, is crucial to staying up-to-date with the latest global research and practices in the healthcare field and is therefore considered a core competency.
Specific skills	Description
Integration of information and communications technology	Effective use of Information and Communication Technologies (ICTs), beyond basic digital skills, in teaching and learning, incorporating digital tools and online resources, as well as integration into online communities, allows teachers to develop a competency-based profile that meets regional and international needs.
Research and development	Promote a research culture by guiding students through research projects, bibliographic searches, and the use of literature, as well as the ethical principles applied in research. The creation of research incubators in health science faculties is essential for student inclusion in university research projects.
Clinical mentoring	Provide guidance and support in clinical settings, helping students apply their theoretical knowledge to practical situations; the instructor acts as a professional and personal guide, based on ethical principles.
Clinical simulation	Design, conduct, and evaluate simulation sessions as part of new teaching tools, allowing students to hone their skills in a risk-free environment, ensuring patient safety and upholding professional ethics.
Evaluation and feedback	Develop and implement fair and effective assessment methods that provide constructive feedback. Simulation can also be used as a method for assessing student competencies.
Continuing professional development	Commit to your ongoing professional development by participating in courses, workshops, and conferences, as well as pursuing master's, doctoral, and postdoctoral programs specialized in your field and/or university teaching.
Internationalization of the curriculum	Incorporate a global perspective into curricula, preparing future professionals for multicultural environments and with an understanding of global healthcare practices.

Together, these elements aim to define a comprehensive, competent, and committed teaching profile—one that promotes high-quality, student-centered education aligned with global standards in health education, while also responding to local needs and challenges with equity, relevance, and innovation.

CONCLUSIONS

The preparation of teachers in Health Sciences is a process that must adapt to the changing needs of the academic and professional environment. The acquisition of specific research, collaborative, and ethical skills is important for developing competent professionals. The inclusion of clinical simulation and emotional education in the teaching curriculum, as well as English language proficiency, are key factors in improving the quality of teaching and professional practice in the healthcare field. The internationalization of the curriculum and the enhancement of pedagogical training for university professors are crucial to addressing the challenges of higher education. The implementation of teacher training programs for master's and doctoral programs in Health Sciences Teaching, along with government support and collaboration in networks and associations, can improve teaching practice and ensure quality in higher education. The importance of cultivating basic and specific competencies for obtaining a comprehensive and optimal profile for teachers in health-related careers lies mainly in their role as mentors, which is crucial for the professional future of their students. A "good teacher" not only transmits knowledge and skills but also serves as a source of inspiration and guidance for their students, playing an active role in shaping the professional and ethical identity that their students will develop.

CONFLICTS OF INTEREST

The authors declare that they have no conflicts of interest.

AUTHOR CONTRIBUTIONS

Conceptualization: Doménica D. Villacís, Nahin I. Defas, Henry A. Farfán, Jessica E. Silva, and Kelly L. Rosado. **Data curation:** Doménica D. Villacís, Nahin I. Defas, Henry A. Farfán, Jessica E. Silva, and Kelly L. Rosado. **Formal analysis:** Doménica D. Villacís, Nahin I. Defas, Henry A. Farfán, Jessica E. Silva, and Kelly L. Rosado. **Investigation:** Doménica D. Villacís, Nahin I. Defas, Henry A. Farfán, Jessica E. Silva, and Kelly L. Rosado. **Methodology:** Doménica D. Villacís, Nahin I. Defas, Henry A. Farfán, Jessica E. Silva, and Kelly L. Rosado.

Software: Doménica D. Villacís, Nahin I. Defas, and Henry A. Farfán. **Supervision:** Doménica D. Villacís and Nahin I. Defas. **Validation:** Doménica D. Villacís, Nahin I. Defas, Henry A. Farfán, Jessica E. Silva, and Kelly L. Rosado. **Visualization:** Doménica D. Villacís, Nahin I. Defas, Henry A. Farfán, Jessica E. Silva, and Kelly L. Rosado. **Writing – original draft:** Doménica D. Villacís, Nahin I. Defas, Henry A. Farfán, Jessica E. Silva, and Kelly L. Rosado. **Writing – review & editing:** Doménica D. Villacís, Nahin I. Defas, and Henry A. Farfán.

REFERENCES

Acosta, M. Z., & Quiles, O. L. (2021). Percepción de competencias docentes en profesores universitarios de Ciencias de la Salud. *Educación Médica*, 22, 420-423. <https://doi.org/10.1016/j.edumed.2021.02.002>

Albarqouni, L., Hoffmann, T., Straus, S., Olsen, N. R., Young, T., Ilic, D., Shaneyfelt, T., Haynes, R. B., Guyatt, G., & Glasziou, P. (2018). Core competencies in evidence-based practice for health professionals: consensus statement based on a systematic review and Delphi survey. *JAMA Network Open*, 1(2), e180281. <https://doi.org/10.1001/jamanetworkopen.2018.0281>

Albarra Shidiq, G., Promkaew, S., & Faikhamta, C. (2022). Trends of competencies in teacher education from 2015 to 2020: A Systematic Review Analysis. *Kasetsart Journal of Social Sciences*, 43(1), 257-264. <http://elibrary.almataa.ac.id/id/eprint/3626>

Andersson, H., Svensson, A., Frank, C., Rantala, A., Holmberg, M., & Bremer, A. (2022). Ethics education to support ethical competence learning in healthcare: an integrative systematic review. *BMC Medical Ethics*, 23(1), 29. <https://doi.org/10.1186/s12910-022-00766-z>

Andrade, M. J. O., Jaramillo, O. E. M., Mera, F. B. S., López, M. M. S., Mora, A. M. T., & Marcillo, J. S. Y. (2024). Perfil de competencias del docente universitario en el campo de las ciencias de la salud. *CAMBios*, 23(1), e946. <https://revistahcam.iess.gob.ec/index.php/cambios/article/download/946/849>

Ángel-Macías, M. A., Ruiz-Díaz, P., & Rojas-Soto, E. (2017). Propuesta de competencias profesionales para docentes de programas de salud en educación superior. *Revista de la Facultad de Medicina*, 65(4), 595-600. <http://www.scielo.org.co/pdf/rfmun/v65n4/0120-0011-rfmun-65-04-00595.pdf>

Angulo, A. A., Rodríguez, D., & García, M. A. (2024). Estado nutricional y calidad de vida del adulto mayor: Revisión sistemática. *Revista Gregoriana de Ciencias de la Salud*, 1(2), 165-177. <https://doi.org/10.36097/rgcs.v1i2.3149>

Baños, J. E., & Pérez, J. (2005). Cómo fomentar las competencias transversales en los estudios de Ciencias de la Salud: una propuesta de actividades. *Educación Médica*, 8(4), 40-49. <https://scielo.isciii.es/pdf/edu/v8n4/05.pdf>

Bárcena, A., & Prado, A. (2017). *Agenda 2030 y los objetivos de desarrollo sostenible*. D-CEPAL (pp. 27-30). <http://bit.ly/3H4s4Rm>

Barreiro, S. G. E., Matute, N. B. S., & Espinoza, S. A. M. (2024). Competencias Específicas del Docente en Ciencias de la Salud: Revisión Sistemática. *Latam: Revista Latinoamericana de Ciencias Sociales y Humanidades*, 5(1), 173. <https://dialnet.unirioja.es/servlet/articulo?codigo=9540912>

Bętkowska-Korpała, B., Pastuszak-Draxler, A., Olszewska-Turek, K., Sikora-Zych, K., Epa, R., & Starowicz-Filip, A. (2022). Personality characteristics of empathy profiles—practical implications for education of medicine students. *BMC Medical Education*, 22(1), 376. <https://doi.org/10.1186/s12909-022-03432-5>

Cabero-Almenara, J., Barroso-Osuna, J., & Palacios-Rodríguez, A. (2021). Estudio de la competencia digital docente en Ciencias de la Salud. Su relación con algunas variables. *Educación Médica*, 22(2), 94-98. <https://doi.org/10.1016/j.edumed.2020.11.014>

Cepeda, M. P., & García, M. L. P. (2020). Competencias TIC en docentes de un Programa de Ciencias de la Salud de Bogotá. *Edutec, Revista Electrónica de Tecnología Educativa*, (73), 157-173. <https://www.edutec.es/revista/index.php/edutec-e/article/view/1607>

Correa Bautista, J. E. (2009). Medición de las competencias investigativas en docentes de fisiología: una aproximación empírica. *Revista de la Facultad de Medicina*, 57(3), 205-217. <http://www.scielo.org.co/pdf/rfmun/v57n3/v57n3a02.pdf>

Crosby, R. H. J. (2000). AMEE Guide No 20: The good teacher is more than a lecturer—the twelve roles of the teacher. *Medical Teacher*, 22(4), 334-347. <https://doi.org/10.1080/014215900409429>

Díaz-Contino, C. G., Gómez, F., Culcay, J., & García, A. (2024). Propuesta de un perfil de competencias profesionales para el docente universitario en el campo de las Ciencias de la

Salud. *Revista Española de Educación Médica*, 5(2).
<https://doi.org/10.6018/edumed.600831>

Escudero, A. I., Macías, J. V., Párraga, M. T., Vélez, M. J., Bermello, M. E., & Bermello, W. A. (2024). Hipertensión arterial y estilos de vida en pacientes del Centro de Salud 24 de Mayo, cantón Sucre. *Revista Gregoriana de Ciencias de la Salud*, 1(1), 36–46.
<https://doi.org/10.36097/rgcs.v1i1.3100>

Espinoza, A. K. H., Antelo, M. L. S., & Serrano, M. L. M. (2015). Práctica docente del profesor universitario: su contexto de aprendizaje. *Profesorado. Revista de Currículum y Formación de Profesorado*, 19(2), 215-224.
<https://www.redalyc.org/pdf/567/56741181014.pdf>

Fernández-Vélez, Y. E., & Castillo-Peña, D. C. (2023). Competencias docentes para la formación de médicos en la universidad: una propuesta basada en el enfoque por competencias: Teaching competences for the training of doctors in the university: a proposal based on the competency-based approach. *Latam: Revista Latinoamericana de Ciencias Sociales y Humanidades*, 4(6), 90. <https://dialnet.unirioja.es/servlet/articulo?codigo=9586640>

Fronteira, I., Freitas, H., Guimarães, N., Fresta, M., & Ferrinho, P. (2021). Medical faculty profile is an important determinant of student profile and future practice expectations of medical students in Angola. *BMC Medical Education*, 21, 1-8. <https://doi.org/10.1186/s12909-021-02836-z>

Galarza, J., Borroto, E. R., & Díaz-Contino, C. (2023). Las competencias emocionales en la formación médica: una revisión sistemática. *Educación Médica Superior*, 37(3).
http://scielo.sld.cu/scielo.php?pid=S0864-21412023000300009&script=sci_arttext

Galdeano, C., & Valiente, A. (2010). Competencias profesionales. *Educación Química*, 21(1), 28-32. <https://www.scielo.org.mx/pdf/eq/v21n1/v21n1a4.pdf>

García, M. A. (2025). *San Gregorio de Portoviejo University: 24 years of commitment to training professionals in Health Sciences. Revista Gregoriana de Ciencias de la Salud*, 2(1), 1-3.
<https://doi.org/10.36097/rgcs.v2i1.3160>

González, V., & González, R. M. (2008). Competencias genéricas y formación profesional: un análisis desde la docencia universitaria. *Revista Iberoamericana de Educación*, 47, 185-209. <https://doi.org/10.35362/rie470710>

Gottlieb, M., Chan, T. M., Zaver, F., & Ellaway, R. (2022). Confidence-competence alignment and the role of self-confidence in medical education: A conceptual review. *Medical Education*, 56(1), 37-47. <https://doi.org/10.1111/medu.14592>

Grainger, R., Liu, Q., & Gladman, T. (2024). Learning technology in health professions education: Realising an (un)imagined future. *Medical Education*, 58(1), 36-46. <https://doi.org/10.1111/medu.15185>

Gussi, A. F., & de Moraes Sousa Garcia, M. M. (2024). Reseña de la Reunión de Seguimiento de la Conferencia Regional de Educación Superior (CRES+ 5), del eje temático 3, intitulado “La Educación Superior, internacionalización e integración regional de América Latina y el Caribe”, realizada de 13 a 15 de marzo. *Revista REDALINT. Universidad, Internacionalización e Integración Regional*, 1(6), 155-164. <https://revele.uncoma.edu.ar/index.php/redalint/article/view/5537>

Henao, M. C. X., & Moreno, M. M. J. (2023). *Influencia de un programa de maestría en educación para profesionales de la salud en el desarrollo de su identidad docente* (Doctoral thesis, Pontificia Universidad Javeriana, Bogotá, Colombia). <http://bit.ly/4o647tt>

Hinestroza, M. G., Sánchez, M. S., Kure, S. I., & Machado, M. C. M. (2019). Competencias profesionales del docente universitario desde una perspectiva integral. *Killkana Sociales*, 3(1), 1-14. <https://doi.org/10.26871/killkanasocial.v3i1.443>

Ibarra, C. T., Cedeño, L. B. V., & Canosa, S. A. (2024). Competencias del docente universitario en el campo de ciencias de la salud: revisión sistemática. *Revista Científica de Salud BIOSANA*, 4(5), 87-102. <https://doi.org/10.62305/biosana.v4i5.291>

Jarrett, J. B., Elmes, A. T., Keller, E., Stowe, C. D., & Daugherty, K. K. (2024). Evaluating the strengths and barriers of competency-based education in the health professions. *American Journal of Pharmaceutical Education*, 100709. <https://doi.org/10.1016/j.ajpe.2024.100709>

Karakhanyan, S. (2022). *Calidad y relevancia de los programas en la educación superior* [Documento encargado para la Conferencia Mundial de Educación Superior, 18-20 de mayo de 2022]. UNESCO. https://unesdoc.unesco.org/ark:/48223/pf0000389872_spa

Karnieli-Miller, O., Vu, T. R., Holtman, M. C., Clyman, S. G., & Inui, T. S. (2010). Medical students' professionalism narratives: a window on the informal and hidden curriculum. *Academic Medicine*, 85(1), 124-133. <https://doi.org/10.1097/ACM.0b013e3181c42896>

Keiller, L., Nyoni, C., & Van Wyk, C. (2022). Online faculty development in low-and middle-income countries for health professions educators: a rapid realist review. *Human Resources for Health*, 20(1), 12. <https://doi.org/10.1186/s12960-022-00711-6>

Korsunsky, L. (2023). Reseña del Evento Consulta Pública CRES+ 5 del Eje 5 sobre: "Desafíos de la Investigación Científica, Tecnológica y de la Innovación para América Latina y el Caribe" 15 y 16 de Noviembre 2023. *Revista REDALINT. Universidad, Internacionalización e Integración Regional*, 1(5), 209-219. <https://revele.uncoma.edu.ar/index.php/redalint/article/view/5225>

Lancaster, J. W., Stein, S. M., MacLean, L. G., Van Amburgh, J., & Persky, A. M. (2014). Faculty development program models to advance teaching and learning within health science programs. *American Journal of Pharmaceutical Education*, 78(5), 99. <https://doi.org/10.5688/ajpe78599>

López, M. M. D., & Gutiérrez, N. P. J. (2010). Rol de los docentes de ciencias de la salud y el desarrollo de sus competencias. *Iatreia*, 23(4), 432-440. <https://www.redalyc.org/pdf/1805/180515586013.pdf>

Martínez-González, A., López-Bárcena, J., Herrera Saint-Leu, P., Ocampo-Martínez, J., Petra, I., Uribe-Martínez, G., García-Sahagún, M. C., & Morales-López, S. (2008). Modelo de competencias del profesor de medicina. *Educación Médica*, 11(3), 157-167. <https://scielo.isciii.es/pdf/edu/v11n3/original2.pdf>

Nigra, S. (2024). La internacionalización del currículo: la perspectiva de los docentes de la Universidad de Guadalajara. *Revista Veritas et Scientia-UPT*, 13(01), 112-126. <https://doi.org/10.47796/ves.v13i01.985>

Oramas, R., Jordán, T., & Valcárcel, N. (2013). Competencias y desempeño profesional pedagógico hacia un modelo del profesor de la carrera de Medicina. *Educación Médica Superior*, 27(1), 123-134. <http://scielo.sld.cu/pdf/ems/v27n1/ems15113.pdf>

Parson, L., Childs, B., & Elzie, P. (2018). Using competency-based curriculum design to create a health professions education certificate program the meets the needs of students, administrators, faculty, and patients. *Health Professions Education*, 4(3), 207-217. <https://doi.org/10.1016/j.hpe.2018.03.008>

Perea, R. S. S., Galende, M. L. Q., & Hoz, G. P. (2016). Formación basada en competencias en ciencias de la salud. *Medisur*, 14(4), 456-463. <https://www.medigraphic.com/cgi-bin/new/resumen.cgi?IDARTICULO=68052>

Pinilla-Roa, A. E. (2015). El maestro universitario como profesional autónomo. Una mirada desde las ciencias de la salud. *Revista de la Facultad de Medicina*, 63(1), 155-163. <https://doi.org/10.15446/revfacmed.v63n1.44740>

Rhoney, D. H., & Meyer, S. M. (2024). Competency-based education: the need to debunk misconceptions and develop a common language. *American Journal of Pharmaceutical Education*, 88(2), 100637. <https://doi.org/10.1016/j.ajpe.2023.100637>

Richard, E. (2024). Rol de la investigación en la formación en Ciencias de la Salud. *Revista Gregoriana de Ciencias de la Salud*, 1(1), 6-9. <https://doi.org/10.36097/rgcs.v1i1.3097>

Richard, E. (2025). Competencias docentes en carreras de ciencias de la salud en Ecuador. *Pedagogía y Saberes*, (62), 91-114. <https://doi.org/10.17227/pys.num62-20619>

Roberts, N. K., Dorsey, J. K., & Wold, B. (2014). Unprofessional behavior by specialty: A qualitative analysis of six years of student perceptions of medical school faculty. *Medical Teacher*, 36(7), 621-625. <https://doi.org/10.3109/0142159X.2014.899690>

Sánchez, M. D. L. Á., & Rodríguez, E. A. (2021). Competencia digital en docentes de Ciencias de la Salud de una universidad privada de Lima. *Educación Médica Superior*, 35(1), e2060. <https://ems.sld.cu/index.php/ems/article/view/2060/1140>

Scalese, R. J., Obeso, V. T., & Issenberg, S. B. (2008). Simulation technology for skills training and competency assessment in medical education. *Journal of General Internal Medicine*, 23, 46-49. <https://doi.org/10.1007/s11606-007-0283-4>

Schwartzman, G., Eder, M. L., & Roni, C. (2014). Formación docente en y para la universidad: dispositivos y prácticas en Ciencias de la Salud. <https://ri.conicet.gov.ar/handle/11336/109031>

Shaya, F. T., & Gbarayor, C. M. (2006). The case for cultural competence in health professions education. *American Journal of Pharmaceutical Education*, 70(6), 124. <https://doi.org/10.5688/aj7006124>

Shepherd, L., Gauld, R., Cristancho, S. M., & Chahine, S. (2020). Journey into uncertainty: Medical students' experiences and perceptions of failure. *Medical Education*, 54(9), 843-850. <https://doi.org/10.1111/medu.14133>

Spooner, M., Larkin, J., Liew, S. C., Jaafar, M. H., McConkey, S., & Pawlikowska, T. (2023).

“Tell me what is ‘better’!” How medical students experience feedback, through the lens of self-regulatory learning. *BMC Medical Education*, 23(1), 895.

<https://doi.org/10.1186/s12909-023-04842-9>

Zabalza, M. A. (2005). *Competencias docentes* [Conferencia presentada en la Pontificia Universidad Javeriana de Cali, Colombia]. <http://bit.ly/3GVtAW2>

Disclaimer / Editor's Note: All publications' statements, opinions, and data are solely those of the individual authors and contributors, not *Revista Gregoriana de Ciencias de la Salud* or the editors. *Revista Gregoriana de Ciencias de la Salud* and/or the editors disclaim all responsibility for any injury to persons or property resulting from any ideas, methods, instructions, or products referred to in the content.