

Educational models in pediatric settings. A comparative analysis of pedagogical leadership in Italy and Spain

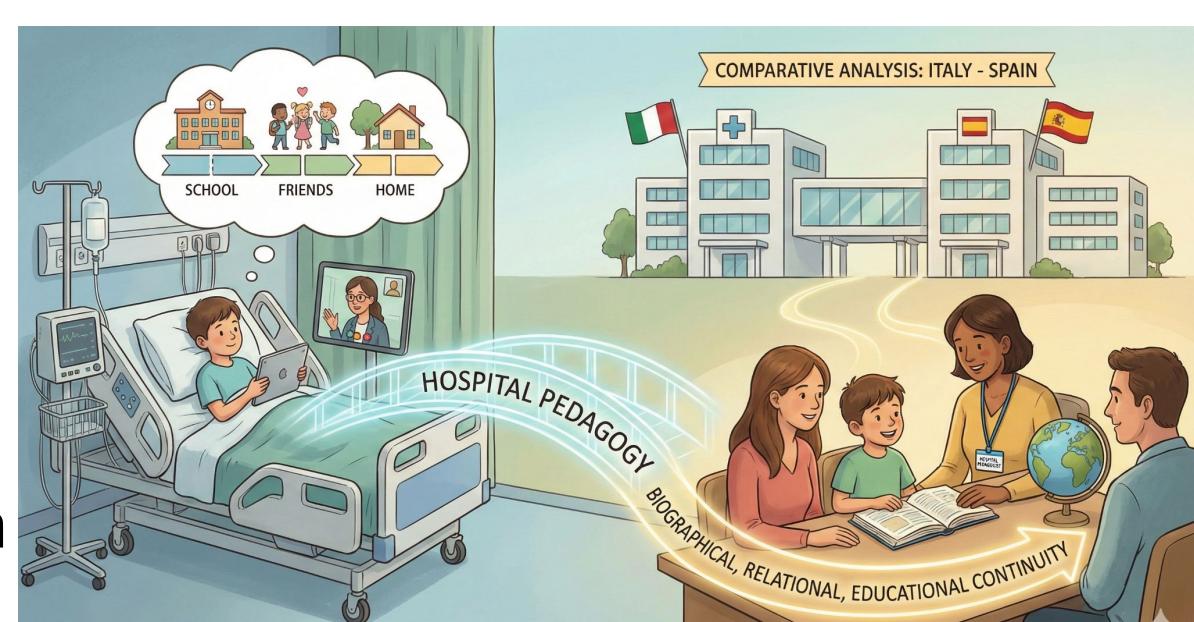
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INTRODUCTION and AIMS



The Challenge
Pediatric hospitalization represents a critical juncture risking biographical and educational fragmentation (WHO, 2016).

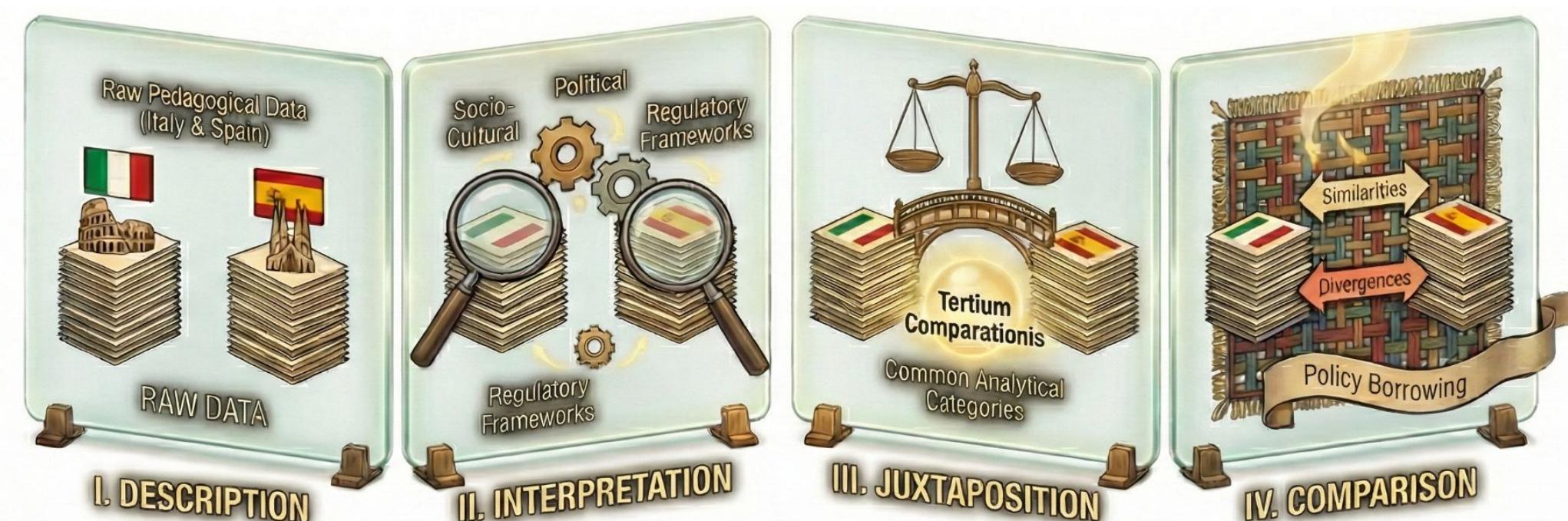


Protective Factor  Hospital Pedagogy safeguards the fundamental right to education, sustaining the patient's "life project" (Boffo & Ceccarelli, 2025).

Study Aim  To analyze the emerging role of the Hospital Pedagogist through a comparative analysis of Italian and Spanish organizational models.

METHOD and PARTICIPANTS

This study applies Bereday's (1964) four-phase Comparative Method to 40 semistructured interviews with Italian and Spanish care professionals, ensuring a systematic approach that mitigates "comparative error" arising from the juxtaposition of incongruent elements.



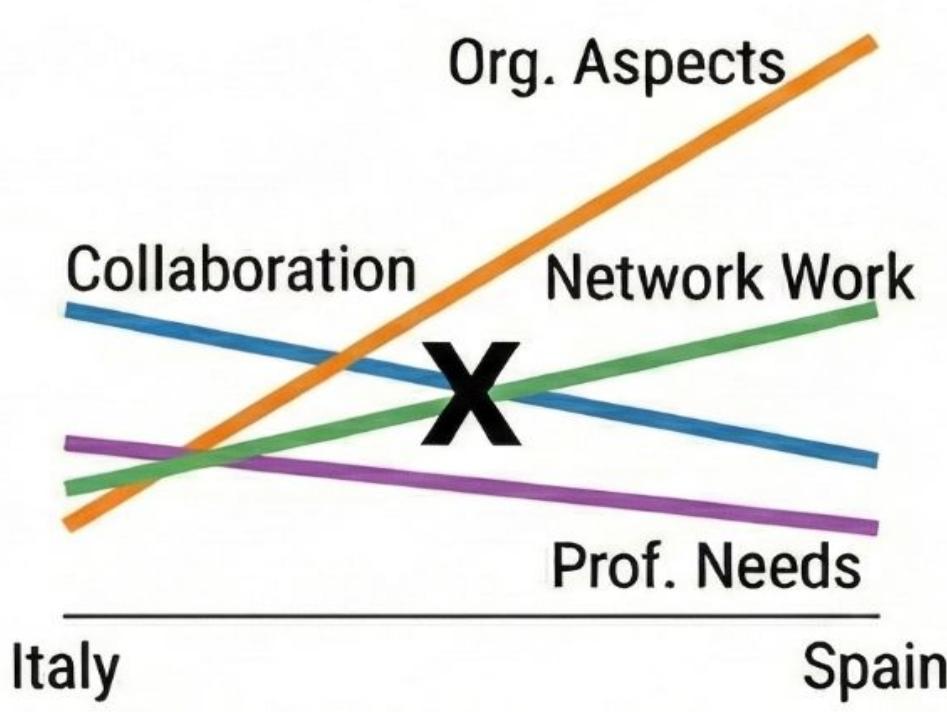
Synthesis of Findings: A Comparative Thematic Analysis of Italy and Spain

ITALY (Case A) - "Pointed" Profile & Initial Priorities



Organizational Aspects: 17.9%
Interprof. Collaboration: 16.6%
Professional Needs: 11.7%
Network Work: 9.5%
Pedagogical Role: 4.5%

The Strategic Inversion



Summary: The comparative analysis reveals a distinct strategic divergence. Spain demonstrates a marked predominance of Organizational Aspects and a notable 'strategic inversion,' wherein the **importance of Network Work** surpasses that of **Interprofessional Collaboration**. In contrast, **Italy** presents a more **balanced systemic profile**, initially characterized by a higher concentration on Organizational Aspects and Interprofessional Collaboration.

SPAIN (Case B) - "Bloated" Profile & Strategic Inversion

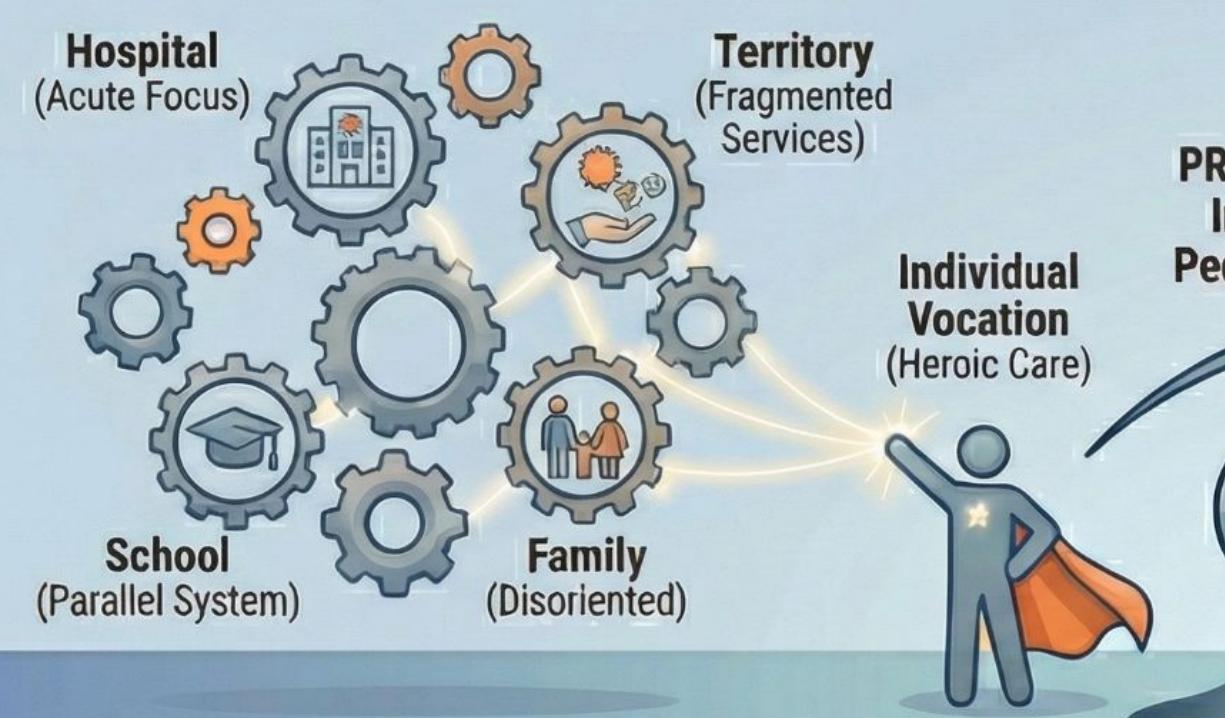


Organizational Aspects: 26.3%
Network Work: 13.0%
Interprof. Collaboration: 9.0%
Professional Needs: 7.8%
Pedagogical Role: 6.7%

DISCUSSION and CONCLUSIONS

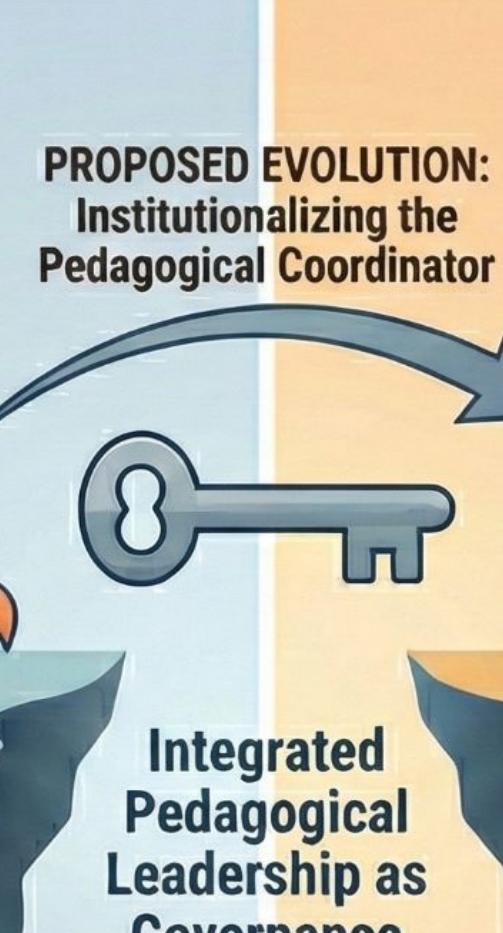
Comparative Analysis Summary: Bridging the "Void" in Pediatric Care

ITALY (Case A): "Constituent Stage" – Fragmented & "Heroic"



Structure: Fragmented, relies on individual initiative
Leadership: 'Potential' & Unrecognized
Result: Disorientation & Lack of Continuity

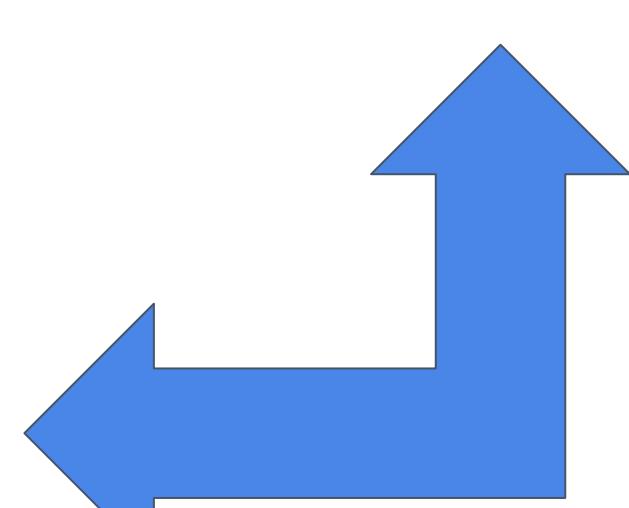
SPAIN (Case B): "Management Stage" – Integrated & Normed



Structure: Integrated via Norms & Protocols
Leadership: 'Real' & Formalized
Result: Continuum of Care, but high Bureaucracy & Emotional Load



SCAN ME



REFERENCES

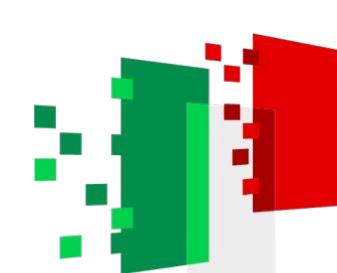
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