



Health needs and nursing care

Necessidades de saúde e o cuidado de enfermagem

Necesidades de salud y cuidado de enfermería

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ABSTRACT

Objective: to present the concept of needs according to different approaches to discuss the possibility of health care that incorporates a broader view of human vulnerabilities in health services. **Methods:** the arguments are founded on nursing theorists who worked on the construction of frameworks relevant to care, based on needs and on philosophers who show the possibility of identifying the vulnerabilities of human beings, defending art as a therapeutic instrument that can promote health care. **Conclusion:** although care can acquire a new dimension with the introduction of art, according to certain perspectives, philosophical studies on ethics and aesthetics should be resumed to identify human vulnerabilities that can in fact be compensated by sensible understanding of the outer world. To incorporate art in nursing care requires studies from theorists to be recovered, deepening concepts and working on empirical investigations for their adequate use.

Descriptors: Nursing Care; Needs; Art; Philosophy; Nursing.

RESUMO

Objetivo: apresentar os conceitos de necessidades em distintas vertentes para discutir a possibilidade de um atendimento que incorpore, no serviço de saúde, uma visão mais abrangente das vulnerabilidades humanas. **Método:** os argumentos se pautam em teóricos de enfermagem que trabalharam na construção de referenciais pertinentes ao cuidado fundamentado em necessidades e em filósofos que apresentam uma possibilidade de identificar vulnerabilidades do ser humano defendendo a arte como instrumento terapêutico que pode favorecer o cuidado à saúde. **Conclusão:** embora sob algumas perspectivas o cuidado possa adquirir uma nova dimensão com a introdução da arte, é necessário retomar os estudos filosóficos em ética e estética para identificar as vulnerabilidades humanas que possam, de fato, ser compensadas pela apreensão sensível do mundo exterior. Incorporar a arte ao cuidado de enfermagem requer resgatar os estudos de teóricos, aprofundar conceitos e trabalhar em investigações empíricas para seu uso adequado.

Descritores: Cuidados de Enfermagem; Necessidades; Arte; Filosofia; Enfermagem.

RESUMEN

Objetivo: presentar en diferentes abordajes los conceptos de necesidades para discutir la posibilidad de una atención que incorpore, en el servicio de salud, una visión más integral de las vulnerabilidades humanas. **Método:** los argumentos se basan en teóricos de enfermería que trabajaron en la construcción de referenciales pertinentes al cuidado fundamentado en necesidades y en filósofos que presentan una posibilidad de identificar vulnerabilidades del ser humano, defendiendo la arte como instrumento terapéutico que puede favorecer el cuidado de salud. **Conclusión:** aunque en algunas perspectivas el cuidado pueda ganar una nueva dimensión con la introducción del arte, se debe retomar los estudios filosóficos en ética y estética para identificar las vulnerabilidades humanas que puedan realmente ser compensadas por la aprehensión sensible

del mundo exterior. Incorporar el arte en el cuidado de enfermería demanda rescatar los estudios de teóricos, profundizar conceptos y trabajar en investigaciones empíricas para su uso adecuado.

Descriptor: Atención de Enfermería; Necesidades y Demandas de servicios de salud; Arte; Filosofía; Enfermería.

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INTRODUCTION

Health needs have been the object of studies, debates and public policies. Among the several approaches to discussing health needs, one of them⁽¹⁾ follows a more abstract theoretical-conceptual approach, as needs refer to human life in their social, historical and cultural spheres and they are rethought in terms of health in particular. Another approach⁽²⁻³⁾ is more operational in nature, where needs represent indicators that direct policies and programs on health service management, responding to specific problems. Furthermore, these two approaches can be conceived as desires, wishes, wants or aspirations that reflect and shape the genesis of social policies that meet the needs perceived by individuals or groups⁽⁴⁻⁵⁾.

Health needs are defined, assessed, designed, aimed at and, consequently, recognized as spaces of interaction between health services and the population from areas where such services are located, with the purpose of caring for it. Managers are concerned about such aspect in the sense of presenting the possible resolvability of the service, considering the relationship between cost and benefit in management.

Studies on this theme have the potential of helping workers in the health sector to pay more attention to those who seek care, considering their needs as the focus of interventions and practices. Additionally, aiming to achieve the quality of such care, health services must provide care in agreement with the needs of their users and purposes defined by them.

Thus, primary, secondary and tertiary health services, disease control and health promotion and prevention programs use distinct frameworks to construct different indicators of needs. The challenge lies in being capable of conceptualizing health needs in a way that they are met beyond the operational objective of services, thus requiring the mediation between the complex concept and its understanding and incorporation by professionals, so that care could be more humanized and qualified.

Thus, human beings, regardless of their health conditions and the goals of services, can be in fact recognized and understood in their complexity as vulnerable beings. However, in order to make judgments and take a position when dealing with the needs of others, one has to place them in the theoretical and philosophical field and define a conceptual landmark that will enable them to be recognized, aiming to discover what the human condition is beyond that which is apparently obvious and perceiving the wealth of health care practice, including science, ethics and aesthetics⁽⁶⁾.

Thus, the following question arises: how to conciliate health care that takes into consideration this human vulnerability with the space of a service with specific operational objectives? Needs must be investigated and discussed to achieve health care that, apart from meeting the immediate needs that

cause individuals to seek it, also includes the deeper question of knowing such human beings requiring care at every moment of their lives.

In view of what has been exposed, the present study aimed to show the concepts of needs according to different approaches to discuss the possibility of providing health care which is not only operational and the incorporation of a broader view of human vulnerabilities in health services. The reflection presented in this study, with the foundation provided by philosophers, enables the recovery and discussion of the theoretical foundation of care, overcoming the limits that surround it in the sphere of the health system.

METHODOLOGICAL PROCEDURES

Nursing theorists and authors were selected so that arguments could be developed, considering the wide reach of their studies internationally. These authors worked on the construction of theoretical frameworks for health care founded on needs. In Brazil, one of them was recognized for constructing the nursing care process and method based on basic human needs, which contributed to the foundation of nursing teaching in this country. There were two philosophers who were also selected, as they showed the possibility of identifying needs that were subject to being met by art based on the vulnerabilities of human beings. The authors selected were as follows:

Jaqueline D. Fortin (1954-), PhD from Boston University and Emeritus Professor of Nursing at the University of Rhode Island since 1985⁽⁴⁾.

Afaf Ibrahim Meleis (1942-), author of the book entitled "Theoretical Nursing: Development and Progress", nursing scientist and educator, nursing theorist and honorary member of the Royal College of Nursing, professor of the School of Nursing at the University of Pennsylvania, born in Egypt and living in the United States of America⁽⁵⁾.

Wanda de Aguiar Horta (1926-1981), PhD in Nursing, Professor of the School of Nursing at the University of São Paulo, introduced the concept of "Nursing Process" in the 20th century and launched the precepts of humanized care⁽²⁾.

Alain de Botton (1969-), Swiss philosopher and writer living in London, England, known for promoting the use of philosophy in daily life, and John Armstrong (1966-), English writer and philosopher, living in Melbourne, Australia, professor at the University of Tasmania and author of several books on philosophy⁽⁷⁾.

DIFFERENT APPROACHES TO HUMAN NEEDS

Studies on nursing theories performed between 1950 and 1970⁽⁵⁾ distinguished three schools of thought, characterizing them as needs, interaction and results, according to the origins

of the paradigm, period of development, questions and main concepts^(4,5). Due to the objective of the present study, the school of thought that deals with needs will be developed. Thus, it identified a group of Nursing theorists – Henderson, Abdellah and Orem – who ordered care conceptually and founded their thinking on needs⁽⁴⁾, seeking to answer the following question: What do nurses do? After a broad review and assessment of this school, this was considered to be an example of the initial theory of needs, based on the concept of human needs.

Henderson's theory stood out in this same study, as it emphasizes the role of nursing complementing and supplementing individual needs to maintain independence, as did Abdellah's theory, specifying human beings' need-related problems as the focus of nursing attention^(4,5). Theorists following this approach described the function of Nursing as related to fundamental human needs, which is similar to the view of care aimed at the needs associated with the survival of individuals or groups⁽⁴⁾.

There are two important aspects to the concept of human needs: a) an inner aspect – the motivational impulse that guides behavior, and b) an outer aspect – social, political and cultural forces. Both are reflective because human needs are also defined as desires, wishes or expectations that shape the construction of social policies. In their turn, political, social and cultural ideologies represent the needs perceived by individuals or groups. The wide conceptualization creates a distinction between human needs and socially constructed ones, such as desires, wishes, expectations and satisfactions⁽⁴⁾.

If we accept the notion of reflexive interaction between needs and social context, the search for a universal need is pointless. If we accept that reflexive interaction is not between the need and social context, but rather between the two sides of Human Needs – the motivational impulse on the one hand and a socially formed force on the other hand – then we could see them as the two sides of the same coin. Under this perspective, desires, wants, expectations and satisfactions are seen as variables subject to manipulation. Moreover, the motivational impulse is considered to be universal and designed by Human Needs. This does not mean that a wide range of all basic human needs is possible or even desirable, although it makes sense talking about certain categories of needs, such as safety and identity, experienced by human beings at a certain moment and location to distinguish them from desires and satisfactions⁽⁴⁾.

In a philosophical perspective, based on the question "What is the purpose of art?", authors⁽⁷⁾ defend the possibility of constructing a therapeutic environment capable of guiding, promoting and comforting spectators, enabling them to evolve. Like other instruments, art has the power of improving one's capacities and compensating certain innate weaknesses, which are more mental than physical, known as psychological vulnerabilities. This is what occurs with spectators of works of art who mentally surrender to artistic representations and temporarily feel relieved from concerns, immersed in a broader context that interrupts the relentless complaints from their ego. It should be emphasized that art can be absorbed by the five senses: sight, hearing, touch, taste and smell.

According to these authors⁽⁷⁾, the human imbalances that cause needs are innate vulnerabilities and there are seven types

of needs: the need to have significant memories; the need for hope; the need to find meaning and dignity in suffering; the need to reset one's balance; the need for self-knowledge; the need for growth; and the need for appreciation of routine life. About the need to remember, they mention that art is a form of maintaining experiences, many of which are beautiful and temporary, requiring help to be preserved. Thus, the portrait of an individual on canvas is not only a record of someone, but also their image in a unique and characteristic state of spirit that, in its turn, satisfies the need of spectators to recall an emotion.

One of the strangest aspects of experiencing art is its capacity to provoke tears not when a disturbing image is seen, but rather a gracious and enchanting work of art. Art can teach how to cope with suffering by showing pain in a dignified manner. Beauty can arouse contradictory emotions: tragedies, innocence and simplicities expressed by art can be touching or reset the balance of emotions. In art, idealization is confronted by its antidote, realism. An artist who is an idealist eliminates the negative aspects of reality, such as social injustices, exploitation and imperfections, emphasizing the virtues. The opposite of idealization is the caricature, exaggeration, that which distorts reality and also reveals the lure of what is real. An artist shows sadness as an omnipresent and grandiose emotion in their work, received reciprocally by the audience. In this way, it gives social expression to the adversities of life. By capturing incomplete feelings and thoughts, it shows observers their own feelings.

The proposition of these authors⁽⁷⁾ is that each of these innate vulnerabilities is associated with human needs that can be met by a trained careful caregiver. The curator of an art exhibit can help spectators, enabling them to evolve through the observation of great works of art, to relativize their suffering, to find comfort in nature, to educate their sensibility to perceive the need of others, to maintain the ideals for a successful life and to contribute to self-knowledge.

DISCUSSION

Throughout history, the journey of Nursing shifted from a learned skill to a profession; from the qualification and work process centered on hospitals to the universities; from quiet subordination to responsibility and autonomy; and from a practical application to theoretical foundation⁽⁵⁾. The notion of need as a motivational impulse that directs human behavior and the consequences of needs that are not met were translated into nursing problems by theorists, with the final objective of causing a radical change in nursing education and practice^(2,4).

Health care founded on the manifestation of human needs is something widely disseminated in the area of health. However, the results from observations and empirical data open space for discussions about what needs can be met through therapeutic practices.

In this perspective, a review⁽⁸⁾ on the connection between art, cure and public health showed that the four types of artistic expression and creative process used as therapy during intentional interventions to promote health were as follows: involvement with music; visual arts; creative expression

based on movement; and literary expression. Studies point to evidence on the relationship between participation in artistic activities and resulting improvement in mood and emotions, reduction in stress and depression, factors present in the development of chronic diseases, apart from the impact on important physiological parameters.

A study performed at the Chelsea and Westminster Hospital, cited by the authors of the previously mentioned review, compared the use and non-use of an intervention with art in several units of this hospital. The groups who received this intervention obtained better clinical results, improvement in vital signs, reduction in stress-induced cortisol and decrease in medication to induce sleep. Furthermore, these authors reported earlier hospital discharge between patients who participated in interventions with music, visual and performing arts, compared to those who did not participate. Another study revealed that patients in intensive care who participated in guided imagination or had an image of a landscape placed on a wall showed a decrease in narcotic medication for pain, compared to those who did not, and left the hospital earlier⁽⁸⁾.

Other authors⁽⁹⁾ corroborate the evidence that the involvement with art can contribute to health promotion, indicating paths for art and public health to be able to promote the well-being of the community together. This closeness between art, health and culture gives rise to a new field of knowledge in

which health can also be associated with the possibility of experiencing creativity, participating in social exchanges and having access to cultural experiences. Thus, artistic and cultural manifestations begin to be understood as aspects that help to produce health, which can redirect ways of living, falling ill and caring (for oneself)⁽¹⁰⁾.

Despite works in the literature mentioning the potential of art as a health resource, this interface is complex and multifaceted, with many challenges for the construction of a body of knowledge. Consistent and controlled studies with measurable results are required, if we want to advance and develop interventions with art to have an impact on health.

FINAL CONSIDERATIONS

Introducing art in health care founded on human needs brings us back to the framework proposed by nursing theorists. Aiming to identify human vulnerabilities that can be compensated by sensible understanding of the outer world, studies on ethics and aesthetics in philosophy must be resumed. Music, literature, and dramatic and plastic arts certainly provide human beings with health care based on their needs. Incorporating art into nursing care requires recovering studies performed by theorists, deepening concepts and working on empirical investigations for their adequate use.

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