Human suffering and nursing care: multiple views

Sofrimento humano e cuidado de enfermagem: múltiplas visões

El sufrimiento humano y los cuidados de enfermería: múltiples puntos de vista

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Objectives: To reflect on suffering in the philosophical context. Methods: In this theoretical discussion suffering is presented in different forms: suffering in the philosophical plane; suffering interfaces; anthropology and suffering; Nursing: a holistic view of human suffering and nursing care. Results: The nurse in their professional practice understands that vulnerability often is linked with pain in the biological, psychological and social aspects, among others. One of the objectives of nursing care is alleviating human suffering caused by diseases where current technological progress sometimes helps to solve the technical management of pain. Conclusion: Regardless of this being a technical problem, the pain and suffering are in the ethic/human sphere and should be considered in its various interfaces.

Keywords: Nursing; Pain; Anthropology; Philosophy.

O objetivo deste estudo foi refletir sobre o sofrimento no contexto filosófico. Métodos: Nessa discussão teórica, o sofrimento é apresentado de formas diferentes: sofrimento no plano filosófico; interfaces do sofrer; antropologia e sofrimento e Enfermagem: uma visão holística do sofrimento humano. Resultados: O enfermeiro em sua prática profissional compreende que a vulnerabilidade, muitas vezes, está vinculada com a dor, nos aspectos biológico, psicológico e social, entre outros. Um dos objetivos do cuidado em Enfermagem é minorar o sofrimento humano causado pelas doenças, considerando que o progresso tecnológico atual ajuda, algumas vezes, a solucionar a gestão técnica da dor. Conclusão: Independente de serem um problema de ordem técnica, a dor e o sofrimento situam-se na esfera da ética/humana e devem ser considerados nas suas várias interfaces.

Palavras-chave: Enfermagem; Dor; Antropologia; Filosofia.

Objetivo: Comprender el sufrimiento en el contexto filosófico. Métodos: En esta discusión teórica, el sufrimiento se presenta de diferentes maneras: sufrimiento en el plan filosófico; interfaces del sufrir; antropología y sufrimiento; y Enfermería - una visión holística del sufrimiento humano. Resultados: El enfermero en su práctica entiende que la vulnerabilidad se relaciona a menudo con el dolor en los aspectos biológico, psicológico y social, entre otros. Uno de los objetivos del cuidado de enfermería es aliviar el sufrimiento humano causado por las enfermedades donde el progreso tecnológico actual a veces ayuda a resolver la gestión técnica del dolor. Conclusión: Independiente de ser un problema de orden técnica, el dolor y el sufrimiento se sitúan en la esfera de la ética/humana y deben ser considerados en sus diferentes interfaces.

Palabras-clave: Enfermería; Dolor; Antropología; Filosofía.
**INTRODUCTION**

Suffering is found at the origin of the human condition when they are confronted with the anguish of their finitude. Seeking an appropriate definition to describe it is not a subtle task. Therefore, it is necessary to use different visions to reflect on this complex phenomenon.

Suffering is an intrinsic topic to humanity and inherent in healthcare. The nurse needs to analyze their practice on the basis of an anthropological and philosophical vision and not only technical, for which they may have conditions to understand the countless situations experienced during their professional activities and in the care human beings who are suffering.

In this theoretical reflection, the suffering is presented in different forms, namely: suffering on the philosophical plane; suffering interfaces; anthropology and suffering; Nursing: a holistic view of suffering; as well as human suffering and Nursing care.

**Suffering on the philosophical plane**

The word suffer represents an act or fact of suffering, physical pain, anguish, sorrow, bitterness, patience and resignation. The human being has suffering as inherent characteristic. Suffering presents itself as a fundamental motivation and a shelter fromthe singularity.

However, it is necessary to consider, different dimensions that articulate with the individual, such as the cultural, social, educational, economic and of interpersonal nature that many times predispose them to vulnerabilities, i.e. the situation of undue or unknown risk.

The professional must reflect on the human vulnerabilities, because the recognition of this phenomenon and its relationship to the sufferings that it will be possible take care of the suffering individual in a holistic manner.

In this context, human vulnerability can be one of the possible paths for the extension of the professional sensitivity to the susceptibility of the patient, enabling them to establish a more symmetric, empathetic and supportive relationship among these.

The nurse then must understand that vulnerability, often articulates with pain, which may be biological, psychological, spiritual and social. The latter is produced in conjunction with work precariousness and social bond fragility, being a category able to describe the situation of a large portion of the Brazilian population. To address this dichotomy that is given socially, and that becomes more acute in the case of individuals who are in relationships that make them more vulnerable, it seems that one of the possible ways that one can open the field for the creation of a greater symmetry and equity would be through education for the citizens.

In reality, education and citizens are articulated with the social culture of each region and clarifying that the population establishes itself in this respect. Currently, to ensure a good citizenship it is necessary that there are rights, but these need to be linked to the fulfillment of their duties. Thereafter, with this two-way functioning, one can achieve the reduction of vulnerability.

**Suffering interfaces**

Biological suffering is a physical dimension; the pain is an indicator that something needs to be reviewed and we may suffer in the psychic dimension, which often relates to the biological aspect. Another suffering is the spiritual, added to the questioning of one's identity and the search for answers.

In this diagram, it is possible to observe the intrinsic relationship that man has with vulnerability and suffering. Vulnerability in turn overcomes the individualizing and probabilistic character of the classic concept of "risk", pointing to this word as the set of aspects that go beyond the individual, encompassing collective and contextual, aspects leading to susceptibility to diseases or injuries, considering aspects regarding the availability or lack of resources devoted to the protection of individuals.

In the complexity of the human being, various components may relate to this being vulnerable, namely: biological, social, cultural, spiritual and socioeconomic aspects, but are not limited items, which may have others. Even in Figure 1, the diagram also references man with the word suffering, this word sometimes so feared by all, because when we speak of suffering, soon comes to memory an aversive experience and a corresponding negative emotion that, for many times it is associated with the pain in their various interfaces presented in any conditions.

Suffering is part of the human maturation. All, in some of the stages of life, suffer by love, nostalgia, loneliness or even by a decision. Taking new steps, this is the way,which even without realizing it, leads the human being reacting to the adversities of everyday life.

Experiencing suffering makes one closer to others, increasing self-awareness, fostering acceptance of new facts, and fosters personal maturity, which can be seen as a learning opportunity. Thus, man can contemplate the different vertices of suffering that are not necessarily bad. When we talk about the word suffering, comes to mind something that is marked by a state of negative experience, but, depending on the point of view, this suffering can become positive.

It is not a simple task to understand the existence of suffering. However, it is necessary that we will be able to understand the dynamics of living with it, because, otherwise, it can become retribution or a punishment and, commonly is not a permanent manifestation, being able to cope with this feeling, so particular to each individual who is suffering.

Suffering is part of human nature, and there is something new, which may represent a merging of pleasure and pain. It has three sources: the body itself, the external world and the interpersonal relationship.

The experience of suffering is directly related to the experience of the mystery and inexplicable. Many ask: why do we suffer? What sense is there for suffering? Should the individual rebel against the suffering? These questions live daily with one's being, actively on a daily basis, whereas, humans become unable to manage and submit them to logic of concrete feelings based on the reality.
Human suffering is part of life; however, there are many people who have resistance to evolution, since at some points in time of their existence have suffered frustrations while they were on the path of evolution. From then on, they go through life in fear, anxiety, worry, anger, among many other unpleasant feelings and emotions that block the natural flow of life. The opportunities pass and are not perceived, or when they perceive the opportunities, the fear is too great, paralyzing actions and limiting choices.

The human suffering is something that acquires high complexity, because man can suffer in many ways and does not suffer from many others, depending on the vision of each one. Therefore, suffering obliges that sensitive life is subordinate to the life of the activities, which, repudiate fatalism, so that the suffering raises the feelings for the intentions of repair.

Anthropology and suffering

For Philosophical Anthropology, there are at least five forms of suffering intimately rooted in multidimensional structure and pluri-relational of the human being: intrapersonal suffering (external and internal suffering); intrapersonal suffering; natural suffering; technical suffering and transcendent suffering. During the various stages of human life, from birth to death, one can observe the not suffering and suffering-pleasure, separated distinctively; but in common the suffering becomes modality imprecise and vague, that superimposes indistinguishable layers often inexpressible.

In everyday life, the reality appears without disguises or masks. Many people may have difficulties to accept adverse situations, however the acceptance will allow the reduction of this suffering, even the thought that everything passes will allow hope in overcoming.

During the evolution of life, the human maturation comes with experience. The walk of life makes us become aware of who we are and what we want to be, and to progress, feeling the need to create and generate something. There is a greater tendency to develop the professional aspects, projects, marriage enhancement of intellectuality and procreation, as it perceives life as a big challenge in the quest for emotional and financial stability. In this phase, the body is already fully developed and ready for various activities.

The end of life corresponds to a period in which, typically, the suffering becomes transcendent, and this form of suffering is exclusive to the human species, being the origin of other ills, of inner order and interpersonal order. In this period, the anxieties and the worldly desires are losing motivation. One feels an immense need for rest.

Experiencing the suffering makes human beings closer to each other, leading up to self-knowledge, so that one can live in greater fullness. It is task difficult to understand that the existential suffering is a component of our dynamic of living, and, on the contrary, seeing it only as a retribution or a punishment. On the other hand, it is only fair aspiring to joy and contentment; however, it is to them that if you want to stick, looking for disregarding its opposite - the afflictions.

Thus, the fact that man, in his virtual nature, being prone to a future increasingly high, it is understandable the idea of successive acts of solidarity in indestructible enhancement through truth and good, and who may not retreat before the regret stimulating and savior of the mistakes of the past.

Suffering has a broad meaning and refers to a way of suffering that is not necessarily related with the physical or somatic of the human being, but with the scope of their interiority and all levels of experience which they imply.

The human being suffers from suffering from various perspectives. On the one hand, there is the suffering abroad, which has the body as a physical dimension. This type of suffering becomes visible to our eyes, so the harmony of the human being with the whole of nature is total, because, in this, there is the feeling that something is wrong with the functioning of the body.

On the other hand, there is the suffering within the human, being the psychological, social and spiritual aspects. The anguish, despair, dread, fear, guilt, pain, pleasure and satisfaction are habitual ways of inner suffering. These forms of suffering has their center of gravity in the interiority of the human being, but is expressed in the face, the voice, the look and the set of corporeality.
Currently, on can see the inability to understand the real meaning of suffering. Today we live in a "medicalized" world; the management of pain presupposes the medication of suffering with the indiscriminate use of anxiolytics, to help in the relief of nuisance taxes by suffering, at the same time, decreases the enjoyment of simple pleasures of everyday life.

Our technological and industrial reality can question: Is man responsible for his behavior under the impact of suffering? Is there a God all-powerful, which harmonizes the existence of suffering?

If that God do not exist able to compensate for the suffering of the human being, nobody could respond by set of injustices and sufferings found by life, and with this, only endure or desist18.

**Nursing: a holistic view of suffering**

The essence of nursing is caring, this manifests itself in the preservation of healthy potential of the human being and depends on an ethical conception that contemplates life as a valuable asset in itself, and to be a concept of broad spectrum, can incorporate multiple meanings and manifestations.

Care means selflessness, kindness, diligence, zeal, attention, and materialized in the context of life in society. Caring involves interaction with the purpose of helping, usually in adverse situations, whether in personal dimension, or in social. It is a way of being with the other, with regard to the special issues of life and of their social relations, among these the birth, the promotion and restoration of health and death itself11.

Thus, the attempt to understand the value of Nursing care requires an ethical conception, respect to each other in their complexity, choice, individuality and at the same time pluralities, all characteristic of man.

The man, being vulnerable, needs a directed care their authenticity, uniqueness and truth. Nursing actions must understand the patient's weaknesses, because, from their identification, is that care will be directed to the needs of each one.

Caring in Nursing consists in efforts for the other, aiming to protect, promote and preserve, helping people to find meanings in disease, suffering and pain, as well as in existence12. It has as an essential premise to attempt to avoid that the other suffers, or that, to identify this suffering, carrying out measures to eradicate or minimize the suffering, being very important the attitude of understanding of who cares. This happens because hospitalization is distressing, by highlighting the fragility to which we are subject, as well as physical and emotional exposure.

The condition of sickness produces feelings such as disability, dependency, insecurity and feeling of loss of control over oneself. The sick face hospitalization as a factor of depersonalization by the fact of recognizing the difficulty to maintain their identity, intimacy and privacy. The hospital environment is stressful by several factors, mainly the sick, losing control over the affects, and those which they depend on for their survival13.

The Nursing care has two distinct spheres: an objective, which refers to the development of techniques and procedures, and a subjective, which is based on sensitivity, creativity and intuition to take care of another, the latter being quite relevant, because the object of care of Nursing is the human being14.

Suffering is inherent to life. Even in the absence of disease, it accompanies the human being throughout their journey, and is up to them such as experiences, how they appears and manifest. Every human being suffers, especially when they’re ill, and at this stage, it is important to have at their side people available to take care, in order to understand this moment, because the suffering is part of human existence.

The cure of disease and the relief of pain and suffering from the birthplace of Hippocratic Medicine are accepted as the objectives of medicine. The disease destroys the integrity of the body, and the pain and suffering can be factors of disintegration of the human being. While today Medicine is even well equipped to combat pain, when it comes to dealing with suffering, it is still very rudimentary6.

Suffering occurs when there is a possibility of an imminent destruction of person and continues until the threat of disintegration pass or until the integrity of the person is restored again in another way. It is pointed out that “direction and transcendence” offer two lanes such as pain associated with the destruction of a part of the personality can be decreased. Giving meaning to condition suffered, often reduces or even eliminates the suffering associated with it. Transcendence is probably the most powerful way in which someone can have their integrity restored, after having suffered the disintegration of personality15.

Suffering is the experience of powerlessness with the prospect of unrelieved pain, disease situation that leads to interpret life devoid of meaning. Thus, suffering is more complex than the pain and, fundamentally, synonymous with quality of life diminished, occurring in situations such as those of serious diseases and prolonged that cause social disruption in the patient’s life and consequently their families.

In the interim, it is understood the suffering from a broader concept, may be defined, in the case of illness, such as a feeling of anxiety, vulnerability, loss of control and threatens the integrity of P7.

In Homo patiens suffering is abandonment, it is more comprehensive and global than the pain, and is more profound. Suffering is a situation in which man finds himself before or after, a matter pending for all, a necessary step to maturity18.

Therefore, there is no way out for the state of suffering but recognizes it, looking at it from the front, with the courage to admit this fragility. Suffering leads to reflection, self-awareness and ability to surprise us with overcoming, because it hurts, but makes us grow.

The goal is not to flee from suffering, but feel it fully. Talk about it a little, if necessary, as a way to let it go, leave us and follow its path. The important thing is to be aware that the mind does not use suffering to remain attached to the role of victim, whether of fate, or anyone in particular. Feeling sorry for oneself and wanting to get attention by telling their story to the whole world, it will only make the person remain paralyzed in pain. The flame of consciousness is the only defense that has to go through suffering, because it helps people to pass through the dark tunnel and find the light that was always waiting for the individual who suffers9.
Suffering is not alien to human life, but it is completely present even under very different forms and modalities, it is an experience that accompanies human life throughout its course. Man suffers precisely because he is vulnerable and when he suffers or when he’s ill, he perceives clearly his extreme vulnerability and heteronomy8.

The most common point of suffering is a disease, because it is there that the person experiences the physical pain and emotional at the same time. When man falls ill, he comes to realize his vulnerability. Thus, one should always take into consideration the factors that led the person to that state; how the person deals with the situation and the type of support they receive to reverse it.

Suffering and sickness they relate to one another. Disease leads, in general, to some type of pain or suffering. On the other hand, there is suffering that does not directly relate to disease, such as the suffering of loneliness, of old age, of romance, of nostalgia; however, do not relate directly to the experience of becoming ill, yet that can converts into pathological type experiences8.

It is important to recognize that the suffering does not have a unitary manifestation for individuals, although it is the same for a family, culture or historical period. What is suffering for one is not necessarily for another. Hence, the importance of understanding that, in the quality of nurses, we must be prepared to take care in this perspective of complexity of the human being and of its infinite possibilities and potential, at the same time offer a care that respects the uniqueness and, which also is integral and holistic.

This basic condition of the individual in the world cannot be defined only from the event, because the suffering depends on the signification that assumes in time and space, as well as the body that it touches. Man suffers because he begins to realize his finitude, which is suffering a dimension not only psychological, but mainly existential7.

Reflecting on this condition is a fundamental point, because we live in a time dominated by technological “medicalization”, in which escaping the pain is the rational and normal way. Thus, suffering is not allowed, as something that was in the human domain. Of course, this mindset takes its meaning from suffering intimate and personal and transforms it into a technical problem. We are in a secularized society in which the suffering has no sense and for this reason we are unable to perceive the meaning of suffering8.

Human Suffering and Nursing care

In the art of caring, consideration of suffering is essential because one can only take proper care of a human being, recognizing the double level of suffering, namely the exterior suffering and interior suffering. One can fight the pain from outside with therapy, pharmacology and the technological instruments, but the interior suffering calls for a distinct attention and human presence, the right word and the hard exercise of dialog9.

In this context, Nursing cannot overlook the suffering; we have to break the trend of caring in focus only on physical symptoms, as if they were a single root of troubles for the patient. Thus, in relation to care, must be valued important aspects, such as the dialog, listening, sensitivity, tenderness, empathy, because the human being is a being in search of meaning. These are necessary conditions that the nurse should have to take care of someone who is suffering.

Helping to face suffering, without lies, is important, because the suffering also leads to self-knowledge, overcoming. It has the role to prepare, because the human being, despite the uncertainties, resists and is hopeful that this moment is a step to be addressed and that it will not help to escape it.

There is also an interface of the suffering to who is cared for with who cares. The nurse is no stranger to suffering and he needs to understand how a being is vulnerable to transcend and hence have better conditions for caring and monitoring. Therefore created to care and be care for and sometimes active, sometimes passive in this relationship.

In an approximation of the humanization of care of pain and human suffering, we have gone through a profound crisis of humanism, because we speak insistently of dehumanizing environments, technically perfect, but without a soul and human tenderness, both for those who are cared for as to who cares.

The human person more vulnerable by the disease has ceased to be the center of attention and began to be manipulated as a function of a particular order, and may be transformed into a learning object, the status of the researcher, or be guinea pigs for research, situations that compromises truth ethics that things have price and can be exchanged, changed and marketed, but people have dignity that must be respected8.

Hospital technology (equipment and medications) has the objective of increasingly trying to prolong life, but makes us reflect also until that point does not prolong the suffering. One must have balance in the relationship of care that will not break the boundary between alleviating suffering and yet fostering it. One must not lose the focus of respect for human dignity and the ethics of care.

The biomedical technological development establishes what is called triumph of “medicalization”, leading to intervention procedures, the prolonged therapeutic obstinacy. This can result in the perpetuation of interventions and treatments that do not add substantial benefits for patients.

Besides an Anthropology of care, there is, either explicitly or implicitly, an ethic of care, whose purpose is to regulate the action of caring ethically, ie, under a rational perspective to analyze and analyze what it means to care for in a virtuous manner. The action of caring outlines serious and profound challenges of moral character and ethical, being absolutely essential reflect around aspects such as: freedom, intimacy, justice and wellness8.

Contemporary Medicine has achieved a technical development so impressive that health professionals tend to consider an imperative its incorporation, running-if constantly the risk of claiming it as being an ethical requirement. Thus, what may have happened is a reversal of the relationship between Medicine and technology: no more is at the service of the first, but, on the contrary, the Medical service of the technology.

It is in this context of contemporary Medicine that arises the modern movement hospice, emerging within an ethos that is based on compassion and a type of patient care that one wants...
to be global, extending to the care of the family, in an active search for measures to alleviate the distressing symptoms of the disease, in particular, the pain, and which can give meaning to the suffering of the patient, braving death as part of a natural process of human biography and not as an enemy to be "obstinately" faced.

It is important to realize that the care is not a one-way process, as there is a relationship between two human beings. O human being endowed of technical-scientific, humanistic, and available for effective care and another being that is in need of help. Thus, one will feel satisfied with the care and affection received and certainly will be thinking positively about the fact and emanating a corresponding feeling, which certainly beneficially reflects in themselves.

FINAL CONSIDERATIONS

In a context of increasing "technologization" care, urgent recover an anthropological vision, holistic care to the human pain and suffering in its various dimensions, ie, physical, social, mental, emotional and spiritual, which combines technical-scientific and human competence.

One of the goals in Nursing care is precisely alleviating the human suffering caused by disease; and with the amazing technological progress, arrived to illusion us to thinking that the technical management of the pain would be the solution. However, regardless of being a technical problem, the pain and suffering are in the ethical/human sphere and should be considered in its various interfaces.

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