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ABSTRACT

This study aims to describe the construction of knowledge as a component of professional power in gerontological nursing in Brazil, between 1970 and 1996. It is a descriptive study with qualitative socio-historical approach that used oral history and was developed with 14 nurses, who are pioneers in the area. The categories found are: 1. The origin of gerontological nursing studies; 2. The inclusion of gerontology in the professional education; 3. The relevance of knowledge to the specialty. Historical understanding allowed to learn the efforts engaged for the development of scientific production in the area, by detailing the creation of research groups and the difficulties found in the professional education. The connection between knowledge and professional power is a unanimous discourse among the pioneer nurses, confirmed in the efforts made by them for the development of expertise in the area.


RESUMO

Este estudo objetiva descrever a construção do conhecimento como constituinte de poder profissional na Enfermagem Gerontológica no Brasil, no período de 1970 a 1996. É um estudo descritivo, qualitativo, com abordagem sócio-histórica, que utiliza a história oral temática e se realiza com 14 enfermeiras pioneiras na área. As categorias encontradas são: 1. Os primórdios das pesquisas; 2. A inserção da gerontologia na formação profissional; 3. Relevância do conhecimento para a especialidade. A compreensão histórica permitiu conhecer os esforços para o desenvolvimento da produção científica na área, ao detalhar a criação dos grupos de pesquisa e as dificuldades encontradas na formação profissional. A relação entre o conhecimento e poder profissional é discurso unânime entre as enfermeiras pioneiras, confirmado nos esforços empreendidos por estas para o desenvolvimento do conhecimento especializado na área.


RESUMEN

Este estudio tiene como objetivo describir la construcción del conocimiento como constituyente del poder profesional en la Enfermería Gerontológica en Brasil, en el periodo de 1970 a 1996. Es un estudio descriptivo cualitativo con abordaje sociohistórico, que utiliza la Historia oral temática y se realiza con 14 enfermeras pioneras en el área. Las categorías encontradas son: 1. Los inicios de las investigaciones; 2. La inserción de la gerontología en la formación profesional; 3. Relevancia del conocimiento para la especialidad. La comprensión histórica permitió conocer los esfuerzos para el desarrollo de la producción científica en el área, al detallar la creación de los grupos de investigación y las dificultades encontradas en la formación profesional. La relación entre el conocimiento y poder profesional es discurso unánime entre las enfermeras pioneras, confirmado en los esfuerzos emprendidos por estas para el desarrollo del conocimiento especializado en el área.


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INTRODUCTION

The development of studies, particularly in the last decades, has given prominence to nursing, because of the excellence of graduate programs, projects funded by support agencies, the quality of the product of their actions and research results, as well as the representations in national and international organs(1). Among the themes of this scientific production, there are studies regarding the Brazilian elderly population, which illustrate the search for knowledge and improvement in the care quality provided to this population group.

The health care of the elderly and their families is an issue that has been increasingly studied by a growing number of nursing professionals, due to the awareness gained regarding their role in a context of general need for social and health resources, in order to assist this group(2). These factors have encouraged nursing to develop the expertise, which provides instruments to professionals in the qualified care of the elderly population and the necessary scientific grounds for the construction of this specialty.

In order to guide the comprehension of this movement, the authors used the theoretical framework of Eliot Freidson, a master in the sociology of the professions, who indicated that “consultation or practical” professions offer services aimed at the resolution of problems to lay individuals. Thus, the practical profession has the duty to apply knowledge to the daily life, and must be, somehow, associated with the daily living and the average individual(3).

The first efforts engaged to study the aging process in nursing in Brazil date from the 1970’s, with few productions and the establishment of the first nursing study group(4). In the following decade, there was poor scientific production, but continuous, in graduate specialization, master and doctorate programs(5). Over the last three decades, these efforts were intensified, with peaks of production of theses and dissertations in nursing, concomitantly to periods of greater discussion regarding the theme in Brazil, which were those when laws and federal policies were carried out(6). Knowledge, as a component of professional power or status, is discussed by Eliot Freidson, who states that a profession gains occupational autonomy based on the allegation that its work is guided by esoteric and complex knowledge, which makes it impossible for lay individuals to evaluate it, as well as to share it. However, knowledge itself does not provide special power, as only exclusive knowledge provides power to its holders(7).

The discussion regarding the relevance of knowledge for this specialty required the development of a historical retrospective of its origins, which allowed to understand the context of this construction and the perception of the nurses as for the relevance of knowledge for this profession. In the light of this, the present study aimed to describe the construction of knowledge as a component of professional power in gerontological nursing in Brazil, in the period between 1970 and 1996.

This period of time corresponds to the decade of establishment of the first study group in Brazil and the first Brazilian Geriatric and Gerontological Nursing Conference (I Jornada Brasileira de Enfermagem Geriátrica e Gerontológica).

METHODOLOGY

This is a descriptive qualitative study, with socio-historical approach, using the thematic oral history. Oral history is a study method (historical, anthropological, sociological etc.) that privileges the production of interviews, and generates a source of reference (interviews) to other studies as a result(8). Given the fact that it is based on a specific and pre-established theme, the thematic oral history brings into question the clarification or the opinion of the interviewee regarding a defined event(9).

Data were collected with the use of semi-structured interviews, in the period between May and November of 2009. Study subjects were 14 nurses, who were pioneers in the study of the aging process between 1970 and 1996. These “pioneers” were identified starting at the interview zero, with Prof. Ph.D. Lúcia Hisako Takase Gonçalves, professor of the Federal University of Santa Catarina (UFSC), founder of one of the first nursing study groups regarding the aging process, in 1982. It is important to highlight that not all researchers who met this criterion were included in the sample, because of geographic distances and difficulties to contact them and schedule interviews.
The study was outlined in the resolution 196/96, of the National Research Ethics Committee of the Ministry of Health, being approved by the Research Ethics Committee of the Federal University of Santa Catarina, under the protocol number 014/09 FR-241038. The subjects were informed regarding the study purpose and accepted to participate by signing the Free and Informed Consent Form. All interviewees renounced their right to anonymity, since this is a socio-historical study, and, therefore, it is fundamental to identify all pioneer nurses in the study of the aging process in Brazil.

Data analysis was performed using the thematic content analysis technique (10), in which signification is inferred from the text and allows its interpretation under the focus of the theory that guides the study. This technique also allows to learn a certain reality, through the communication of individuals who are bonded to it. Three analysis categories were identified: 1. The origin of gerontological nursing studies; 2. The inclusion of gerontology in the professional education; 3. The relevance of knowledge to the specialty.

RESULTS

The origin of gerontological nursing studies

The development of this specialty found significant obstacles due to the lack of researchers and references in the aging process area in the decade of 1970. In association with the inexistent exchange of experiences among nurses, these pioneers in the area felt isolated, and faced difficulties in the development of their studies and autodidactism.

They struggled so that scholarship would be mine. Why? Because they were interested in my project. [...] Why did they want it? Because they had never seen a way to take a stand in favor of the elderly. (Prof. Ph.D. Maria Jalma Duarte)

So the access to the references, to the comprehension of the aging process, understanding the differences of this person at this moment in life, understanding his clinical, social and emotional differences, were all very complicated. (Prof. Ph.D. Sílvia Azevedo dos Santos)

Given the lack of scientific studies and books at that time, the reference used by the pioneers was sometimes unanimous. One of the most frequently mentioned books was “Nursing and the aged”, by Irene Mortenson Burnside, from 1979. The difficulty of access to the national bibliography was partially compensated by international publications, obtained with the support of colleagues who had been to international events or traveling abroad.

Aimed at the construction of knowledge, the pioneer nurses innovated by taking stricto sensu programs, being the leading figures of the insertion of the theme, and providing reports regarding the initial difficulties:

So we worked on the issue of the constipation of the elderly, pressure ulcers. In the case of pressure ulcers, we worked with brown sugar, refined sugar, and it was just empirical. We watched, observed, monitored, but we did not receive any orientation towards researching. (Prof. Ph.D. Tânia Menezes)

If, currently, the reflection is no longer limited to the concern with the scientific publication of the studies developed, the criticism now relies on the purpose of these studies:

Look, our studies are diagnostic. There aren’t many studies regarding intervention. And in the gerontology area it is even worse. (Prof. Ph.D. Maria José D’Elboux)

There is a current need for more creativity among nurses, [...] a little more creativity from us to create new things, to propose new ideas to the care of the elderly in the health system. (Prof. Ph.D. Ângela Albuquerque)

I feel that we need to develop more theses, in order to apply our knowledge. And the nurse who is involved must know what is being studied, so that he may use this knowledge. (Prof. Ph.D. Rosalina Rodrigues)

The development of studies is intrinsically related with the study groups, which promote the projects and aggregate researchers and students.
who are interested in the theme. The study findings reveal that, in this aspect, nursing is also seen as the pioneer in the area, with records of the establishment of the first study groups in those decades. These groups were determinant for the participation of nursing in events in the form of lectures, round tables and suggestions of themes regarding the elderly, which pioneered the professional space in the geriatric and gerontological area.

The inclusion of gerontology in the professional education

Similar to the difficulties pointed in the development of studies regarding the aging process, teaching the theme also involved overcoming obstacles. The first challenge was the lack of content in the education of the professionals, including the candidates to professors of the discipline, which originated autodidactism also in the pedagogical methodologies adopted by the pioneer professors in the area:

And it was a content, I’d say a very primary one. [...] So, there was no geriatric content, it was something… how can I say? As professors, we also end up approaching the subject and the object. That empirical thing. We learned from mistakes and successes. (Prof. Ph.D. Ana Cristina Brêtas)

These documents, the National Elderly Policy, the Statute of the Elderly, initially served as tools, enabling us to fight within the institution to include the health of the elderly into the contents of the curricular program (Prof. Ph.D. Marilene Portella)

The difficulties evidenced took place due to the resistance of their peers towards the inclusion of this content into the curricular program of several higher education institutions (HEI). Moreover, it is possible to perceive, in the statements, that questions discussed for the implementation of this discipline still remain unsolved nowadays, such as the focus on aging as a phase of the vital cycle and the need for a specific or cross discipline to the curriculum.

Despite the difficulties indicated, the introduction of the content regarding gerontology in undergraduate courses began in several higher education institutions (HEI), in the studied decades. Some intentions were initiated in the late 1980’s, but the chronological order reported by the pioneers interviewed points out the 1990’s as the period of implementation of specific gerontology disciplines. Some examples of HEI where this occurred are the USP/Ribeirão Preto, the Federal University of Bahia (UFBA), the Federal University of São Paulo (UNIFESP), the University of Passo Fundo (UF), the Pontifical Catholic University of Rio Grande do Sul (PUC-RS) and the Federal University of Santa Catarina (UFSC).

Concomitantly to the movement of inclusion of the discipline into undergraduate courses, encouraged by the research, specialization courses were also established in the 1990’s. There was a higher number of multiprofessional courses, however, some courses specifically approached the gerontological nursing area, whose target public was nurses from the UFBA and the UNIFESP. The place for the inclusion of these courses is defended by the pioneers:

[...] there is the need to create a specialization course in gerontological nursing, so that we can work with nursing theories, with the systematization of nursing in the home environment, do you understand? This is nursing technology, and it is not relevant to be taught to any other professional. (Prof. Ph.D. Célia Caldas)

After the struggle of the pioneers in the area to implement the specialization courses, they had to face another reality: the lack of interest of nursing professionals:

There were way less nurses than any other professional. Funny, isn’t it? Our nurses didn’t come often, but other professionals used to come. (Prof. Ph.D. Clarice de Oliveira)

The National Elderly Policy(11) promoted courses for caregivers, such as in Bahia and in São Paulo. In Bahia, the courses for caregivers qualified 180 people, including nursing assistants, nursing technicians and elder companions.

The promotion of research and the guidelines of several worldwide and national discussion forums redirected the attention from the health of the elderly to the promotion of their health and quality of life. This conjunction drove the academy to a new area of activity: the extension. Nursing played a leading role in the area of extension, both with projects of university professors associated...
with several HEI, senior open universities, and care projects for the population.

Among the several experiences with senior universities, it is worth mentioning the experience of the Senior Study Center (Núcleo de Estudos da Terceira Idade - NETI) at UFSC, established in 1983 by the nurse Prof. Lúcia H. Takase Gonçalves and the social worker Neusa Mendes Guedes, and that of the Open Senior University (UnATI) of the State University of Rio de Janeiro (UERJ), in 1993, by initiative of Dr. Américo Piquet Carneiro, who had nurse Célia Caldas in his founding team. Another experience reported was from Passo Fundo: the establishment of the Regional Center of Senior Studies and Activities (Centro Regional de Estudos e Atividades para a Terceira Idade - CREATI).

An uncommon experience of basic health care activity was led in Salvador, by Marilene Baquero, Clarice Oliveira and Alyde Vieira, nursing professors of the Federal University of Bahia, who had a partnership with the Department of Labor and Social Action. Established in 1992 and completed in 2002, this project was coordinated by Prof. Marilene Baquero, and had a singular social impact in Salvador.

This social visibility achieved in Salvador, mentioned and sought by the professions, was provided by reporting the activities of this project: nursing consultation and the request of basic and specific laboratorial exams, for instance densitometry and ultrasonography, which brought reasonable resolvability to a practical profession such as nursing.

The relevance of knowledge to the specialty

The analysis of the origin of the construction of knowledge in gerontological nursing makes it important to consider the perspective of the professional construction as a specialty, provided by Freidson, by pointing the relationship between knowledge and professional status.

In order to do so, it was necessary to learn the perception of the pioneer nurses as for the relationship between knowledge and professional competence and autonomy. The visibility of this relationship was unanimous among the interviewees. Peremptorily, the collective statement was the need for the development of skills to compose the professional competence.

You must have knowledge, technical skills and the interest to search, to discover new areas that still haven’t been explored. It is necessary to explore, to study [...]. (Prof. Ph.D. Lúcia Takase Gonçalves)

Nursing is the only one of these disciplines that has the knowledge and that can handle the complexity of the aging process, because, in terms of education, our focus is on care. And with the older adult, the biomedical model does not work. (Prof. Ph.D. Célia Caldas)

Because if I deal with frail individuals I have to work in the perspective that I may not have [...] an improvement in their status, but I have to provide quality of life so that he may experience good finitude. (Prof. Ph.D. Aparecida Yoshitome)

For the interviewees, there is a direct relationship between knowledge and technical competence, which allows autonomous service, outlined in the complexity of the aging process and distanced from the curative model. This perception of the relevance of knowledge for the professional power and autonomy was the focus of discussions:

One of the questions that concerns me in nursing is that, in a Foucaultian way, it does not relate knowledge with power. And it is often at the edge, not due to lack of knowledge, but that of arguments. And then I insist, it involves technical, scientific and political arguments to say that knowledge makes sense. (Prof. Ph.D. Ana Cristina Brêtas)

Nevertheless, despite the recognition of the advance of studies in the aging process area, the quality of the care delivered by these professionals is a reason for concern among the pioneers:

That is because, most of the times, he does not know how to deal with the elderly, because he wasn’t qualified for that. So, when they search for it, it is much more: “Help me solve this problem, because for me it is a problem”. It is because this “problem” is hitting on his door all the time. (Prof. Ph.D. Yeda Duarte)

The main reason for the investment of studies in gerontology was the reality of the demographic transition. For these pioneers, knowledge is currently essential, both in the hospital, in the outpatient setting and in home care, providing a different view, the “gerontological view”, which will differ symptoms of senescence and senility.
DISCUSSION

The data presented include the historical report of the construction of knowledge in the gerontological area in Brazil. The statements confirm studies regarding the scientific production in the field of gerontology, as they state it was initiated in the 1970’s[12], the contribution of nursing since its origins[13] and that the Brazilian graduate programs aimed at aging started to emerge, mainly, in the end of the 1990’s[14].

The search for scientific knowledge, which guided the specialty since its origins, was motivated by the impact of the demographic transition in the national health services. This fact evidences and confirms the framework of Freidson, who stated that practical professions go through the test of solving problems presented by their public[9]. This rationality of problem resolution is portrayed in the criticism regarding the studies, at the point pioneers indicate the need to guide this specific nursing intervention by defining the singular competences and actions of the profession; in the concern with the socialization of the studies, articulating academy and care practice, subsidizing scientifically their working process; and in the need for innovation and creativity in the studies, as the profession, by being liberal, brings the application of new technologies and the rationality of the entrepreneurism.

The dimension of the historical importance of the creation of study groups in gerontological nursing is illustrated in a study regarding gerontology researches. It indicates, in the 1970’s, only one group with specificity in the theme of the elderly health, the Center of Studies and Researches of the Elderly (Nespi), in the nursing area, at the Federal University of Bahia (UFBA), and, in the 1980’s, only three, two of them in nursing: at the Federal University of Santa Catarina (UFSC) and at the University of de São Paulo (USP), campus of Ribeirão Preto[15].

This is a historical datum for nursing in Brazil. Between 1970 and 1980, there were four study groups with specificity in the study of the elderly, three of them in nursing. This fact demonstrates the pioneering nature and the importance of the contribution of nursing in the history of the construction of gerontological knowledge in the country, since such groups were implemented thanks to the personal efforts of the pioneer nurses, who composed the grounds for studies in the area.

The difficulties found for the implementation of the gerontology education were discussed in some studies[16,17], which already reported the poor gerontogeriatric knowledge of health professionals, the lack of harmony among most Brazilian HEI regarding the process of demographic transition, the lack of gerontogeriatric content in the curricular programs, and the inexperience of the professors in the area.

These facts are contextualized in the legislation of the nursing undergraduate education in this period, since the inclusion of the elderly as a content happened in the 1990’s, although pedagogical initiatives have been identified since the previous decade, because of the personal position of professors and HEI[18].

Nevertheless, the incorporation of the gerontogeriatric discipline in the nursing course has been happening slowly. A recent study[19] demonstrates that there were no significant changes in the scenario in the decade of 1990. The weak introduction of gerontological contents into undergraduate curricular programs makes newly graduated health professionals lack the minimum competences needed for the care of the elderly.

The reports regarding the resistance to the inclusion of the discipline into the undergraduate curricular programs must be the focus of discussions in the area, as Freidson states that education is certainly important, by establishing individually a common nucleus of knowledge and attitudes among the members of the profession[8]. Therefore, given the fact that nursing is a practical profession, in the context of demographic transition of the country, it becomes vital to include the theme in undergraduate courses, so as to form qualified professionals to offer specialized care to the elderly, contributing to the solution of health complications, promoting the health of the assisted population and favoring professional acknowledgement.

The speeches regarding the importance of the “gerontological view”, the change of the cure rationality, the concern with the education of human resources in the area and the orientation of studies towards practical aspects of the profession build a unanimous discourse among the pioneers, who relate knowledge with professional competence, and reveal the acknowledgment of the relevance of knowledge as a component of professional power.
FINAL CONSIDERATIONS

Despite the lack of orientation towards the development of studies in the beginning, the difficulties to find fields for data collection and the lack of advisors for their qualification in the area of human aging, the pioneer nurses provided a valuable contribution, with the establishment of the first study groups regarding the elderly. Based on that, they achieved professional visibility and promotion to the research, for the following generations.

The development of a specific knowledge faced resistance to the inclusion of the theme in undergraduate courses, the initial autodidactism of the pedagogical methodologies and the lack of interest of their peers in gerontology graduate courses. These obstacles have been replaced with the growing development of studies in the area and the nursing participation in extension projects, such as the senior open university.

The relationship among knowledge, competence and, consequently, professional power, attested by Freidson, constitutes a unanimous discourse among the pioneer nurses, confirmed in their efforts towards the development of expertise in the area.

The present study brings reflections to the Brazilian gerontological nursing regarding the role of researching in the consolidation of the specialty. Since nursing is a practical profession, professionals must be qualified, through theoretical and scientific principles, to develop a suitable professional practice to the needs of the elderly population in the country.

Therefore, there is a need to build care models in harmony with the resolvability of the problems existing in the care of the elderly, as well to urgently include the gerontogeriatric discipline in nursing undergraduate courses, for the development of technical competence, which is an instrument of professional power.

REFERENCES


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