

Cultural studies: new perspectives on research possibilities in nursing



Estudos culturais: possibilidades para pensar de outro modo a pesquisa em enfermagem
Estudios culturales: posibilidades para pensar de otra manera la investigación en enfermería

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ABSTRACT

Objective: To reflect on the research possibilities in nursing, especially in the field of cultural studies.

Methods: Theoretical-reflexive study based on research from the perspective of cultural studies and some aspects of the thoughts of Michel Foucault.

Results: The results expose research conducted by the Group of Cultural Studies in Health and Nursing Education of the Universidade Federal do Rio Grande do Sul.

Final words: Cultural Studies, as a trans-disciplinary field, allow reflection on the constitution of subjects and their relationship with the cultural demands of an era. As a theoretical framework, it can be used for the study of healthcare, especially nursing.

Keywords: Nursing. Philosophy in Nursing. Culture. Education. Methodology.

RESUMO

Objetivo: Refletir sobre as possibilidades de pesquisa na Enfermagem, sobretudo no campo dos Estudos Culturais.

Metodologia: Estudo teórico-reflexivo, baseado em pesquisas desenvolvidas na ótica dos Estudos Culturais que realizam uma possível articulação com alguns aspectos do pensamento do filósofo Michel Foucault.

Resultados: Expõe as produções do Grupo de Estudos Culturais na Educação em Saúde e Enfermagem da Universidade Federal do Rio Grande do Sul.

Palavras finais: Os Estudos Culturais, como campo transdisciplinar, possibilita refletir sobre a constituição do sujeito e sua relação com as demandas culturais de uma época. Aponta a possibilidade de tal referencial teórico na área da saúde, especialmente na Enfermagem.

Palavras-chave: Enfermagem. Filosofia em Enfermagem. Cultura. Educação. Metodologia.

RESUMEN

Objetivo: Reflexionar sobre las posibilidades de investigación en la enfermería, sobre todo en el campo de los estudios culturales.

Metodología: Estudio teórico-reflexivo, basado en investigaciones desarrolladas en la óptica de los Estudios Culturales que realizan una posible articulación con algunos aspectos del pensamiento del filósofo Michel Foucault

Resultados: Expone la producción del Grupo de Estudios Culturales en la Educación en Salud y Enfermería, vinculado a la Universidad Federal de Rio Grande do Sul.

Palabras finales: Los estudios culturales como campo transdisciplinario que posibilita una reflexión sobre la constitución de los sujetos y su relación con las demandas culturales de una época, apuntando a la posibilidad de tal referencial teórico a cuestiones del área de la salud, especialmente de la enfermería.

Palabras clave: Enfermería. Filosofía en Enfermería. Cultura. Educación. Metodología.

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■ INITIAL WORDS

Culture is a complex concept with different senses in different languages and, therefore, impossible to define. One way of understanding this concept is to qualify it as a set of human manifestations, in contrast to nature. It is often associated with acquiring knowledge and life practices considered better or superior. This sense of culture is also associated with what is defined as “high culture”, as opposed to “mass culture”, perceived as an aesthetically inappropriate and irrelevant expression and manifestation. Moreover, in the 18th, 19th, and 20th centuries, high culture was associated with harmony and beauty, as the maximum human expression, as opposed to mass culture, considered trivial and simplified. Cultural studies emerge in the manifestations of certain social groups who wanted culture sustained on democratic opportunities⁽¹⁾.

Cultural studies as a field of research began after World War II. The landmark of this concept was the text, “Schools of English and Contemporary Society” by Richard Hoggart, the first director of the Centre for Contemporary Cultural Studies (CCCS) of the University of Birmingham⁽²⁾. This text describes the historical background and contributes to the study of 20th-century culture and communication. It was considered innovative because it contained reports of working-class lifestyles in Great Britain. The aim of studies such as these was to provide insight into the social relations and the important role of communication in the production of culture⁽²⁾. Cultural studies in academic institutions are linked to literary and human sciences, sociology, arts, and healthcare. They characteristically enable different theoretical and political positions while jointly maintaining the commitment to analyse cultural practices from the standpoint of power relationships. The most frequently used theoretical fields range from Marxism and feminism, psychoanalysis, structuralism, and post-structuralism to postmodernism⁽³⁻⁴⁾.

Cultural studies do not have a distinct methodology, specific statistical analysis, or even an exclusive form of analysis to characterise the studies. The methods are ambiguous and can resemble a do-it-yourself collage. Therefore, the outlines of the concept of culture transpose the axes of erudition, artistic traditions or its hierarchy, opening a wide and versatile array of senses for the theme. The elitist assumption is abandoned and replaced with reading populations and common sense since, for cultural studies, knowledge juxtaposes the scheme of ideas and political and social relationships⁽⁴⁻⁵⁾. Thus, if our way of perceiving the world is culturally constructed, the meanings attributed to health, body, death, being a nurse or pain can also

be moulded in culture. In Brazil, cultural studies were established in the mid-1990s. The graduate programme in education of the Universidade Federal do Rio Grande do Sul (UFRGS) is one of the courses, where student and professors organised and used texts to discuss and employ the theoretical framework in research. Furthermore, the programme enabled the emergence of these studies in different areas of knowledge, both in and outside the UFRGS. In 2008, Grupo de Estudos Culturais na Educação em Saúde e Enfermagem (Group of Cultural Studies in Health and Nursing Education), “CULT”, was created. It is linked to the school of nursing and the graduate programme in nursing of the UFRGS. The aim of this paper is to reflect on this way of constructing knowledge, as well as register and present research possibilities in the area of healthcare, especially nursing, from the perspective of cultural studies⁽⁵⁾. This is a theoretical-reflective study that addresses research conducted in our group from the viewpoint of cultural studies, with emphasis on its possibilities in the field of nursing.

■ CULTURAL STUDIES: POSSIBILITIES IN NURSING AND HEALTHCARE

Cultural studies lead to thoughts of cultural artefacts such as images and stories educate people and produce new ways of thinking and doing. As regards the field of healthcare, they allow the examination of “all” social practices from a cultural standpoint⁽²⁾. This means social actions are meaningful to those who practise and those who observe them. Human beings use various systems to give meaning to things and to organise and regulate their conduct in relation to others. These systems guide our way of living, give a sense to your actions, and allow us to interpret the actions of others. Together, such systems or codes establish our “cultures”. Thus, we can say all social action is “culture”⁽⁴⁾.

With cultural studies, it is possible to break away from the metanarratives of modernity (the elites, the winners, the model family, the great works, among others) and from the certainty imposed as truths by the positivistic paradigm. From the perspective of cultural studies, the truths, perceived as historical constructs, are put under suspicion. Contemporary cultural formations and shifts in the political and economic scenario, family and lifestyle arrangements, generation patterns, social visions of men and women, and aging of the population create a unique scenario for research in this perspective. Analyses in this dimension assume subjects are the result of their cultures, i.e. culture produces subjects in a given historical moment, allowing us to analyse how we became what we are today and offering a theoretical basis for the deconstructions required

for healthcare studies⁽⁶⁻⁷⁾. In this context, nursing is the biomedical model introduced by Florence Nightingale (16th century) and recognised as science⁽⁸⁾. This model is characterised by the relationship between nurses and patients according to prescriptive healthcare protocols and productivity indicators. In spite of this modern and positivistic perspective of the professional organisation of nursing, it involves other sciences such as sociology, anthropology, and pedagogy, which provide new possibilities of reflecting on its problems and professional issues⁽⁹⁾.

Considering the possibility of combining cultural studies and some thoughts of the philosopher Michel Foucault, we turn our attention to one of the lessons of the linguistic turn: meanings are not loose in the world, waiting to be revealed. As a thing of this world, they exist from the moment they are enunciated. Discourses, however, are not combinations of words representing the things in the world; they are “practices that systematically form the objects of which they speak”^(10:56). Discourses can be construed as stories that, when combined, are presented as truths. These regimes of truth will establish ways of thinking in such a way that they make no sense outside this field of possibilities. Such discursive networks establish a set of meanings that, over time, will work within the symbolic framework through which we shall give meaning to our lives⁽⁶⁾. Therefore, our need to make sense of things means we are a cultural species. The point is to look at culture and think about how we give meaning to objects and practices. We transfer meanings to different contexts in order to give a new meaning to them.

Research in the Group of Cultural Studies in Health and Nursing Education

The Group of Cultural Studies in Health and Nursing Education (“CULT”) produce trials and research, mostly in the form of dissertations and theses. The group gathers researchers in the area of nursing who conduct cultural analyses in the field of healthcare and nursing education, based on contemporary cultural studies and on the post-structuralism perspective with emphasis on Michel Foucault.

The corpus of analysis used by the CULT to conduct most of its research consists of films, internet, newspapers and magazines, photographs, public policy manuals and other cultural artefacts, as well as different methodologies and research technique such as speech analysis, document analysis, focal group, ethnography, and interview and oral history to understand social relationships and practices, especially those dealing with nursing and health. The research results are published in national and international

journals in the fields of nursing, education, social sciences, and collective health. Below, some productions within the framework of cultural studies conducted by the CULT, supported by Michel Foucault’s conceptual tools, from 2010 to 2014.

Câncer corpo e cinema: lições de Hollywood sobre adoecer e morrer⁽¹¹⁾ (published with the alternative title, Cancer, body and movie picture: Hollywood lessons about getting sick and dying) sought to identify how the body of cancer patients is presented in Hollywood films with adult characters in advanced stages of cancer. Based on cultural studies, in the post-structuralism form, the text shows how media teaches us to look at and care for the cancer patient since discovery of the illness to death. The author uses cultural analysis based on the notions of speech and subjectivity proposed by the philosopher Michel Foucault to build three lessons from Hollywood on getting sick and dying and shows how cinema serves as a cultural educational tool that produces subjects who see the sick body in a certain way, teaches subjects to take care of that body and die of cancer, and provides clues on how we learned to relate to the disease from the artefacts of media⁽¹¹⁾.

Eu decido meu fim?: a mídia e a produção de sujeitos que governam sua morte⁽¹²⁾ (published with the alternative title, I decide my end?: the media and the production of subjects that govern his death), proposes to analyse how the discourses in Brazilian informative magazines propose a way of governing the end of life, i.e. the production of subjects who govern their death. The corpus consisted of reports from *Veja* and *Isto É* magazines from 2002 to 2012 analysed with the tools discourse, archive, power, and government⁽¹²⁾. The media is presented as a place of production and circulation of truths that produce thought and practices about death in the contemporary world. The medical discourse emerged as an authority in the event, while nursing barely appeared in the reports; when it did appear, it was linked to body care with no mention of its strategic role in palliative care and home care policies. Death at home is presented as a biopolitical strategy produced by the state that gains legitimacy as it circulates in the pages of magazines. Quality of life at time of death appears as discipline to be followed or as a goal to be attained. Thus, magazines produce what we call the end-of-life curriculum, teaching and propagating the acceptance of death, and evaluating readers according to certain tools that enable them to make decisions, such as death-related decisions⁽¹²⁾.

The dissertation, *Entre o delito e a loucura: a enfermagem no manicômio judiciário*⁽¹³⁾ (published with the alternative title, Between crime and madness: nursing in a forensic psychiatric hospital) studies the disciplinary devices

used by nursing professionals at the Instituto Psiquiátrico Forense Doutor Mauricio Cardoso in Porto Alegre. The author based the study on ethnography to produce and analyse data with disciplinary devices used at the institution to normalise the criminally insane and make them fit to live in society. The dissertation addresses the problems of the nursing professionals and portrays the criminally insane as a historical construct. According to the study, when nursing was inserted in this field, it chose to follow a normalising discourse and replicate the approach of prison officials. Nursing workers who had prison officials are their “tutors” retain models of this work when they organise and distribute places to control the bodies of patients. Moreover, nurses spent more time organising and “taming” patients in an attempt to use all the space and time to fabricate the type of patient the institution desired, and this desire was rarely questioned by the nursing professionals⁽¹³⁾.

In the doctoral thesis entitled, *Melhor em casa? um estudo sobre atenção domiciliar*⁽¹⁴⁾ (published with the alternative title, Better at home? study about home care) addresses the problematic relation of home care to acquire the knowledge and learn about the possibility conditions supporting the discursive network. The study, of genealogical inspiration, analyses legal documents such as public policies, decrees, ordinances, and resolutions, referring to home care and published in the official gazette from the beginning of the 20th century. The Foucauldian tools used were power, governmentality, biopolitics, archive, speech, norm, and device. These tools were used to create analytical units in the study of the continuity and discontinuity home care in Brazil, especially in the 20th century. In the thesis, the main characteristic between the analysed policies was discontinuity; if home care was used in the early 20th century to isolate patients from healthy individuals, it was only due to the devastating communicable diseases of that time. In the industrialisation era, in the middle of the last century, when workers were essential to move machines, it was necessary to control absences at work since the advent of the union movement had granted them the right to get sick. Thus, the state agent, in this case, the physician, would visit the households to check on absent workers. Given the increase of chronic degenerative diseases and the hospital “crisis” in the study period, hospitals needed to free beds in high-technology units and used home care as a way of caring for patients with chronic or incurable conditions. This context led to the creation of the family health strategy, an instrument of biopolitics, in which nurses assume the task of inspecting, monitoring, and controlling patients and their families by (re) producing a government of the population proposed

by the policies of the Ministry of Health⁽¹⁴⁾. The thesis demonstrated that the priority of home-care policies is not people, but rather the economy⁽¹⁴⁾.

■ FINAL WORDS

We sought to reflect on the way knowledge is constructed by pointing out other ways of looking at research objects in nursing and placing certain truths often considered indisputable in our study field under suspicion. The common characteristic of the thought of philosopher Michel Foucault and cultural studies is an opening of thought. This characteristic and the possibility of articulating cultural studies with health issues enables us to deal with a wide range of institutions, practices, and productions operating in current societies and to reflect on the effects of such artefacts on the subjects who live in these societies⁽⁵⁾. These and other works produced by our research group have looked at cultural artefacts, such as media, images, and manuals, and suggest that their discourses intend to guide conducts and determine ways of life.

The trajectory of this theoretical and methodological perspective was based on dissatisfaction with disciplinary boundaries and proposes an interface between the different disciplines to configure a field where they can connect and enable the study of the cultural aspects of society, especially its historical determination. In contrast, by addressing a multitude of research objects, cultural studies are concerned with analysing power relationships and presenting different aspects of culture, seen here as a way of life. We believe that words have history and produce certain senses and effects that, in the case of media, can be deducted by the textual analysis of the discourses produced by this same media.

This field of study is particularly relevant to healthcare since it can extend the issues and problems that arise in healthcare-related debates. Different policies, artefacts, and discourses circulating in the area can be questioned and constituted as objects of studies from the perspective of culture to produce analyses that produce meaning, immersed in networks of power and truth, and become discourses that circulate and legitimise certain representations on how to be sick or healthy, how to be a mother or father, and how to be a caregiver or healthcare professional.

We believe the works of the CULT have provided a fresh outlook on subjects such as cancer, death, mental health, and home care and have promoted cultural analyses used to criticise and mobilise updated concepts and new forms of research.

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