

The authors respond

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We would like to thank our panellists, who with their comments enriched our reflections on the dissemination of qualitative health investigations, besides addressing important elements to the analysis presented in the article under discussion.

The three debates acknowledge that health and disease are not exclusively biomedical conditions for which investigations based solely on the quantification and generalization of data from lesions might suffice.

By taking health and disease as complex social experiences of an individual's lifetime, both historically and culturally situated, the panellists point out the importance of research strategies that seek to better capture these dimensions.

The analyses on our discussion about the implicit or explicit limits to publication of articles based on qualitative studies in academic health publications undoubtedly contribute to the better understanding of the complexity inherent to the human phenomena related to health. Moreover, they encourage the dialogue between researchers in the field with different origins and backgrounds.

Thus Minayo begins his debate, retaking the issue of scientificity of qualitative data that is so questioned by those who defend that the objectivity of science is synonymous to neutrality and mathematization. The reference to thinkers who postulate the world lived as a product of the human action and interaction is brought up as an epistemological basis for the scientificity of the data generated through qualitative methods. This recourse also serves as the basis for generalization, another pillar of the idea of scientificity in contemporary society. Arguing that generalization is not the same as statistical representativeness, the author reminds us that any human experience is made possible through the incorporation by the subjects of the set of symbols, signs and meanings that give significance to the facts and objects of the world, allowing experience to occur. In this issue of generalization, Minayo and França Jr. converge, since both agree that the interpretations of qualitative studies can be generalized, but with careful theoretical and methodological rigor.

Aside from the narrow debate that puts the qualitative and quantitative approaches in opposition in an evaluative manner, Minayo concludes his debate addressing a sensitive and eventually uncomfortable matter: the quality of the manu-

scripts. Bringing her extensive editorial experience, the author lists some of the main misconceptions that contribute to some articles derived from qualitative researches to be rejected, even by publications that do not have prior restraints to the publication of manuscripts based on this approach. Considering the lists presented, we would like to consider the hypothesis that perhaps some of these misconceptions are due to the misunderstanding by some of these authors of what science means, of the theoretical foundations that guarantee the scientificity to qualitative research, and also of the significance of doing a research and publishing its results. It is also important to mention the hypothesis, no less relevant, of the pressure on post-graduate programs to publish the work of its students – as well as the illusion that a qualitative study is easier and cheaper to be conducted – as the motivation behind submitting of the so-called qualitative studies that actually do not meet the requirements of academic work. Another assumption for the lack of quality of the manuscripts is due to gaps in education in the human and social sciences of most researchers in the health field, particularly those who come from predominantly technical courses, such as Medicine, Dentistry, Pharmacy, among others.

Coinciding with Minayo, França Jr also questions the aspect of quality. However, it is through the claim of manuscript size, one of the assumptions presented in the article, that the panellist articulates his contribution. Ivan reminds us that the argument that the article size limitation should not be considered *ana priori* barrier to publishing of qualitative articles. Reiterating the advantages of concisewriting, even in the literary texts, Ivan leads us to reflect between a certain concept of objectivity that cannot to be confused with neutrality, materiality or measurement, and the possibility of objectification of the ideas and experiences of the subject. In fact, the possibility of objectification through the language of the so-called subjective phenomena is what humanizes us and inserts us in culture.

We agree with França Jr that the objectification of the results of a qualitative research and its analysis does not need to be wordy or verbose. We also believe that often the article extends itself in

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the description and exhaustive reproduction of the subject's speech, without any articulation between the discursive fragments and some theoretical problematizations. However, despite these caveats, the articles that result from qualitative research often become longer, since their data are textual and not numeric, which theoretically requires more space for presentation. It is important to remember that sometimes the circumscription of an object from the qualitative perspective, the explanation of the theoretical foundations that guide the process of production and analysis of data, as well as its discussion, may require some extra characters. This is not only about presenting results in tables and discussing whether or not there is any convergence with previous studies on the topic, but rather creating a dialogue among the different theoretical constructions that is capable of making sense of the language of the subject, beyond unique experience. Therefore, the qualitative researcher is presented with the challenge of seeking the necessary concision to allow his ideas to be exposed as clearly and objectively as possible, without simplifying them or make them lose the theoretical consistency. França Jr. gives great emphasis to the issue of reproducibility of the study, which is often interpreted erroneously, as a requirement for the research results to be verifiable. The editor, emphatically, reinforces what we agreed with entirely: the reproducibility of a study is related to its methodological transparency (i.e. allowing other researchers to reproduce it) either in fact or in thought.

Schraiber also agrees with the other panellists when referring to the small amount of publications in healthcare journals, especially in the medical magazines, on the issue of scientificity. However, his focus is directed to what is considered scientific in the practice of medicine, and reflecting on the reasons why, it appears that in this context scientificity requires the exclusion of the subject. According to Schraiber, by taking the patient as a body and the disease as something extraneous that

invades it denies the understanding of the body as the material support of a unique history. This perspective is increasingly questioned, especially when facing the challenge of the chronic diseases. The increasing number of pathological conditions that require continuous care and the institution of ways of living with quality and pleasure – despite the disease – has required that doctors recognise the need to address subjective dimensions of the person suffering. It is only possible to establish patterns of living with the disease and adherence to treatment through the interaction between the caregiver and the person needing care. Faced with this dilemma for the knowledge and practice of medical, the author reiterates the proposition presented in the article: that more qualitative research should be conducted and disseminated in medical journals and in those in the health field in general, since it is essential to the work of physicians as it is for clinical research. Moreover, the author points out the false dichotomy between objectivity and subjectivity in scientific work, since all knowledge must be objectified in order to be shared, moreover it is produced by subjects. Thus, for Schraiber, it is the rigor in the use of the method that assures scientific work, as defined from its coherence and suitability to a theoretically defined object.

For us, this requirement for accuracy is consistent with the observations brought by the other panellists, making the three contributions complement each other and adding content to enrich the ideas presented in the article. We all agree that the editorial policies of journals in the field of health should be improved, which was the essence the authors emphasized in the text under discussion.

Thanking once more the panellists, all of them editors of important publications in the field, we express our expectations that the whole, article and texts under discussion, may encourage the reflection of the editors of scientific healthcare journals to review their instructions to authors, making room for the publication of high quality qualitative articles..