

SCIENTIFIC NURSING PRODUCTION FROM THE PERSPECTIVE OF SOCIAL REPRESENTATION. BRAZIL, 1975-2001

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Marques SC, Tyrrell MAR, Oliveira DC. Scientific nursing production from the perspective of social representation. Brazil, 1975-2001. Rev Latino-am Enfermagem 2006 setembro-outubro; 14(5):762-9.

This study aimed to: survey the number of nursing theses and dissertations produced between 1975 and 2001 with a social representation approach (RS); characterize the products with regard to the institution of origin, country region, study subjects and representation objects; to group in to theme categories and research lines in nursing. The data were collected from the Center of Studies and Research in Nursing at the Brazilian Nursing Association. The result evidenced 131 studies with RS support, originated in 1990, with higher production in the year 2000, mainly in the South East (83.1%). It registered 145 subjects; the most common objects are "disease", "health-disease process", "nurses' professional practice" and "care delivery". In the thematic categorization, the care area joins the greatest quantity of studies. In short, nursing has been seeking to appropriate itself of this theoretical-methodological framework as the basis and guide for part of its knowledge production.

DESCRIPTORS: nursing research ; classification; methods

LA PRODUCCIÓN CIENTÍFICA DE LA ENFERMERÍA EN LA PERSPECTIVA DE LA REPRESENTACIÓN SOCIAL. BRASIL, 1975-2001

Este estudio objetivó: inventariar el número de tesis y disertaciones de enfermería del período de 1975 a 2001 con aproximación de las representaciones sociales (RS); caracterizar las producciones con relación a la institución de origen, a las regiones del país, a los sujetos de los estudios y objetos de representación; reunir en las categorías temáticas y líneas de investigación en enfermería. Los datos fueron recolectados del catálogo del Centro de Estudios y Pesquisas en Enfermería/ Asociación Brasileña de Enfermería. El resultado evidenció 131 estudios con soporte de las RS, producidos desde 1990, con mayor producción en el año de 2000, principalmente en la Región Sudeste (83,1%). Se registraron 145 sujetos; los objetos más comunes fueron "enfermedad", "proceso salud-enfermedad", "práctica profesional del enfermero" y el "cuidar". En la categorización temática, el área de atención es el que reúne el mayor número de investigaciones. En resumen, la Enfermería busca apropiarse de este referencial teórico y metodológico en el embasamiento y guía de parte de la producción de su conocimiento.

DESCRIPTORES: investigación en enfermería; clasificación; métodos

A PRODUÇÃO CIENTÍFICA DA ENFERMAGEM NA PERSPECTIVA DA REPRESENTAÇÃO SOCIAL. BRASIL, 1975-2001

O presente estudo objetivou: levantar os quantitativos de teses e dissertações de enfermagem do período entre 1975 e 2001, com abordagem das representações sociais (RS), caracterizar as produções em relação à instituição de origem, às regiões do país, aos sujeitos dos estudos e objetos de representação, agrupar nas categorias temáticas e linhas de pesquisa em enfermagem. Os dados foram coletados do catálogo do Centro de Estudos e Pesquisas em Enfermagem da Associação Brasileira de Enfermagem. O resultado evidenciou 131 estudos com suporte das RS, originados em 1990, com maior produção no ano de 2000, principalmente na Região Sudeste (83,1%). Registrou-se 145 sujeitos, os objetos mais comuns são "doença", "processo saúde-doença", "prática profissional do enfermeiro" e o "cuidar". Na categorização temática, a área assistencial é a que reúne a maior quantidade de pesquisas. Em suma, a enfermagem vem procurando se apropriar desse referencial teórico-metodológico na fundamentação e guia de parte da produção do seu conhecimento.

DESCRITORES: pesquisa em enfermagem; classificação; métodos

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INTRODUCTION

In Brazilian nursing, scientific production is not a special focus of attention by nurses, but has remained latent in professional training and practice for several decades. It was stimulated from the mid-1970's onwards, through research originated in the first *stricto sensu* graduate course (master's level) at Anna Nery School of Nursing of Rio de Janeiro Federal University⁽¹⁻²⁾. Later, other *stricto sensu* graduate programs were implemented, such as the Interunit Doctoral Program by the Colleges of Nursing at the University of São Paulo, strengthening the construction of nursing knowledge and encouraging regular research development⁽³⁾.

It should be emphasized that the evolution of nursing research has been supported not only by graduate programs, but also by professional entities, especially the Brazilian Nursing Association (ABEn), as well as by research entities like the Coordination for the Improvement of Higher Education Personnel (CAPES) and the National Council for Scientific and Technological Development (CNPQ).

If, on the one hand, due to historical, political or social reasons, nursing took time to get inserted in scientific research practice, on the other, there have been progressive and constant advances in trials and in the incorporation of models and methodologies that are more adequate to its research objects.

Until 1984, nursing research in Brazil was guided by positivism, in line with scientific paradigms at that time. This privileges the measurement and comparison between phenomena, the objectivity of observations and the absence or limitation of explanatory analyses⁽²⁾, that is, the predominance of the quantitative approach, emphasizing fact description and procedure standardization. At the start of the 1980's, there was growing interest in the development of research that uses other philosophical and paradigmatic orientations, such as dialectics and phenomenology, aimed at "apprehending nursing knowledge and practice as historical and articulated with concrete social formations"⁽²⁾.

This evidences nursing's perception that questions related to the health-disease process involve historical and social aspects, starting a trajectory marked by distancing from biomedical paradigms and approximation of paradigms from human sciences. This study area started to try out innovative theoretical-methodological approaches, which adjusted to such a vast and diversified object as "care delivery in the health-disease process".

These observations point towards the current predominance of nursing studies guided by theoretical reference frameworks from human and social sciences, such as social psychology and sociology, which reinforces the hypothesis that the paradigm used in this area changed. This tendency culminated, in the 1980's and 1990's, with the search for and incorporation of different theories, such as Social Representations Theory, which found fertile ground in the nursing area⁽⁴⁾.

Some nurses have been dedicating themselves to the analysis of scientific nursing productions across the years, addressing different aspects: research development areas; reference framework and contribution to the body of nursing knowledge⁽⁵⁾; classification of scientific production according to the adopted method, with a view to determining the phases achieved by nursing research⁽⁶⁾; and, also, analysis of nursing knowledge and classification according to areas of interest⁽⁷⁾.

These and other studies with similar goals are relevant to the extent that they evidence, in different senses, how the nursing area has taken theories from other knowledge areas, disclosing this retranslation process in scientific production and also revealing future tendencies in this field.

In the same line, this study analyzes nursing research produced in *stricto sensu* graduate programs in Brazil and which used social representations as a theoretical and/or methodological reference framework, between 1975 and 2001. We defined the following objectives: quantitative survey of nursing dissertations and theses, produced between 1975 and 2001, which used the theoretical premises of social representations; characterization of scientific productions in terms of institutions of origin, country regions, study subjects and representation objects; and grouping into theme categories and nursing research lines of Graduate Programs.

Through the Graduate Coordinator Workshops promoted by CAPES/CNPq, nursing has attempted to develop a proposal for a scientific product classification scheme, aimed at consolidating nursing research lines and priorities. This scheme "serves as a 'classification typology' fundamental to order the produced knowledge. In science construction, it serves as a structure to arrange the *corpus* of Brazilian nursing"⁽⁸⁾. However, this scheme should be submitted to experience in order to assess its reliability⁽⁹⁾.

The social representation concept can be observed in different human and social science knowledge areas, such as sociology, anthropology, social

psychology, history and philosophy, presenting nuances in their respective domains, particularly in the adopted group and social conceptions, and also in how they identify representation objects in a specific social context. In this respect, our intent to identify under what theoretical perspectives nursing productions were developed became unviable as, in the total set of productions we analyzed, only 18 studies explicitly registered in the abstract that their study was developed in the context of the psychosocial approach, while the remainder did not mention its theoretical framework.

METHODOLOGY

We carried out an exploratory and descriptive study with a quantitative approach. Data were collected from the Information about Nursing Research and Researchers catalogues, issued by the Brazilian Nursing Association's (ABEn) Center for Nursing Studies and Research. We used the CD-rom edition that joins volumes 1 to 18, for the period from 1979 to 2000, and the print version of volume 19, issued in 2001. Moreover, we consulted abstracts of dissertations and theses defended in *stricto sensu* graduate programs, for the period from 1975 to 2001.

First, we read the 2,642 abstracts included in the above mentioned publications, screening for studies that adopted social representations in their theoretical-methodological reference framework. Data were collected from August to October/2004.

Data were analyzed quantitatively. The following categories were presented in tables: production mode, institution, period, study subjects, representation objects, distribution per theme category and research lines.

RESULT DESCRIPTION AND ANALYSIS

The CEPEn/ABEn published 2,642 abstracts of dissertations and theses between 1975 and 2001. In this collection, we identified 131 productions that used social representation as the theoretical and/or methodological framework, corresponding to 5% of the total number of scientific nursing productions.

Table 1 shows that 71.7% of these are theses and 28.3% dissertations, while one study was related to a free lectureship research.

Table 1 - Distribution of nursing research per production type. Brazil, 2004

Production type	F	%
Dissertation	37	28.3
Thesis	94	71.7
Total	131	100

Twenty-seven *stricto sensu* graduate programs are offered in Brazil, more than half of which are Master's courses⁽¹⁰⁾. These are representative as they were created ten years before the Doctoral courses (Master, EEAN, 1972 and Doctoral, EE/USP, 1982). Usually, Master's courses have more students and take less time (about two years) than Doctoral courses (about 4 years), leading to a larger scientific research volume. This confirms and justifies the higher concentration of social representation productions in Master's courses. Between 1990 and 1993, when the first studies with this theoretical approach were concluded, six Master's theses and only one free lectureship thesis were produced. In 1993, the first Doctoral thesis was concluded at the University of São Paulo School of Nursing (USP/São Paulo).

Table 2 - Nursing productions based on the social representation concept, per institution and chronology. Brazil, 2004

Teaching institutions	Years												f	%
	90	91	92	93	94	95	96	97	98	99	00	01		
EEAN/UFRJ	-	-	01	-	01	05	09	07	06	04	05	-	38	29.0
USP/Ribeirão Preto	01	-	-	-	-	02	03	05	07	03	04	01	26	19.8
USP/São Paulo	-	-	01	01	01	-	01	02	04	07	06	01	24	18.3
UNIRIO	01	-	-	-	01	-	02	01	01	02	07	-	15	11.4
Nurs. Dept./UFSC	-	02	-	-	01	-	-	-	03	01	-	-	07	5.3
Fed. U. Ceará	-	-	-	-	-	-	02	-	-	01	01	02	06	4.6
Fed. U. Paraíba	-	-	-	-	-	-	01	-	-	-	02	01	04	3.1
Fed. U. Bahia	-	-	-	-	-	-	-	-	-	-	02	02	04	3.1
Fed. U. São Paulo	-	-	-	-	-	-	-	-	-	02	-	-	02	1.5
Fed. U. Minas Gerais	-	-	-	-	-	-	-	-	-	-	01	01	02	1.5
PUC / São Paulo	-	-	-	-	-	01	-	-	-	-	-	-	01	0.8
Fed. U. Viçosa	-	-	01	-	-	-	-	-	-	-	-	-	01	0.8
Univ. Brasília	-	-	-	-	-	-	-	-	-	-	01	-	01	0.8
Total	02	02	03	01	04	08	18	15	21	20	29	08	131	100

Table 2 shows that social representation research registered in the CEPEn catalogues started in 1990, with a progressive increase over time, mainly from 1995 onwards; a slight decrease in 1997, and the highest concentration in 2000 (29 studies). The year 2001 shows a considerable decrease, which may result from delays to send abstract to the CEPEn, when volume 19 was concluded. This assertion is reinforced by the fact that 360 abstracts were catalogued in 2000, against only 89 in 2001, which certainly does not reflect the total number of studies produced in that year.

The highest frequencies of theses and dissertations using social representations theory were found in the following *stricto sensu* graduate programs: Anna Nery School of Nursing -(EEAN/UFRJ), responsible for 29% of productions, University of São Paulo at Ribeirão Preto College of Nursing (19.8%), University of São Paulo School of Nursing (18.3%) and University of Rio de Janeiro - UNIRIO - (11.4%). The lowest frequencies were found at the Pontifícia Universidade Católica de São Paulo, Viçosa Federal University and the University of Brasília, with 0.8% each.

At the latter three institutions, the graduate programs are not offered in the nursing area. However, as the nurses' productions are registered in the CEPEn catalogue, our data source, we believed they should not be excluded.

This result also evidences that programs with the highest production levels are located in the Southeast of Brazil, which offers more graduate programs and, consequently, concentrates the highest percentage of studies (83.1%).

Although eight of the 13 institutions included in this study come from the Southeast, this information in itself does not justify this region's paramount position. As described above, the four institutions with the highest production percentages were not only pioneers, but also continued their regular production of social representations research across the study period. This movement occurred on a smaller scale at other institutions in the same regions, but is not found in other Brazilian regions. The North has no *stricto sensu* graduate programs, which explains the absence of productions in this region.

It is interesting to observe that the entry door for social representations in Brazil from a

social psychology perspective, which was the Northeast, more specifically to State of Paraíba, was not were *stricto sensu* graduate nursing programs got acquainted with this theoretical approach, as the first studies in that region only appeared in 1996, one at Paraíba Federal University (UFPA) and two at Ceará Federal University (UFCE). However, after the Southeast, the highest production levels are found in the Northeast (10.8%).

The Theory of Social Representations was introduced in Brazil by Prof. Denise Jodelet (School for Higher Studies in Social Science/France), in 1982, intermediated by Prof. Ângela Arruda, who invited her to present a course in Campina Grande/PA about social representations methodology, and to serve as an advisor for a project on mental health and somatics by the Science and Technology Group at Paraíba Federal University⁽¹¹⁾.

How Social Representations Theory started to be disseminated in Brazil, as well as the interest aroused in different knowledge areas, including nursing, and the consolidation of this study field, were analyzed in a research aimed at characterizing national production about social representations between 1988 and 1997, using documentary sources⁽¹¹⁾. In this study, the authors observed the continuous growth of health research, especially in nursing and collective health, mainly from 1992 onwards. Specifically within the health area, nursing presented the largest contribution (48.1%), which evidences the level of importance attributed to this reference framework.

Considering that the social representation concept can be understood as the mental reproduction of something, as the action of giving form or meaning to something mentally elaborated or, also, as "an act of thinking through which a subject relates to an object"⁽¹²⁾, and is therefore the fruit of an individual's mental activity about an object, the possibility of using this concept are broad. This allows for countless possibilities for appropriation, at individual as well as social group level, especially when the object to be represented maintains a social relation with its life context. This basic premise of social representations motivated research about what groups of individuals have been the focus of interest for nursing studies in this theoretical perspective.

Table 3 - Study subjects of nursing productions based on social representations. Brazil, 2004

Subjects	f	%
Nurses	37	25.5
Women	25	17.3
Patients	19	13.1
Nursing faculty	11	7.6
Nursing professionals	10	6.9
Children and adolescents	10	6.9
Relatives and caregivers	09	6.2
Students	06	4.1
Health professionals	06	4.1
Community groups	05	3.4
Workers	03	2.1
Others (men, elderly, drugs users)	04	2.8
Total	145	100.0

Data from Table 3 show that 12 subject categories were identified in the 131 studies, corresponding to a total frequency of 145. This reveals that some studies look at more than one type of subject. Nurses appear most frequently, both as an isolated category (25.5%) and inserted in other categories, such as "nursing faculty", "nursing professionals" and "health professionals". Another aspect disclosed by these categories is that health and particularly nursing professionals have been privileged in nursing research, corresponding to 44.1% of subjects.

Nursing faculty, with the fourth highest frequency, are a focus of attention in these productions and, therefore, maintained separately from the nursing category. This demonstrates the interest in analyzing professional nursing training on the basis of these subjects' psychosocial incorporation, as well as their practices.

In the frequency ranking, nurses are followed by women (17.3%) and patients (13.1%). These percentages distinguish them from the other subject groups. In the "patient" group, most studies (14) refer to individuals submitted to surgical procedures, while the remainder is related to individuals with psychiatric problems.

In the subject analysis, the "relatives" category deserves special observation. Its frequency (9) shows a rising trend in researchers' interest in a micro-social analysis of the health-disease process, based on this group.

The results reveal that nursing researchers focus on a range of subjects in their studies and, moreover, that they consider the groups of individuals they present in relation to particular aspects, characteristics that identify them as groups concerned with representation objects from their daily reality.

These aspects are essential when attempting to use social representation as a theoretical and/or methodological support framework.

Social representation is defined as the representation of something (object) and someone (subject), whose characteristics manifest in the object⁽¹²⁾. All representations are characterized by a global and unitary view of an object, individual or group, which grants them their social character⁽¹³⁾. Thus, because they do without this subject/object indissolubility, we attempted to identify what representation objects have aroused interest and concern in nursing studies.

Table 4 - Representation objects of nursing productions based on social representation. Brazil, 2004

Representation Objects	f
Disease	26
Professional practice	23
Care delivery	19
Health-disease process	17
Nurses' professional identity	09
Hiv/aids	07
Pregnancy/Breastfeeding	07
Family care	05
Sexuality	04
Old age	04
Others	07
Total	112

One hundred twelve representation objects were identified in the 131 productions. This indicates a dispersed range of study objects, which required that we group them into categories.

The hierarchy shown in Table 4 reveals a concentration of studies about objects related to "disease" (26), professional practice (23), care delivery (19), the health-disease process (17) and, to a lesser extent, about nurses' professional identity (09).

A representation object can be defined as a person; material, mental or social event; a natural phenomenon; an idea or theory, and can be imaginary or mythical⁽¹²⁾. This range of possibilities to define a representation object probably turns into a facilitating element for nurses when using this theoretical approach, as nurses' activity areas confront them with multiple situations or phenomena.

On the other hand, although any object can be represented, not all of them are social representation objects. Given the study limitation of using abstracts instead of full studies, a more refined analysis of this aspect was not possible. However,

some studies reveal difficulties to specify the objects, due to considering social representations as an isolated concept, restricted to its dimension as an image or non-specified subjective contents, as identified by other researchers⁽¹³⁾. Not all studies we analyzed adequately defined the object's social relevance and specificity.

Table 4 also shows that the categories are part of nursing professionals' daily reality, however, with a strong tendency to adopt objects related to the representation of the disease. In this group, insanity and cancer were the most frequently represented objects. Various studies have looked at care by or in nursing, a category that also stands out here. It is a representation object from different perspectives, that is, as the essence of nursing know-how, or as care in specific situations or, also, in different professional nursing activity areas.

Practice and professional identity also stood out among the categories, joining the following objects: "being a nurse", (the nurse's) "body", "professional practice" and "management models and practices", in terms of how they are perceived or represented either by the professionals themselves or by the clients. Studies also show concern about how these aspects influence nursing's ways of doing and thinking, as well as about their improvement.

Seventeen studies focused on identifying how certain social groups represent the health-disease process in itself or based on its social or political determinants. This was the fourth type of social representation object, granting it a non-negligible status which nursing has attempted to understand with a view to adapting its professional practice.

Other categories were less expressive, such as "pregnancy/breastfeeding", "sexuality", "HIV/AIDS", among others. HIV/AIDS, for example, has been the focus of different studies, due to its extent as a public health problem and its impact in social life, turning it into an important representation object nowadays, but explored in only seven productions.

Some representation objects did not fit into any category and were included under others, such as the Single Health System, social structure and street life.

In general, these results demonstrate that most categories focus on the same object of professional nursing practice - health, disease and the health-disease process; as well as strong emphasis on professional practices - care, professional practice, nurses' professional identity - revealing the applicative nature of nursing research.

In order to analyze these results in terms of the research line classification scheme in Brazil (as defined in the Graduate Workshops CAPES/CNPq⁽⁹⁾), we highlight that the latter is structured in three theme categories, which are: professional, care and organizational, each of which includes a set of research lines.

The *professional* category and its research lines are related to the sphere of the epistemic subject / knowing conscience, joining: "theoretical disciplines/ contents and experiences that adjust to or constitute the most substantial part of (professional) knowledge or the nursing knowledge area". The *care* area and the topics investigated in its research lines refer to the knowable object / objective reality, that is, "to what is considered (thinking/knowing), or can be considered, about which professional awareness occurs, towards itself, as an objectified reality, and also as everything that can be claimed about the professional's 'know-how', obviously provided that the possible dimensions of the phenomenon of knowing are understood in relation to the care context". The third and final category, called *organizational*, and its respective research lines, are part of the image or "instrumental" sphere and are related "to the subjects/ theoretical contexts and experiences of related sciences/ connected domains and serve to approach reality in the field of knowledge activities, as is of interest to nursing"⁽⁹⁾.

We found the following results for the distribution of the studies analyzed according to these theme categories and research lines:

Table 5 - Groups of nursing productions based on social representation, per theme category and research line. Brazil, 2004

Categories	Research Lines	f	%
Professional	1- theoretical-philosophical foundations of health care delivery	14	10.7
	2- technology in health and nursing	05	3.8
	3- ethics in health and nursing	02	1.5
	4- nursing history	01	0.8
	Sub-Total	22	16.8
Care	1- care process in health and nursing	51	38.9
	2- health and quality of life	34	25.9
	Sub-Total	85	64.8
Organizational	1- policies and practices in health and nursing	04	3.1
	2- education and nursing policies and practices	06	4.6
	3- social production and work in health and nursing	11	8.4
	4- health and nursing service management	03	2.3
	5- information/communication in health and nursing	Ñ	Ñ
Sub-Total	24	18.4	
Total		131	100.0

Table 5 displays the scientific production groups and shows that most research fits into the *care* theme category (64.8%), against 18.4% for the *organizational* and 16.8% for the *professional* category, reaffirming the results of our earlier analysis about the applied nature of nursing research.

Within the research lines for the *care* category, the "care process in health and nursing", involving the systemized care process for healthy or ill human beings, in the individual or collective sphere and in the subjective and objective dimensions of care and receiving care, is more frequent (38.9%) than "health and quality of life" (25.9%). The latter refers to determinants, indicators and expressions of health and quality of life and how they relate to the health-disease process, in the individual and collective sphere.

These results show that "care", acknowledged as the essence of nursing know-how, has been privileged in these studies from the perspective of the social representations approach. Another aspect to be taken into account is that Social Representations Theory is articulated with the paradigms of nursing care and health promotion, evidenced in the assertion that health requires the planning of technically viable actions that are adequate to reality. This statement is presented, however, without forgetting about the role of active beings assumed by collective subjects. In this perspective, social subjectivity appears as a participant in daily nursing actions, contributing to explanations of the health-disease process on the basis of common sense knowledge, as well as particular meanings that participate in the determination of group processes, for promotion as well as cure⁽¹³⁾. The *organizational* category, which was the second most frequent group (18.4%), consists of five research lines that cover the following contents in health and nursing: health policies; pedagogical, political and educational technology conceptions, production of the health work process, service management and communication in health and nursing.

In this theme category, "social production and work in health and nursing" stands out, corresponding to 8.4%. During the study period, not one study was added in the research line "information/communication in health and nursing". This information refers to the hypothesis about the incipient nature of this study area in nursing, or also that the study objects related to this line have not adapted to this theoretical framework.

Although on a smaller scale (3.1%), this theoretical approach in nursing is also applied in its interface with the field of public policies in health, involving the understanding of these policies and their operationalization in articulation with nursing practices.

The results of the *organizational category* reveal a particular way of articulating Social Representations Theory with the health area, placed on an institutional level here, or in combination with professional practice⁽¹³⁾. The analysis of abstracts shows that nurses attempted to apprehend the knowledge constituted by nursing professionals about daily objects, mainly in terms of the health work process and education practices at work.

The *professional* category, which included the smallest number of scientific productions (16.8%), consists of four research lines, related to theoretical-philosophical currents, theories and concepts that guide knowledge and actions in health and nursing, the production and incorporation processes of goods and services, ethical aspects and the historical-social development of the nursing profession, practices and organizations.

In the context of this category, most (10.7%) nursing productions were classified as "theoretical-philosophical foundations of care delivery in health and nursing". In the other research lines, we find a very timid approximation with social representations, especially in research on ethical and historical aspects related to the profession.

It is noticeable in these results that the most frequent research lines are also related to care aspects in health and nursing, which strengthens the idea that this theme found fertile ground in the premises of social representation.

FINAL CONSIDERATIONS

Studies adopting the theoretical premises of social representation are relatively recent in Brazil, mainly from a social psychology perspective, which nursing has frequently used. Although recent, productions using this approach have increased at an increasing pace. From the first productions in 1990 until 2001, CEPEn/ABEn catalogued about 1,007 studies, 13% of which was related to this study area. This percentage seems significant, considering that it is one theoretical framework among tens of other available for the social approach of reality. Besides,

if we look at other aspects, such as the small number of researchers involved in this theoretical approach in Brazilian nursing, the fact that the social representations area covers various concepts and theoretical dimensions, and that multi-methodological approaches are particularly indicated in these studies, so that its assimilation and application is not always an easy task, it can be inferred that this is an important theoretical branch for nursing research in Brazil.

The increasing interest this theoretical approach has aroused in different Brazilian regions discloses a movement to consolidate new research paradigms in nursing. This implies the search for theoretical explanation models that are capable of producing diagnoses or results that attend to the demands nursing is faced with.

Another relevant aspect refers to the fact that this study used CEPEN catalogues as a data source, as different academic nursing studies were defended outside graduate nursing programs, especially in the 1980's and 1990's, when access to Doctoral programs in nursing was still restricted. These studies were responsible for a group of productions not calculated in our study.

As a result of our analysis, we can affirm that research using the theoretical reference framework of social representations is developing in nursing, reaffirming its applied research nature, directed at problems and objects deriving from daily professional nursing practice. On the other hand, work itself and the development of new care technologies in nursing have also guided these studies.

Moreover, this study confirmed the particular characteristics of using Social Representations Theory in the health area, highlighted in literature, especially the need to articulate this theory with nursing paradigms; its appropriation to study objects that are characteristic of an institutional level or associated with professional practice; and also the adoption of theory as a specific form of studying professional knowledge, an intermediary mode between common sense and scientific knowledge⁽¹³⁾.

Finally, we believe this study made visible the evolution of scientific nursing productions in the field of social representations, considering the study aspects. Therefore, we hope that this initiative will stimulate further research, with a view to a more thorough analysis of new nuances, which the use of abstracts only did not permit.

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