

THE CONSTRUCTION OF NURSING KNOWLEDGE IN THE REFLEXIVE-COMPREHENSIVE PARADIGM

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The production of scientific nursing knowledge is strongly related to graduate courses, which play a strategic role in the formation of qualified human resources, in knowledge generation⁽¹⁾, in the critical and creative dialogue between the researcher and reality, in the capacity to intervene through the use and application of research results in institutions and society. Moreover, it contributes to the formation of public policies and allows for a space in the scientific community.

Brazil assumes a paramount position in the Latin-American context in terms of researcher formation and knowledge production due to the quality of the research it develops and the expressive number of master's theses and doctoral dissertations produced by its 28 graduate programs in nursing, 15 of which are linked up with universities from the Southeast, six from the South, five from the Northeast and two from the Central-West. It should be emphasized that the Southeast is the most populous region in the country, with more than 78 million inhabitants; concentrates the highest number of universities and is responsible for the largest research production in Brazil.

These graduate courses in nursing promote exchange with other countries on the American and African continent, highlighting the country's position in the formation of teachers and researchers in Brazil, Chile, Colombia, Peru, Bolivia, Cuba, Argentina, Angola and Mexico, among others.

The produced research uses different methods to respond to research problems, is structured in scientific evidence and based on clinical practice and consensus among specialists. The interest in qualitative and interpretive studies is increasing.

The adoption of this approach was stimulated from the 1920's and '30's onwards, when anthropologists and sociologists started to use qualitative methods to study the human phenomenon in natural environments, based on the holistic viewpoint. Nursing has taken this approach to understand the history of people, their living and health conditions, feelings, beliefs and experiences to interpret the context it investigates⁽²⁾.

The adoption of qualitative methods reflects the change of paradigms in the search for the comprehensiveness of the phenomenon and a broader approach of reality⁽³⁾. Furthermore, it increases the relations between health sciences and human sciences and the perspective of care for life, instead of merely for the person.

In this edition, RLAE publishes some articles structured on the qualitative approach, which aimed to get to know the relation between work, health and living conditions in nursing work; the meaning of nurses' actions towards ethical occurrences that involve nursing professionals; the experiences of people with Systemic Lupus Erythematosus; with permanent intestinal ostomy; the reasons that caused women not to pick up the result of their pap smear, an important indicator in colon cancer prevention; the feelings of hearing-impaired persons in health care services and the team's lack of preparedness to communicate with these persons; the daily reality of schizophrenic patients and of children and adolescents with cystic fibrosis.

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