

CARING FOR SELF TO PROMOTE HEALTH: TRANSFORMING NURSING CARE ABSTRACT¹

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ABSTRACT

This is an assistant convergent study which objective was to problematize actions for self-care that the nursing team in an hematopoietic stem cell transplantation unit to promote health through dialogue, searching innovations to think and to do. The theoretical bases were founded on Radünz philosophical assumptions and concepts and the teaching learning referential process of Freire. The Problematicization of Arch of Maguerez was used for data collection, applied in five workshops. They occurred from August to October 2010. The workshops were tape recorded and transcribed, and other data were recorded in the field diary. Eighteen nursing professionals have participated in this study. The results showed that a good relationship in the work environment, a mutual support and collaboration among the professionals, contribute to improve their quality of life. The need for enhancement of continuing education, concerned with the development of skills and attitudes, also emerged from the data, relating to the strengthening of actions to promote self-care and quality of life, respecting the principles of responsibility and autonomy to promote health.

Keywords: Health education. Nursing. Oncology. Health Promotion. Hematopoietic Stem Cell Transplantation.

INTRODUCTION

Nursing professionals are faced constantly with suffering, fears, losses, socioeconomic difficulties, physical and emotional exhaustion, among other factors. These factors may have consequences for health and therefore affecting job performance. Nursing is among the professions most affected by the syndrome of exhaustion known as burnout, related to overwork, lack of professional recognition, labor relations and the sense of powerlessness in the face of suffering and death^(1,2).

In oncology, nursing care can lead the caregiver to physical and psychological suffering, affecting their health and way of caring. Thus, the professional caregiver must recognize their limitations and needs, seeking to maintain the quality of life in advancing to care for themselves, rethinking and transforming the lifestyle towards healthy living, self-worth and self-seeking process to promote changes in

attitudes favorable for promoting health.¹

Thus, this study aims to discuss the actions to take care of themselves that the nursing staff, from a unit of hematopoietic stem cell transplantation (HSCT), performs at the collective level for health promotion.

To theoretical support, we use philosophical assumptions and theoretical conceptions of Radünz about taking care of themselves, established in his doctoral thesis entitled "A Philosophy for Nurses: Caring for themselves, living with the finitude and the preventability of Burnout." The findings of Radünz challenge nurses to reflect on issues of their day to day, expanding their understanding of experienced reality, causing changes and awakening the commitment to life and to promoting health⁽¹⁾.

We associated the theoretical principles of Pedagogy of the Oppressed by Paulo Freire with the assumptions and conceptions of Radünz, whose essence of his work in promoting the concern an educational process in which there is reflection from the questioning, the liberating concept,

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seeking to produce transformation in subjects⁽³⁾. This referral was associated because we understand that to problematize their own care conducted concurrently teaching learning process.

METHODOLOGY

Convergent-assistance research (CAR) performed on an institution specialized in oncology care from Santa Catarina/ Brazil, which operates in the specialty of HSCT since 1999. The nursing staff of this unit consists of 10 nurses and 17 nursing technicians.

The CAR method is represented by the instrumentation phase, phase of methodological decisions, and the phase of investigation, phase that explains the strategies adopted to obtain the information. And the introduction, already presented equivalent to phase of conception⁽⁴⁾.

All nurses from the unit with interest shown in the study were included in the study, 10 nurses and 8 nursing technicians.

The proposal of the study was presented in previously scheduled meeting with the nursing staff, being coordinated by the principal researcher.

As a tool for data collection we used the Arch of Maguerez, consisted of five steps: observation of reality; definition of the key points; theorizing; possible solutions and application to reality. This method presents the problem principles of problem-solving pedagogy of Freire^(3,5,6).

To collect data, five workshops with participants of the study were conducted. Each workshop lasted one hour and thirty minutes. The workshops were scheduled according to availability of participants and occurred from August to October 2010, at the change of shift HSCT unit of the study room.

The steps of the Arch of Maguerez method were followed-up effecting the development of workshops. They were recorded and transcribed after each accomplishment. Relevant notes by the principal researcher in a field diary were also recorded.

The study was approved by the Ethics Committee and Research of the study scenario, under the number 009/2010. Its development followed the requirements established by Resolution 196/96 of the National Health

Council⁽⁷⁾. Anonymity was ensured through the use of fictitious names, chosen by the research participants.

RESULTS AND DISCUSSION

In the convergent method, this is the phase of analysis and interpretation of findings. During the development of this study, the phase of analysis and interpretation occurred concurrently with data collection, since the first workshop, developing the four processes: collection, synthesis, theory and transfer. The principal researcher deepened in the process from the theoretical and philosophical foundations, meeting of formulations and questions and selecting the most relevant information. In this context, a range of information that has been summarized and theorized emerged from daily nursing. Moreover, it was sought to give meaning based on the theoretical and philosophical foundation that supported this study⁽⁴⁾.

We clarified that the results presented here are the steps of the Arch of Maguerez⁽⁶⁾.

Observation of reality

In the first workshop the proposed study was presented to the participants again because some of them did not had the opportunity to attend the first presentation. After the reading and delivery of the Consent Term was performed. Then, the participants were encouraged to look closely at reality, searching of elements that needed to be worked out, corrected or improved about the care of themselves and the strategies that could be used to promote health in the workplace.

The observation of reality brought the following problem situations:

Inappropriate place for sleep, rest and nutrition.

We do not have an appropriate environment to keep off some of the stress of work, to rest [...] (Bruna)

Inadequate nutrition.

We seek a healthier diet, eating more fruits and vegetables, avoiding sodas, drink more fluids during the day to maintain good health here at work and also at home. (Sarah)

Lack of psychological and/or psychiatric occupational medicine support to assist professionals of the institution.

When I needed to talk to the psychiatrist of the institution, he did not assist people from the staff, I went out to seek help. (Letícia)

Solidarity deficit (inter-relationship) between the team.

It is always better when we help, our daily routine is heavy, it should be common to all (Angel)

Lack of self-knowledge, take time to think about themselves.

After we started the workshops, my daughter and I started talking about what was good today and that made us happy and what was not good. This conversation is making us very well (Beta)

Lack of care for our health.

I miss walking, spend more time with my family, to live longer and better life (Priscila)

Improper use of personal protective equipment (PPE).

I was thinking, many times we put the bedpan in patients who are undergoing chemotherapy without the use of mask, look at the risk we have (Bruna)

Overloaded monthly scales due to lack of professionals.

We need to study to legally support us, this will prepare us for requesting more professional along the direction (Sarah)

Absence of an institutional policy for the encouragement of professional actions.

Praising is important, to stimulate, to motivate to work, let us liveliest, willing, improving self-esteem, giving visibility to our work (Angel).

Low wages.

Somehow we try to compensate for our low wages with overtime, but we reduced our time to care for ourselves and for leisure (Priscila)

Noise in communication with other professionals.

We want them to respect our knowledge. We must respect the professional knowledge of each other, but the nurse should suggest behaviors. It is like this that multidisciplinary works (Crystal)

Lack of planning of work processes for staff.

Devemos continuar realizando reuniões como esta para promoção do nosso cuidado, o cuidar de si. Considero isso muito importante para a enfermagem (Amanda)

We must continue to hold meetings like this to promote our care, take care of themselves. I consider it very important for nursing (Amanda)

Definition of key points

In the second workshop, after a dynamic reception, participants were encouraged to define the key points to be worked and the most determinant variables of situations raised. The definition of the key points came after the questioning of reality in the form of dialogue with the involvement of all participants. This definition summarized the key points into three categories.

The first category was titled: strategies to take care of themselves in order to care for others, understood the situations-problems: inadequate nutrition, lack of self-knowledge, lack of care for our health.

The second category was titled: Personal dimension in HSCT unit, with the overtaxed monthly scales.

The third category was titled: mental health and stressors at work, with the noise in communications between professionals, the absence of an institutional policy of encouraging professional, lack of planning in work processes, deficit of solidarity among the staff.

Theorizing

To theorize the participants opted for studying scientific articles related to the key points, and with the help of the principal researcher, papers discussing their own care, health promotion, staff sizing, physical and mental strain in nursing work were selected^(2,8-12). This step took place between the second and third workshop. In the third and fourth workshops reading and discussion of texts mentioned above were performed.

Thereafter, the participants began to realize the problem and asking why the key points observed. The theorizing was developed to provide the opportunity for dialogue among them, leading the participants to understand the problem, not only in their empirical or situational manifestations, but also the

theoretical principles that explain it. This moment allowed the study participants to abandon the naive thinking and widen their perspective to a more critical and reflective thinking, aimed at transforming the experienced reality^(5,6).

Possible solutions

At this stage, the participants elected the possible solutions they considered most relevant, confronted with the limitations of reality and the possibilities of achieving them.

Established hypotheses:

Strategies to treat themselves to promote health and can take better care of each other.

Plan:

Being with family and friends; hang out in the days off; to identify what makes me happy and what makes me sad; to delimit a daily time for reflection; sharing moments of reflection with family; physical exercise regularly; watching your diet, eat more fruits and vegetables of the season; preventing fat and soft drinks; take more fluids during the day; adequate sleep and rest; do what gives pleasure and happiness.

To develop interpersonal skills in the workplace; to support and give professional support to colleagues; to reflect on the daily actions in the care process; to create balanced environment, promoting proactive attitudes as serenity, good humor, warmth, competence, organization, responsibility, concern and empathy.

Personal dimension in TMO, according to current law;

Plan:

Studying the legislation together with the management and seek the normalization of human resources, to enable quantitative appropriate to legislation nursing technically regulating the transplantation of hematopoietic stem cells and the Resolution of COFEN- 293 / 2004⁽⁹⁾.

Mental health and stressors at work.

Plan:

To establish routines work of the HSCT process; hold fortnightly meetings for construction, implementation and evaluation of projects defined by the team; write the routines

of work, the manuals of operating procedures; making capacity of each professional nursing.

To work towards the construction of improvements in working conditions; join the movement of 30 hours per week and the appreciation of the profession in society, seeking better wages.

To create the "Caring for you at TMO" group, holding regular meetings to create spaces between the care team, avoiding accidents and diseases arising from the activities of assistance.

Forming study groups for training in oncology by promoting care and giving more visibility to the profession.

Application to reality

At this stage, the participants put into practice the solutions found and considered the more viable and applicable^(5,6).

Remembering that participants needed more time for implementing the chances of actually solutions of each one, in this stage the subjects experienced in the personnel work environment and the possible solutions raised, theorized and defined in previous workshops. It was the time to exercise learning, not only to adapt but to intervene, recreate and transform reality. This step from the Arch happened on two occasions. The first stage, the participants returned to reality for the practical implementation of possible solutions. In the second stage, the participants gathered now in person, to conduct the evaluation of the application to reality and questioning about their own care for health promotion.

In the last meeting there was a discussion on the application to reality the chances of established solutions. Each participant expressed his assessment:

The workshops help the nursing staff of our unit, transforming negative situations into propositions of solutions, also provided an opportunity to take on this care for staff, we thought and we take time to look after us (Amanda)

I believe that talking, thinking and planning related to care yourself with the nursing staff creates opportunities for reflection on how much is needed to think introspectively in our living (Sarah)

Given the results identified that the

questioning of reality along with the nursing staff about care of themselves through dialogue, with the focus on health promotion, caregiver enables the transformation of active, critical, inquisitive subject able to promote changes in attitudes in the care and care process in order to develop skills of thinking and allow the awakening of critical consciousness, transforming reality⁽³⁾.

When the study participants dialogued about taking care of themselves to promote the health of the nursing team, there are issues that permeated the interpersonal relationships in the spaces of care: self-knowledge and the difficulties of practicing self-care. From the moment the care of themselves was questioned, valued and seen as essential for health promotion, participants reflected on the right of living and the lifestyle they were adopting, relating them to ethics and esthetics in the presence of caring for themselves and others, promoting the development of the caregiver and the being cared⁽¹⁾.

The nature of work of the Oncology Nursing requires a very emotionally charged from the team, involving interpersonal relationships, work overload and workload, which often can harm the nursing professional, leading him to exhaustion. One of the alternatives to avoid job stress and burnout is taking care of themselves. The exercise of taking care of themselves and others, provides nursing staff an emotional, social and affective support, creating an environment of care, describing the assistance developed and promoting the health of the nursing worker^(1,2).

Therefore, the institution must be co-responsible for promoting the health of its employees, providing human resources, encouraging scientific activities beyond the assistance work, thus developing their own human resources as a service reference that seeks quality in assistance^(1,13). The reality found demonstrated deficit in this responsibility.

In this study, health promotion happens with emphasis on a health perspective, with concepts that identify with well-being and quality of life and not simply the absence of disease. When participants problematized and reflected on their own care, they enabled the

articulation of favorable attitudes towards personal health with new thinking about being and doing in the profession and in life, centered in a positive and dynamic concept, involving a social, economic, ecological, and not purely physical and mental perspective^(1,14-16). We believe that relations professional care walk towards the needs of the oncology client, as they allow the offer of a humanized nursing care, meeting the need for respect and dignity, allowing users health, their families and the nursing profession the role in their history, facilitating the achievement of their life projects^(1,17,18).

We emphasize that the recognition of the effects of work on health-disease process of nursing involves ethical, technical and legal implications that are reflected on the organization and quality of care⁽¹⁹⁾.

FINAL CONSIDERATIONS

The results show that good relationships in the workplace, collaboration and mutual support are strong contributors to improving the quality of life of professionals, and the scope of the object of study mediating the teaching and learning to take care of themselves, sensitizing to promote the health of the nursing staff, with the aim of promoting effective care, committed and skilled nursing, providing satisfaction to those who care and who is cared.

To talk about taking care of themselves for promoting health among professionals in nursing, we seek innovations to develop a critical reflective thinking, leading the individual to autonomy and emancipation. By participating in this study, the participants opined and proposed decisions about their health, about taking care of themselves, their family and the collective in the professional environment. They revealed that one of the ways to care for themselves in the context of nursing work occur through meetings, where it can search the organization of work processes, fostering professional growth and interpersonal relationships and recreating an environment of care.

We only reinforced the need to enhance education in the institutional environment, that concerned with the development of skills and

attitudes relating to strengthening actions aimed at promoting their own care, quality of life, respecting the principles of responsibility and autonomy to health promotion.

O CUIDAR DE SI PARA PROMOÇÃO DA SAÚDE: OS CUIDADOS DA ENFERMAGEM

RESUMO

Pesquisa convergente-assistencial que objetiva problematizar ações do cuidar de si da equipe de enfermagem de uma unidade de transplante de células-tronco hematopoiéticas para promoção da saúde, por meio do diálogo, buscando inovações para o pensar e o fazer. Para a sustentação teórica, foram utilizados os pressupostos filosóficos e as concepções teóricas de Radünz e os princípios teóricos de Freire. Como estratégia para coleta de dados, utilizou-se o Arco da Problematização de Maguerez, aplicado em cinco oficinas, que ocorreram de agosto a outubro de 2010. As oficinas foram gravadas, transcritas, notas da pesquisadora, e registradas em diário de campo. 18 profissionais de enfermagem participaram da pesquisa. Os resultados revelam que o bom relacionamento no ambiente do trabalho, a colaboração e apoio mútuo contribuem para a melhoria da qualidade de vida dos profissionais. A necessidade da valorização de educação continuada, preocupada com o desenvolvimento de habilidades e atitudes pessoais, também emergiu dos dados, demonstrando uma relação com o fortalecimento das ações que visam promover o cuidar de si e a qualidade de vida, respeitando os princípios da responsabilidade e da autonomia para promoção da saúde.

Palavras-chave: Educação em saúde. Enfermagem. Oncologia. Promoção da saúde. Transplante de Células-Tronco Hematopoiéticas.

CUIDAR DE SÍ MISMO PARA LA PROMOCIÓN DE LA SALUD: LA TRANSFORMACIÓN DE LA PRÁCTICA DE LOS CUIDADOS DE ENFERMERÍA

RESUMEN

Investigación convergente asistencial, cuyo objetivo ha sido desarrollar la problematización sobre las acciones del cuidar de sí que la enfermería en la unidad de trasplante de células madre hematopoyéticas realiza para la promoción de la salud, por medio del dialogo, buscando innovaciones para el pensar y el hacer. En el soporte teórico, han sido utilizados los propuestos filosóficos y los conceptos teóricos de Radünz y el referencial de Freire. Se ha utilizado como estrategia para la colecta de datos el Arco de la Problematización de Maguerez, aplicado en cinco reuniones, que se llevó a cabo de agosto a octubre de 2010. Las reuniones fueron grabadas y transcritas, otros datos fueron registrados en el diario de campo. Dieciocho profesionales de enfermería han participado de la investigación. Los resultados revelan que la buena relación en el ambiente de trabajo, la colaboración y el apoyo mutuo, además de contribuir para la mejoría en la calidad de vida del profesional y la necesidad de mejorar la educación en el entorno institucional, relacionado con el desarrollo de habilidades y actitudes relacionados con el fortalecimiento de las acciones de promoción del cuidado de sí, calidad de vida, respetando los principios de responsabilidad y autonomía para promover salud.

Palabras clave: Educación en la Salud. Enfermería. Oncología Médica. Promoción de la Salud. Trasplante de Células Madre Hematopoyéticas.

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