REFLECTIVE ARTICLE

NURSING CARE OF HIV-POSITIVE PATIENTS: CONSIDERATIONS IN THE LIGHT OF PHENOMENOLOGY

CUIDADOS DE ENFERMAGEM AOS INDIVÍDUOS SOROPOSITIVOS: REFLEXÃO À LUZ DA FENOMENOLOGIA ATENCIÓN DE ENFERMERÍA PARA PERSONAS CON VIH/SIDA: REFLEXIÓN A LA LUZ DE LA FENOMENOLOGIA

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ABSTRACT

This reflective study aimed to discuss nursing care to patients with HIV/AIDS in the light of phenomenology. It deals with the humanization of care of HIV-positive individuals and how nursing professionals should act in order to achieve it. Comprehensive health services provided by qualified professionals that take into consideration users' emotional, social and cultural aspects can improve patients' quality of life, treatment adherence and increase life expectancy. The use of phenomenological concepts was essential to understand the relationship between patient and professional practice. The method allowed researchers to identify aspects of patients' everyday life by sharing their experiences.

Keywords: Nursing Care; HIV; Philosophy; Humanization of Assistance.

RESUMO

Trata-se de estudo reflexivo, que objetivou discutir o cuidado realizado por profissionais de enfermagem às pessoas que vivem com HIV/AIDS à luz da percepção fenomenológica. Foram discutidas questões acerca da humanização do cuidado em saúde e como este deve ser realizado por profissionais de enfermagem aos indivíduos soropositivos. Pôde-se observar que a prestação de serviços por meio de profissionais qualificados e capacitados, quando realizado do modo integral, considerando toda a subjetividade do usuário, como os aspectos emocionais, sociais e culturais, pode proporcionar melhoria na qualidade de vida, adesão ao tratamento e longevidade. Dessa forma, para melhor compreender a relação da prática de profissionais de saúde com o cliente, foi fundamental a utilização do método fenomenológico, pois possibilita a compreensão do cotidiano do mundo, a partir do conhecimento de suas vivências e no compartilhamento de suas experiências.

Palavras-chave: Cuidados de Enfermagem; HIV; Filosofia; Humanização da Assistência.

RESUMEN

Se trata de un estudio reflexivo cuyo objetivo fue debatir a la luz de la fenomenología la atención de los profesionales de enfermería para personas con VIH/SIDA. Se discutieron asuntos referentes a la humanización de la atención de la salud y el desempeño de los profesionales para brindar tal atención a las personas con VIH/SIDA. Se observa que cuando profesionales calificados y capacitados brindan atención integral a los pacientes les proporcionan mejor calidad de vida, más adherencia al tratamiento y longevidad. Sin embargo, siempre debe tenerse en cuenta la subjetividad de los usuarios además de los aspectos emocionales, sociales y culturales. De esta manera, para entender mejor la relación entre la práctica de los profesionales de la salud y los clientes, el método fenomenológico, que permite comprender el mundo cotidiano a través del conocimiento de sus vivencias y de compartir sus experiencias, ha sido fundamental.

Palabras clave: Atención de Enfermería; VIH; Filosofía; Humanización de la Atención.

INTRODUCTION

AIDS is caused by a human immunodeficiency virus (HIV). Initial cases appeared in the Eighties amongst homosexual males. The growth in the number of cases created stigmas which are still experienced nowadays. HIV-related discrimination is a priority research subject according to the World Health Organization (WHO), since it can be as damaging as the disease itself, particularly in public health.¹

Thanks to scientific advances AIDS, once lethal, is now classified as a chronic disease. Antiretroviral therapy increased life expectancy and improved the quality of life of people living with HIV/AIDS (PLWHA).² The therapy also contributed to raise the rate of treatment adherence. However, treatment abandonment is still frequent, often linked to incorrect use of medications and their side effects, among which lipodystrophy – redistribution of body fat and consequent change of body image.³

The quality of life of PLWHAs is directly related to the biopsychosocial dimension of the subjective experience of our bodies fighting infection, which requires a more comprehensive health care approach.⁴

The insertion of nursing professionals in the care provided to PLWHAs emphasizes the importance of nursing diagnoses for the planning of interventions. Nurses should be able to deliver humanized, integrated, individualized care, soundly grounded on scientific knowledge, according to the Systematization of Nursing Care (SAE). Thus, nursing actions should aim at the protection and recovery of health, patients' treatment adherence and self-care.⁵

Research on the relationship between nursing and the care of PLWHAs in the light of a theoretical framework that supports and reflects such context is still incipient.

This fact originated concerns that can be summed up by the following questions: How can nursing provide humanized and qualified care to PLWHA? How can the National Programme for the Humanization of Care influence nursing care?

Such concerns guided the present study and set the objective of reflecting on the care provided to those patients in the light of Husserl's conception of phenomenology.

METHODOLOGY

This is a reflective study based on phenomenology and the authors' perceptions about the subject matter. They attempted to analyse the literature dealing with nursing care and HIV. The research was divided into two thematic approaches: "humanization of health care"; and "considerations on care in the light of phenomenology".

NURSING CARE OF PEOPLE LIVING WITH HIV/AIDS

HUMANIZATION OF CARE

This issue emerged from concerns about the humanized care nursing professionals should provide to people living with HIV/AIDS (PLWHA). The Unified Health System (SUS) was referred to, since the Brazilian public healthcare system was established through that institution.

Despite its fair and humanitarian principles, the SUS has significant challenges, such as financing, universal and equitable access to health services, lack of recognition for the health professional and administration obstacles that generate long waiting lists for consultations, demonstrating the disregard for users' right to health.^{6,7}

In 2003, the Department of Health launched the National Humanization Programme (PNH). Its objective is to promote changes in health management and care, labour processes, vocational training, and social control; therefore the SUS can truly fulfil its principles and guidelines, dignifying healthcare practices, actions and services.⁸

Humanization of care is a broad issue applicable to all levels of the health system. It seeks to encourage dialogue between managers, workers and users, strengthening their relationship as well as comprehensiveness and equity of care. It also recognizes the importance of getting professionals and users involved in the process because such players trigger changes in management and care processes.⁹

In order to make care a truly human practice, the body must be considered beyond today's prevalent biological approach, often reductionist and curative. Care is a science but also an art that develops from the interaction between nurse and user. Consequently, fastening the care of the body to the care of the mind, the PNH can point out new approaches to health professionals.

Regarding people with HIV/AIDS, it is through the health service that these individuals manage to have their daily needs seen to and their concerns addressed. People affected by the disease are generally more sensitive and lacking in attention, needing not only therapeutic, but also psychological care.

The PNH intends to offer humanized care to HIV-positive individuals through welcoming services and qualified listening, focussing in problem-solving methods to fulfil their needs and delivering an effective and holistic service according to the principles of comprehensiveness and equity of care.

The PNH is based, therefore, on the partnership between users and health professionals throughout the care process. The strengthening of the programme makes it closer to vo-

cational training, social control and management, in order to achieve the programme objectives and increase levels of satisfaction among professionals and users.

Humanization of care encompasses several aspects, such as the right to health in all its subjectivity, comprehensiveness and welcoming in order to minimize users' and nursing professionals' anxieties in favour of the care process.

CONSIDERATIONS ABOUT CARE IN THE LIGHT OF PHENOMENOLOGY

Caring as a way of living and interacting with the world accompanies the human race since its beginning.¹⁰ It is a transcendental act because it deals with phenomena that go beyond what the eye can see; it extrapolates protocols and technical handbooks; it is guided by harmonious relations and governed by a trusting relationship between caregiver and patient; it emphasizes that the technical dimension should not override the human dimension.¹¹

Considering the above, the energy field of health professionals can influence the recovery of the patients' energy and may contribute to the improvement or worsening of their health. This fact is demonstrated by quantum mechanics, which considers that there is a relationship between mind and body.¹¹

During the care process, health professionals should seek their inner balance, harmonizing their life energy before and after shifts for them not to lose energy to the environment or acquire any that may harm their stability, affecting patients' health and the disease process and, consequently, their performance.

Caring has evolved over time and is the essence of nursing. However, it has not always been discussed under ontological and holistic concepts. Although being the subject of many researches that attempt to understand and improve such events, there is still a big gap between the professional –client relationship, as well as lack of appreciation of the existential dimensions of patients.¹⁰

The present study is based on Martin Heidegger's phenomenological theories. This German avant-garde philosopher addresses care according to the relocation of the being and the re-establishment of ontology in which phenomenology is, first of all, the human world:

Linked only to the existence of man in the world, being understood as the same-being in the world [...], therefore, man only exists as being-with-others. That is why for the phenomenology of care, to exist is to take care of being; it is to take care, to be oneself and to be with others; it is the existence in coexistence; it is how the being cares for the others.^{12:201}

To be aware of the extent to which phenomenology may permeate care processes will help nursing professionals (carers)

to build genuine bonds with clients (being cared). Situations and individuals will, therefore, be unique and the welcoming process recommended by the PNH will no longer be seen as a "technique" guided by scientific rationality. According to Heidegger, the proximity between human beings makes them discover their wishes, desires, feelings, anxieties and expectations.¹⁰

To think about nursing is to think about caring which consequently requires philosophical reflection in order to expand the knowledge identified through daily human experiences. Phenomenological studies anchor nursing actions addressed to HIV-positive individuals since they enable the researcher to understand the phenomenon AIDS. ¹³

According to this perspective, nursing professionals should adopt a humanized and holistic approach regardless of the disease. They should take into account physical health as well as mental health, key to the treatment, especially in PLWHAs because they have to face the stigma created around the disease.

Nursing professionals should welcome HIV seropositive people as any other clients, taking into account their own special needs. Nursing practices should join technical and scientific knowledge to philosophical concepts of care, consolidating and valuing the others as whole beings, keeping in mind humanizing principles.¹⁴

Considering the phenomenological notion that to exist is to take care of being and to take care of being oneself, it is important to emphasize that some HIV-positive individuals are inserted in a context in which they are able to acquire a favourable lifestyle. They are more interested in self-care and appreciate their life story, from diagnosis to all life changes and situations that brought them to that reality.

The internationally recognised Brazilian National Programme on STDs and AIDS supplies since 1996 antiretroviral drugs free of charge to HIV-positive individuals.¹⁵ Moreover, the country has HIV/AIDS specialized care services based on welcoming and comprehensive approaches characterized by the involvement between caregivers and patients that enables the establishment of a trusting relationship between the parties.

It is vital to reflect on aspects of nursing practices and the care of PLWHAs. This could contribute to the improvement of interventions that go beyond the disease and the clinical control of situations, overcoming purely biological approaches to nursing.¹⁶

It is necessary to offer to the nursing professionals the occasion to reflect on and discuss about their practice beyond its theoretical knowledge. Ethical care prioritizes not only the disease, but also the patients' subjectivity, i.e. their emotional, cultural and social dimensions.

FINAL CONSIDERATIONS

Nurses are an essential member of the health care team. They should promote the universality, equality and compre-

hensiveness of healthcare to HIV-positive individuals based on humanistic, holistic and welcoming principles. Such approach could contribute to higher rates of treatment adherence and to increased quality of life and life expectancy.

The above context could be analysed through a phenomenological perspective that may lead researchers to the study of daily life in the world, of being-in-the-world and being-with-others based upon the identification and sharing of their own experiences. Therefore, it is valid for researchers to use such phenomenological concepts that could support and improve further studies in the health area.

REFERENCES

- Moreira V, Meneses AM, Andrade DB, Araújo MC. Fenomenologia do estigma em HIV/AIDS: coestigma. Mental. 2010; 8(14):115-31.
- Meirelles BHS, Silva DMGVD, Vieira FMA, Souza SDSD, Coelho IZ, Batista R. Percepções da qualidade de vida de pessoas com HIV/aids. Rev Rene. 2010; 11(3):68-76.
- Gomes AMT, Silva EMP, Oliveira DC. Representações sociais da AIDS para pessoas que vivem com HIV e suas interfaces cotidianas. Rev Latino-Am Enferm. 2011; 19(3):485-92. [Cited 2013 Jan. 12]. Available from: http://www. scielo.br/pdf/rlae/v19n3/pt_06
- Medeiros B, Silva J, Saldanha AAW. Determinantes biopsicossociais que predizem qualidade de vida em pessoas que vivem com HIV/AIDS. Estud Psicol. 2013; 18(4):543-50.
- Faria JO, Silva GA. Diagnósticos de enfermagem do domínio segurança e proteção em pessoas com HIV/Aids. Rev Eletrônica Enferm. 2014;16(1):93-9. [Cited 2013 Jan. 12]. Available from: http://h200137217135.ufg.br/index.php/fen/article/view/19977/16447

- Brasil. Ministério da Saúde. Secretaria de Vigilância em Saúde. Secretaria de Atenção à Saúde. Política Nacional de Promoção da Saúde. Brasília: Ministério da Saúde; 2010. 60 p.
- Simões ALA, Rodrigues FR, Tavares DMS, Rodrigues LR. Humanização na saúde: enfoque na atenção primária. Texto Contexto Enferm. 2007; 16(3): 439-44.
- 8. Brasil. Ministério da Saúde. Secretaria-Executiva, Núcleo Técnico da Política Nacional de Humanização. HumanizaSUS. Política Nacional de Humanização: a humanização como eixo norteador das práticas de atenção e gestão em todas as instâncias do SUS. Brasília: Ministério da Saúde; 2004. 20 p.
- Brasil. Ministério da Saúde. Secretaria de Vigilância em Saúde. Departamento de DST, Aids e Hepatites Virais. Bol Epidemiol Aids DST. 2013; 2(1). [Cited 2012 Dec. 20]. Available from: http://www.aids.gov.br/sites/default/files/anexos/ publicacao/2013/55559/_p_boletim_2013_internet_pdf_p__51315.pdf
- 10. Duarte MR, Rocha SS. As contribuições da filosofia heideggeriana nas pesquisas sobre o cuidado em enfermagem. Cogitare Enferm. 2011; 16(2):361-4.
- Borges MS, Santos DS. O campo de cuidar: uma abordagem quântica e transpessoal do cuidado de enfermagem. Ciênc Cuid Saúde. 2013; 12(3):606-11.
- Ferreira AOM, Lima DVM. Fenomenologia do cuidado e do cuidar: perspectivas multidisciplinares. Rev Enferm UFPE on line. 2012; 6(8):2001-3. [Cited 2012 Dec. 15]. Available from: http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/3056/pdf_1402
- Carraro TE, Kempfer SS, Sebold LF, Oliveira MFV, Zeferino MT, Ramos DJS, et al. Cuidado de Saúde: uma aproximação teórico-filosófica com a fenomenologia. Cult Cuid. 2011; 15(29):89-96.
- Pacheco ZML, Paz EPA, Silva GA. Relacionamentos afetivos no cotidiano do adolescente portador do HIV: desvelando seus significados. REME - Rev Min Enferm. 2011; 15(4):567-72.
- Brasil. Ministério da Saúde. Secretaria de Políticas de Saúde. Coordenação Nacional de DST e Aids. Política Nacional de DST/Aids: princípios e diretrizes. Coordenação Nacional de DST e Aids. Brasília: Ministério da Saúde; 1999. 90 p.
- Ferreira DC, Silva GA. Caminhos do cuidado: itinerários de pessoas que convivem com HIV. Ciênc Saúde Coletiva. 2012; 17(11):3087-98.