

REFLECTIVE ARTICLE

REASONS FOR EMPOWERMENT IN NURSING: REFLECTIONS IN LIGHT OF ALFRED SCHUTZ

MOTIVOS PARA O EMPODERAMENTO DA ENFERMAGEM: REFLEXÕES À LUZ DE ALFRED SCHUTZ

MOTIVOS PARA EL EMPODERAMIENTO DE LA ENFERMERÍA: REFLEXIONES A LA LUZ DE ALFRED SCHUTZ

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ABSTRACT

This was a reflective study based on the question: what are the current challenges (the reasons-for) for the affirmation of empowerment in nursing practices? We aimed to reflect on the reasons-for the empowerment in nursing, based on the theoretical framework of Alfred Schutz. Understanding the reasons-for as a set of things to be established, the purpose to be achieved, the project to be conducted, and the willingness to do so, we reflected on such motives, seeking the affirmation of empowerment in nursing, embracing: nursing practice as intentionally constructed action; scientific knowledge that did not negate the biographical situation of the subjects; practices that resulted in a face-to-face relationship; and systemic care inserted into the complexity of everyday lives. We concluded that reflecting on the reasons-for the empowerment in nursing meant the highlighting of many challenges outlined in the current panorama of this profession.

Keywords: Nursing; Nursing Care; Philosophy, Nursing; Power.

RESUMO

Trata-se de um estudo reflexivo tendo por base o questionamento: quais são os desafios atuais (os motivos-para) para a afirmação do empoderamento nas práticas de enfermagem? Objetiva-se refletir acerca dos motivos-para o empoderamento da Enfermagem, à luz do referencial teórico de Alfred Schutz. Compreendendo os motivos-para como o estado de coisas a ser estabelecido, o fim a atingir, o projeto a realizar e à vontade de fazê-lo, reflete-se acerca de tais motivos, cujo escopo é a solidificação do empoderamento da Enfermagem, abarcando: a prática de enfermagem como ação, intencionalmente edificada; o conhecimento científico que não nega a situação biográfica dos sujeitos; as práticas que se traduzem num relacionamento face a face; e o cuidado sistêmico inserido num mundo vida cotidiano complexo. Conclui-se que refletir acerca dos motivos-para o empoderamento da Enfermagem significa colocar em relevo muitos desafios traçados no atual panorama dessa profissão.

Palavras-chave: Enfermagem; Cuidados de Enfermagem; Filosofia em Enfermagem; Poder.

RESUMEN

Se trata de un estudio reflexivo en base a la pregunta: ¿cuáles son los retos actuales (razones) para la consolidación del empoderamiento en las prácticas de enfermería? Su objetivo es reflexionar sobre las razones para el empoderamiento de la enfermería a la luz del marco teórico de Alfred Schutz. Al entender razones tales como el estado por establecer de las cosas, el objetivo, el proyecto y la voluntad de realizarlo, se reflexiona sobre tales razones. Su alcance es consolidar el empoderamiento del rol de la enfermería, que incluye la práctica de enfermería como acción, construida deliberadamente; el conocimiento científico que no niega la situación biográfica de los sujetos; las prácticas que se traducen en la relación cara a cara; y el cuidado sistémico insertado en el mundo/ vida/cotidiano complejo. Se llega a la conclusión de que reflexionar sobre las razones para consolidar el empoderamiento de la enfermería significa realizar muchos de los retos descritos en el panorama actual de la profesión.

Palabras clave: Enfermería; Atención de Enfermería; Filosofía en Enfermería; Poder.

INTRODUCTION

To define empowerment constitutes the first challenge for reflection about the reasons-for the consolidation of nursing practices grounded in their professional power. In this manner, to understand the sense of *empowerment* (reads as, *to have power*), discussions of an abstract nature emerge, whose much older understandings were associated with actions of military and governmental control, representing ideas of authority, force, coercion, manipulation, influence and control.¹

Analyzing the definition through the Virtual Health Library (VHL), using the Health Sciences Descriptors (MeSH), elucidated a very close resemblance to such meanings: the descriptor *power*, synonymous with *empowerment*, was understood as "*having great influence or control over others in a variety of contexts - administrative, social, academic, etc.*"²

In this perspective, it is necessary to highlight an intrinsic discussion about the attempt of conceptualization: the distinction between *power* and *authority*. Such differentiation can be perceived when power is understood as the potential to exercise influence, without this influence being exercised obligatorily; and authority as a most controversial act, representing legal, institutionalized power, that is, coercive and compulsory.³

What this denotes, however, is that, in the common sense, the idea prevails that power is the capacity of exercising influence for the acceptance of different thoughts, even against one's will; that is, power, in this view, carries strongly authoritarian and individualistic traces of the relationship.¹ In parts, vestiges of this understanding can be viewed in the aforementioned MeSH definition.

In contrast, alongside these meanings, newer and comprehensive understandings describe power as a transformational phenomenon that promotes individual and group growth by the encouragement of reciprocity, stimulating creative thinking, expansion of knowledge and fostering of awareness.¹

In this sense, the action is collective transformation, in which intentional desires of being part of a team can be glimpsed, that influences and is influenced by its members, which is how we will understand *empowerment* in this study.

In other words, it is understood that relationships of power are not one-way relationships, nor do they stop at a single moment in time.⁴ On the contrary, the discussions involving power relationships in nursing practice are complex and permeate professional practices and subjectivity of the involved individuals.⁵

Thus, to search for an understanding of the challenges that are experienced to affirm the empowerment of nursing assumes embracing such a profession as a key part of health practices, perceived as human and existential issues shared by all segments of society, which are part of a complex reality that requires distinct knowledge: "*the health team is presented with*

a multidisciplinary profile and the work of the nurse suffers influences in how it is exercised, constituting an interdisciplinary system that has power as a guiding thread".⁶

It is evident, however, that there are many elements, largely historically determined, which hinder the visibility of the power of nursing, among which are emphasized: a less socially visible profession; little decision-making power assumed by nurses in health institutions, which is more focused on operationalization than policy formulation; the historical constitution of nursing work was related to traditional training, which emphasized a culture of subordination; and, an obscure description of the responsibilities and profiles for each hierarchical level which leads to difficulties for the management of nursing actions.^{3,4,7}

Even facing such problems in affirming the empowerment of nursing, it is undeniable that in modern times such a profession is part of a debate in the search for transformations, aiming to solidify it as a scientifically-grounded category, that through means of the consolidation of caring, is guided by the science-art binomial.

It is in this conjuncture that the possibility of reflection on the challenges for the empowerment of nursing is highlighted from the comprehensive sociological phenomenology of Alfred Schutz, building on the idea that the practices of nursing activities are of a complex nature, guided in a face-to-face relationship of intersubjectivity, which is regulated by motivations, especially, in the current study, the reasons-for their actions.

Given these considerations, the study question elucidated was: what are the current challenges (the reasons-for) for the affirmation of empowerment in nursing practice? The objective was, therefore, to reflect on the reasons-for the empowerment of nursing, in light of the theoretical framework of Alfred Schutz.

THEORETICAL FRAMEWORK

Alfred Schutz, known as a social phenomenologist, was born in Vienna in 1899, a city in which he studied law and social sciences at the University of Vienna, having influential professors, such as Hans Kelsen, Ludwig von Mises, Friedrich von Wieser, and Othmar Spann.⁸

Schutz proposed a comprehensive social science, called comprehensive phenomenological sociology, in opposition to the empiricist position, based on the place occupied in the world of everyday life, as an expression of intersubjective processes of subjects, understanding that they are intersubjectively shared meanings that define the type of relationship that is established with others in one space and in one time.⁹

His main investigations, therefore, revolved around the social actor, in the environment in which he related to others and

to the projects of action that they formulated, which could only be understood through the motivations of the subjects.¹⁰⁻¹²

In this scenario, it is understood from the conceptions of Schutz, that understanding the motivations of nursing is unmatched for asserting the empowerment of its practices, which will make it possible to highlight the challenges faced at the present time, seizing, in a comprehensive manner, the possibilities of power to be glimpsed in nursing practice.

In his theory of motivation, Schutz developed the concepts of reasons-for and reasons-why to interpret the behavior of the subjects in the social world. Such reasons integrated what Schutz defined as motivational contexts:

"[...] motivational context is, by definition, the context of meaning within which a given action is encountered by virtue of its status as a project or act of a particular actor".⁸

In the study on display, the reasons-for are highlighted, which are essentially subjective, constituting the goals that seek to achieve a temporal structure with a look toward the future, forming a subjective category of action, that is, reasons that are closely related to action and the awareness of the actor:

"In the relationship-for, the motivated experience (i.e., the decision, the action) is anticipated in the motivating experience (i.e., the decision, the project), and it is represented in it, in the future perfect tense".⁸

REASONS-FOR THE EMPOWERMENT OF NURSING

Based on the reasons-for refer to the state of affairs to be established, at the end to achieve the project to be conducted and the willingness to do so,¹³ is reflected on such grounds whose end is the solidification of the empowerment of nursing, from the reference of Schutz, comprising: a practice of nursing as action, constructed intentionally; the scientific knowledge that does not negate the biographical situation of the subjects; the practices which translate into a face-to-face relationship; and care systemically inserted into the world of complex everyday life. Such reflections, which should not be visualized in a fragmented manner, but as integrated and complex, as outlined below.

NURSING PRACTICE AS ACTION

One of the barriers for the assertion of empowerment of nursing is the permanence of spontaneity of its practices. In a contextualized manner, reflecting the contemporary mode of life, pragmatic and mercantilistic, appears to impose a routine

that, most of the time, is inconsistent with reflections relating to the act, preventing reflection on the purpose of the actions, a unique element for the empowerment of practice.¹⁴

Meanwhile, it is elucidated as a reason-for in the rescue of the power of nursing, according to the conception of Schutz, to affirm the profession as a social action,^{15,16} in contrast to the reductionistic view of behavior:

"[...]The distinctiveness between action and behavior is that the action is the execution of a designed act".⁸

To overcome a simple behavior means to apprehend nursing not as spontaneous practice, absent of planning and scientific basis. To understand nursing as an action is understood as a defense of a profession with a solid scientific basis, an aspect that still needs to be solidified:

"[...] in terms of social action, the professional practice is in the early stages, since nurses in their motivations reveal desires of having behaviors based in projects, however, these are not yet reflected in the social world as action".¹⁶

Therefore, it is necessary to reaffirm the clinical power of nursing, understood as the perception of the nurse as being intellectually, physically and emotionally capable and prepared to interpret human responses, to plan, implement and evaluate nursing interventions in an effective manner, providing more awareness to the clinical role, more intentionality and involvement in deciding what to do.¹

Claiming nursing practice as action, in this context, translates into the comprehension of power as a mechanism of reconstructing, of rescue and restructuring, including, primarily, the awareness of nursing staff in the perspective of their emancipation as social subjects and, later, the defense of nursing as a category that has responsibilities such as institutional projects and with the users, recovering or earning the right to, effectively, have a role in decisions related to the process of health work, from which it is inseparable.⁷

SCIENTIFIC KNOWLEDGE AND BIOGRAPHICAL SITUATION

The literature unanimously emphasizes the role of scientific knowledge in the affirmation of nursing as a profession with a solid base, in other words, one which is based in the empowerment of its practices.^{4,5,7,14} Knowledge, as a means of obtaining competency in acting and securing of power, provides safety in decision making, supports competencies and abilities and confers dominion in a scientifically consensual form.¹⁴ In summary, it can be seen that *"the power of caring is legitimized through knowledge, which, in turn, also generates a power".⁴*

However, it is *sine qua non* that to understand scientific knowledge as a medullary foundation of practice, without implying the negation of the biographical situation of users and professional. In other words, it is understood that the ontological reflection can not be neglected, it must insert the subjects, integrally, in the nursing actions, so the empowerment of the profession does not become authoritarianism.

The search for the valuing of nursing practices, then, requires that professionals invest in seeking knowledge that supports the provision of quality care and that, moreover, they are willing to discuss the meaning of this quality care, according to the sociocultural reality of the users.⁵

To the contrary, knowledge can, in addition to conferring power to nursing, ensure the illusion of exemption from responsibility, making it appear believable, fallaciously, that science substitutes responsibility in decision-making and provides security to professional action.¹⁴

So that this is not consolidated, it is necessary to glimpse what Schutz calls the biographical situation: what gives to man the biographical historical character in which he finds himself, the background that is available and which functions as a scheme of reference for any world interpretation.¹⁶

The nursing professional, in this way, should visualize the person as a whole, in all dimensions, in his interactions with the patient, family and community and, therefore, nursing care will involve the understanding of knowledge and psychosocial, cultural and economic experiences, of the patient,¹⁵ comprehending that *"to care, we must know one another's lives, his biographical situation, his background knowledge"*.¹²

It is highlighted, even, in the context of scientific knowledge, which includes the biographical situation of the subjects, the role of research in the affirmation of the empowerment of nursing. Scientific investigations enable the construction of knowledge and wisdom specific to health, to search for answers related to numerous aspects of the health-disease process and of human life, and to provide subsidies which provide a change in the practice of care, consolidating its position as the major path to construction and expansion of the foundations which constitute nursing knowledge.¹⁰

Phenomenology, in this panorama, plays an essential role in this scenario. The study that sought to analyze the use of the phenomenological reference in nursing research revealed that, the unraveling of the singularities of the human being, when designing their actions and relationships in the health scenario and uncover the meanings by the mediation of the bodily expressions, by conceiving their actions and relationships in the health scenario and uncover the meanings by the mediation of bodily expressions. Nursing establishes the dialogical attitude, an encounter permeated by subjectivity and interaction, in a process of searching for understanding of the other, with, in a descending order, the philosophical references

most often used: Martin Heidegger, Alfred Schutz and Maurice Merleau-Ponty.¹⁷

Phenomenology, then, has enabled nursing to investigate various dimensions of human existence at a given time and space shared with others and with the world, from its singular and unique way of intending the existential phenomena,¹⁰ which has contributed for the defense of nursing as a profession that is guided in its assertion of empowerment practices.

FACE-TO-FACE RELATIONSHIP

Alfred Schutz understood that it was in the face-to-face relationship that one directly perceives the other, in a moment of social interaction, in a relationship between us, a direct experience between people, which only takes place when there is community of space and time.¹³ A face-to-face relationship, in this manner, leads nursing to experience the user as a person whose body is a field of expressions, directing care for the "us".¹⁶

It is imperative, in this sense, to understanding that the empowerment of nursing requires the establishment of a face-to-face relationship, both with the users, their families and communities, and with the multidisciplinary team, seizing the intersubjectivity of the subjects, respecting their biographical situation and, also, elucidating transformative practices that underpinned by common objectives, based on group motivation.

It is said that based on that relationships of power entrenched in an intransigence are transformed into relationships of domination, much more than in power relations themselves.⁵ Thus, empowerment can be understood from a beneficial vision, understanding that "the ability to influence people can be directly related to the power of learning not to walk alone, to assume the risks and challenges, to transform ideas into action".⁶

Therefore, there are characteristics considered fundamental for the exercise of nursing practices guided by empowerment: availability, affinity and capacity to deal with management issues; domain, tranquility and leadership capacity, ability to interact, to relate and to establish networks of contacts, attraction for what is new and ability to confront challenges, to be political in one's different relationships, to have emotional stability, to be determined and professional.¹⁸

SYSTEMIC CARE: EVERYDAY LIFE COMPLEX WORLD

Everyday life in the world, as conceived by Schutz, is the space in which humans are situated with their daily problems in intersubjectivity with their peers; it not only constitutes a natural world, but a social, historical and cultural one.⁸ Searching for the interpretation of the life subjects in the world corresponds, therefore, to the recognition of the importance of

understanding the experience of the subjects and reflection about the origins of the experiences, which will enable knowledge of a phenomenon.¹⁶

Nursing, asserting itself as a profession that integrates caring in the science-art binomial, seeking its empowerment, is part of everyday life in a complex world of users, requiring, therefore, solidification of systemic caring. Therefore, the systematization of nursing care emerges as the organization of care by means of an integration between system and action, as an essential work tool for the qualification of nursing practice.^{19,20}

Systemic nursing care is highlighted in relevance to ethics, morality and aesthetics, visualizing the user beyond a sick / fragile individual, representing the challenge of producing a circular and recursive care, based on scientific-humanistic knowledge that guides nursing praxis, expanding the relationship between subjects in an intersubjective manner.¹⁹

In summary, the reflection on relationships of power in nursing presents the existence of multiple plots: a plot of the recognition of care as power; the plot of the frantic search for administrative positions, through the visibility of power, in detriment to approaching the patient to perform its primary function, of caring; the plot of the lack of recognition of the profession; the plot of the function to play within the health care team's historical and culturally-penetrated role of continuous and invisible occupations.⁴

FINAL CONSIDERATIONS

To reflect upon the reasons-for the empowerment of nursing means to place into relief many challenges outlined in the current panorama of this profession, that seeks, increasingly, to assert itself as a category with a solid scientific base, without neglecting the essence of the component that defines it: caring.

Also in addition to this, in this context of reflections, unique contributions of the theoretical foundation of Alfred Schutz, who, through his comprehensive sociological phenomenology, enriches the debate, affirming the essentiality of the rescue of intersubjectivity in human relationships, in a face-to-face relationship, that glimpses the biographical situation of all those involved.

These concepts constitute basic elements for construction of empowerment within nursing, that is based in power relationships claiming the component "us", restructuring nursing practices as social actions guided by the bilateral aspect of human relationships.

It is hoped, in this manner, to contribute to the reasons-for the empowerment of nursing, approached in this article, to transform it into broader discussions, allowing, in the future, that such reflections can be understood as reasons-why for a practice already well established and guided by the power of nursing in the scenario of health actions.

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