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REFLECTION

Nursing theories and models that enhance professional practice

Teorias de enfermagem e modelos que fortalecem a prática profissional

Teoría de enfermería y modelos que fortalecen la práctica profesional

Adrize Rutz Porto¹, Maira Buss Thofehrn², Daiane Dal Pai³, Simone Coelho Amestoy⁴, Leandro Rauber Joner⁵,
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ABSTRACT

Objective: The present study aims to propose a reflective rethink theories about nursing from the Theory of Professional Links. **Method:** This is a theoretical reflection that addresses the importance of theories, as a working tool, which formalize the actions of the nursing profession and as a social practice, which builds daily. **Results:** First, there is the context of the construction of nursing knowledge and subsequently the Theory of Professional Links as an important management tool working to develop and strengthen human relationships nursing teams, using a model flexible and adaptable to reality and creativity of nurses. **Conclusion:** It is believed that nursing can provide their professional identity and its body of knowledge, more broadly, including subsidies brought there by the Theory of Professional Links relational issues that mark with a lot of intensity to do nursing. **Descriptors:** Nursing, Nursing theories, Work environment.

RESUMO

Objetivo: O presente estudo reflexivo tem por objetivo propor um repensar acerca das teorias de enfermagem a partir da Teoria dos Vínculos Profissionais. **Método:** Trata-se de uma reflexão teórica que aborda a importância das teorias, como instrumentos de trabalho, os quais formalizam as ações da profissão e a enfermagem, como uma prática social, que é cotidianamente construída. **Resultados:** Primeiramente, destaca-se o contexto da construção do conhecimento da enfermagem e, posteriormente, a Teoria dos Vínculos Profissionais, como um importante instrumento gerencial de trabalho, para desenvolver e fortalecer as relações humanas das equipes de enfermagem, por meio de um modelo flexível e adaptável à realidade e à criatividade dos enfermeiros. **Conclusão:** Acredita-se que a enfermagem poderá constituir sua identidade profissional e seu corpo de conhecimento, de maneira mais ampla, incluindo-se aí os subsídios trazidos pela Teoria dos Vínculos Profissionais às questões relacionais, as quais marcam com muita intensidade o seu fazer da enfermagem. **Descritores:** Enfermagem, Teorias de enfermagem, Ambiente de trabalho.

RESUMEN

Objetivo: El presente estudio tiene como objetivo proponer una reflexión acerca de repensar las teorías de enfermería de la Teoría de los vínculos profesionales. **Método:** Se trata de una reflexión teórica que aborda la importancia de las teorías como instrumentos, que formalizan las acciones de la profesión y de enfermería como práctica social, que construye todos los días. **Resultados:** En primer lugar, se aborda el contexto de la construcción del conocimiento en enfermería y más tarde, la teoría de los vínculos profesionales como importante instrumento gerencial de trabajo para la conformación y fortalecimiento de las relaciones humanas de los equipos de enfermería, a través de una flexible y adaptable a la realidad y la creatividad de las enfermeras. **Conclusión:** Se cree que la enfermería puede proporcionar su identidad profesional y el cuerpo de conocimiento, en términos más generales, incluidas las subvenciones llevado allí por la Teoría de vínculos profesionales con los temas que marcan con gran intensidad para hacer enfermería. **Descriptor:** Enfermería, Teoría de enfermería, Ambiente de trabajo.

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INTRODUCTION

The knowledge of nursing, in part, corresponds to a set of theories that support professional practice and reveals the action of care, developed in response to a need of the human being and the community. This practice of nursing can be seen as a social being exercised by professionals on the object of your doing, by who establish relationships, applying their knowledge as a way to transform a concrete reality.¹

From this perspective, theories are built from concepts, models, propositions serve as a basis to support practical actions, assisting and explaining the approaches taken by the work object - the human being. In nursing, the body of the human being, the person suffering physical, psychological, social and spiritual, can be understood as the object in which it performs the task of professional nursing. This task it is the therapeutic care, which is set in action, which develops and completes with the human being, value-laden ethical and a necessary good people.²

To understand the formation of theoretical nursing, it briefly redeems some historical events of the constitution of the profession. The nursing for many years, described its procedures, from clinical practice to the first decades of the twentieth century, systematize them as first organized form of knowledge, subsequently, by the institution of the scientific principles that underlie. And more recently, in the 1950s and 1960s, the concern focused on reflecting more deeply about the profession, its object of study and the theoretical framework relevant to care, when then began to be built nursing theories.³

Theories hold a reciprocal relationship with the nursing actions and jointly exercising daily work is the therapeutic care, as epistemological object, which refers to the discipline of nursing, to structuring their professional practice.⁴

However, it's still observed in the literature scarcity of scientific theories about the national nursing. A study on the subject points out that only 4.6% of the publications used nursing theories of 3757 articles, seven nursing journals, from 1998 to 2007.⁵

The proposed consideration of theories focuses on nursing recognizing it as a discipline, profession and social practice, through the formalization of concepts and theories, as the proper instruments to direct the search for specificity of nursing, ie, limits of performance relative to other professionals, own body of knowledge, autonomy, professional identity and visibility.⁶

In this direction, the Theory of Professional Links (DVT) consists of a tool for nursing, which aims to train, and continuously affirming interpersonal relationships in nursing team, as a unit group, in addition to the group of persons with potential for growth and strengthening the practices of care, through the establishment of healthy professional bonds. This theory, in essence, seeks to address the interpersonal relationships between nurses and staff, thereby establishing therapeutic relationships more. Moreover, grasps the links with the development of group dynamics arising from movements that take place in two spheres of relationships, institutional space and space-specific care action, directing the action team to the exercise of therapeutic care.⁷

Based on these, this paper it is a critical reflection about the importance of nursing theories, using DVT, as an example, to assert theories as instruments of labor, which formalize the actions of the nursing profession and, as a social practice, which builds daily.

RESULTS AND DISCUSSION

Epistemological context of nursing

The construction of knowledge in nursing is still in its initial phase; however, the designation of care is based on the principle of a practice that develops on the nurse-client interaction, with the intention of contributing to the welfare this in their daily lives. The watch is designed by many scholars as an epistemological object of nursing because it involves humans in its complexity, which is the focus of their work.⁴

Progress can also be seen in the evolution of conceptions of the term "human being" and the paradigm shift in the management and attention paid to the needs of health. In the twentieth century, there was the assertion of the fragmentation of the human body and mind, from the biomedical model that produces the mechanism of making the individual's biological vision, expertise about the person's body, the appreciation of the technical procedures of the act physician and the emphasis on curative medicine, which reinforce the division of the person into parts, making the union of these fragments, for an overview of the human being, especially considering besides the organic aspects, such as illness, other dimensions of human life- psychological, social, spiritual, economic, among others.

Moreover, the biopsychosocial model of health care and management emerged as a way to meet the shortcomings of the model history, such as the production of health in people with chronic diseases, autoimmune cases without clinical diagnoses or difficult to solve. Still, compared to recent paradigm that other knowledge professionals now become necessary to complexity involving health care to people.⁹

Nowadays, much of the demand for health services, in terms of workforce - professionals, is related to knowledge that go beyond the biomedical model approach, demanding greater coverage of the process of health and disease, with emphasis on policies health and operation of new modes of care. This question is linked to the fact that in recent decades there have been changes in clinical and epidemiological profile of the population, life expectancy, the economy and world politics, with consequent restructuring of the health sector and pose new challenges to the professionals, who must so articulate, organize to confront the problems that arise in different scenarios and actions that impact the health field and do nursing.¹⁰

In this context, although the nursing care adopt as its object of activity, the profession still suffers the effects of the need to occupy positions of power and develop nurses as being socio-político.⁶ Moreover, this area deals with health permanent identity crisis, the lack of an epistemological and theoretical dependence of scientific practices in the field of health and other areas.

Thus, the question is: why not think about the epistemological object as therapeutic care nursing? Dare to conceive this as metaparadigm this field of knowledge and at the same time, nursing grounded in epistemic structure multiparadigmatic, before the lack of professional identity and in accordance with the needs of customer care.

From this perspective, it is clear that the Brazilian nursing theories are still incomplete, often being disregarded and devalued in academic and professional spaces.

These gaps reflect the corpus of nursing, in particular, within the pedagogical and healthcare, as these are an aspect conditional better understood in relation to theories and practices that once

imported, without being questioned, they became the majority, or hegemonic because measures were taken as saviors of professional difficulties, accumulated from historical experiences of thinking and action in nursing. In terms of scientific construction, there is a nursing losses undesirable lack of power, as knowledge areas face the pressures of health policies by regulators or the funding agencies and research support.¹²

In recent decades, the paradigm shifts in the field of health care and management are occurring rapidly, since the construction of the social process, which has the most wins the right to health of millions of Brazilians, from a philosophical and conceptual basis derived in Sanitary Reform movement, whose landmark the XVIII National Health Conference, held in 1986, which instituted its eminently interdisciplinary due to multiple measurements and historical mediations. Thus, those who have concrete object as work health and disease in its social context cannot from a single discipline to guide their professional actions, because it involves both social relationships and social itself, the expressions emotional, as well as the biological conditions and reasons socio-cultural and historical individuals and groups.

Similarly, in the educational field, the new National Curriculum Guidelines provide an important achievement in the field of nursing by pointing, as policy, the need to produce changes in the training process, providing professionals more committed and engaged with the principles and guidelines of the Unified Health System (SUS). These efforts correspond to the concern of breaking definitively with the biological paradigm and medicalized, hospital-and procedure-centered, meeting the new challenges of contemporary knowledge production, the production of professions and establishing healthy relationships in work teams.

The link between education, work and social practices envisions a new perspective on significant transformation in the daily life of each professional involved with comprehensive care, especially when organized from the health needs of the population. So this is where nursing, as well as other health professions, needs greater engagement in defense of an argument more solid permeated by assumptions Health Reform with a view to reviewing, in which lie the paradigm of current models health care and what has been their role in this process, action that dispenses with the reorientation of their professional practice.¹³

From this point of view, it should be noted that health work is highly relational, since its focus is human care cannot, as in other production models are cast in equipment or highly structured knowledge, such as organizational technologies However, the meeting of subjectivities, incorporating a significant degree of freedom in choosing the method of doing this production.¹⁴

In this space often inconspicuous amid the daily routine of many health workers and the discussion of the performance of an interdisciplinary manner, which focuses the importance of theories in the construction of specific core of knowledge, social practice and consolidation limits nursing activities, by their epistemological possibility in therapeutic care and ethics in dealing with professional issues.¹¹

Theory of professional connections: strengthening practice

Front exposed to discussion about the epistemological construction of nursing, given the changes (multi) paradigmatic healthcare, presents itself as an alternative, the Theory of Professional Links (DVT), seeking to strengthen professional practice in meeting intersubjectivities of subjects, which act in everyday life on the same team.

Thus, the scope of the potential of teamwork may be valued at the time at which individuals recognize themselves as members of a group with a common goal. Thus, team members may feel responsible, both for its failures as its successes, participating in decision making and particularly describing the communication of essential information to nursing work.

Team work can be understood as "a network of relationships between people, power, knowledge, emotions, desires and interests, it is possible to identify group processes, where teamwork equals to relate."^{15:264}

Accordingly, DVT aims to provide nurses a model of teamwork in nursing, which promotes interpersonal relationships, ie professional ties to the scope object epistemological nursing - care therapeutic, committed people who need care health services. Furthermore, it allows the establishment of greater inclusion and significance of the group in the institution, and also reinforces the very identity of the nurse as leader, ie, team coordinator and the planning of their activities.

The basic assumptions of this theory are based on a philosophical look at historical and dialectical materialism, in which the bonds have a professional nature expressed in action and speech. That is, the bonds between humans are determined by the totality of the person through their relationship internal and external reflected through their actions and their words, not a part of it, because the worker must not separate his inner life of its externality, since the extent that the bonds formed professional group acquires a personality, an identity, determining your viewing and valuing the institution.

In addressing the relational skills of the management process in nursing, DVT has several sets of concepts, especially with regard to the subject of the theory, the nurse and the tool mediates between the nurses and the other staff members, technicians and assistants nursing and community health workers, ie, the model for teamwork in nursing. The goal of this proposal is focused on the relational and managerial actions of the nurse as a mediator in the process of establishment of Professional Links.

The theory of knowledge is a process, because it includes the process of working in nursing and nurse-staff interaction in group dynamics. It is a suggestion with a high level of adaptation to the reality of the group, but is constructed by the operational method, and presents strategies for implementation of the theory in a clear and practical, requiring the trader is scientific knowledge, sensitivity, creativity, imagination and skills to execute them.

CONCLUSION

This reflection-critique that focused on the importance of nursing theories to strengthen the profession of nursing and social practice to inter-relate the context of nursing knowledge, DVT stands as a model to be experienced in daily care in order to qualify the relationship at work. It is, however, a flexible and adaptable to reality and creativity of nurses.

Based on the theoretical models it is believed that nursing could provide their professional identity and body of knowledge, more broadly, including subsidies brought there by DVT relational issues that mark with a lot of intensity do nursing. This, in turn, while at the same time, requiring systematic routine operations, mechanized interventions should refuse, since its object of study is the human being in its uniqueness and subjectivity, thus requiring the humanization of related views therapeutic care.

Alert to the need for discussion on the construction of nursing knowledge and reinforces the suggestion of some researchers, that the epistemological object of nursing, should be careful. As it becomes imperative investment and enhancement of nursing theories Brazilian, to obtain visibility epistemological and professional nursing.

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