

Comprehensive approach of nursing: possibility of interpretation based on alfred schutz

Salvador, Pétala Tuani Candido de Oliveira; Santos, Viviane Euzébia Pereira; Tourinho, Francis Solange Vieira; Enders, Bertha Cruz

Veröffentlichungsversion / Published Version
Zeitschriftenartikel / journal article

Empfohlene Zitierung / Suggested Citation:

Salvador, P. T. C. d. O., Santos, V. E. P., Tourinho, F. S. V., & Enders, B. C. (2014). Comprehensive approach of nursing: possibility of interpretation based on alfred schutz. *Revista de Pesquisa: Cuidado é Fundamental Online*, 6(1), 183-193. <https://doi.org/10.9789/2175-5361.2014.v6i1.183-193>

Nutzungsbedingungen:

Dieser Text wird unter einer CC BY-NC Lizenz (Namensnennung-Nicht-kommerziell) zur Verfügung gestellt. Nähere Auskünfte zu den CC-Lizenzen finden Sie hier:
<https://creativecommons.org/licenses/by-nc/4.0/deed.de>

Terms of use:

This document is made available under a CC BY-NC Licence (Attribution-NonCommercial). For more information see:
<https://creativecommons.org/licenses/by-nc/4.0>

Federal University of Rio de Janeiro State



Journal of Research Fundamental Care Online

ISSN 2175-5361
DOI: 10.9789/2175-5361

REVIEW

Comprehensive approach of nursing: possibility of interpretation based on alfred schutz

Abordagem compreensiva da enfermagem: possibilidade de interpretação a partir de alfred schutz

Abordaje comprensivo de enfermería: la posibilidad de interpretación a partir alfred schutz

Pétala Tuani Candido de Oliveira Salvador ¹, Viviane Euzébia Pereira Santos ², Francis Solange Vieira Tourinho ³, Bertha Cruz Enders ⁴

ABSTRACT

Objective: To reflect about the comprehensive approach of nursing based on the theoretical framework of Alfred Schutz. **Method:** A theoretical essay from the comprehensive phenomenological sociology of Alfred Schutz. **Results:** Reflections are made on the interpretation of nursing care based on the key concepts of Schutz, with special reference to the care based on the other's typification, which recognizes the everyday lives of individuals, seeking intersubjectivity and establishing a face to face relationship. It reflects, still, about the reasons-for and reasons-why of nursing practice. **Conclusion:** It is concluded that the typification of nursing practices is reflected in the understanding of an essentially complex profession that is based on care as the main element of its practices. **Descriptors:** Nursing, Nursing care, Philosophy of nursing.

RESUMO

Objetivo: Refletir acerca da abordagem compreensiva da enfermagem a partir do referencial teórico de Alfred Schutz. **Método:** Ensaio teórico tecido à luz da fenomenologia sociológica compreensiva de Alfred Schutz. **Resultados:** São tecidas reflexões sobre a interpretação do cuidado de enfermagem a partir dos conceitos chave de Schutz, destacando-se: o cuidar a partir da tipificação do outro, que reconhece o mundo vida cotidiano dos sujeitos, que busca a intersubjetividade e que estabelece uma relação face a face. Reflete-se ainda acerca dos motivos-para e motivos-porque da prática de enfermagem. **Conclusão:** Conclui-se que a tipificação da prática de enfermagem traduz-se na compreensão de uma profissão essencialmente complexa, que se fundamenta no cuidar como elemento medular de suas práticas. **Descritores:** Enfermagem, Cuidados de enfermagem, Filosofia em enfermagem.

RESUMEN

Objetivo: Reflexionar sobre el enfoque integral de la enfermería a partir del marco teórico de Schutz. **Método:** Un ensayo teórico hecho a partir de la fenomenología sociológica comprensiva de Alfred Schutz. **Resultados:** Se tejen reflexiones sobre la interpretación de los cuidados de enfermería a partir de los conceptos clave de Schutz: el cuidado a partir de la tipificación del otro, que reconoce la vida cotidiana de las personas del mundo, que busca la intersubjetividad y que establece una relación cara a cara. Además, reflexionase sobre los motivos para y el porqué de la práctica de enfermería. **Conclusión:** Se concluye que la tipificación de la práctica de enfermería se refleja en la comprensión de una ocupación compleja, que se basa en el cuidado como componente central de sus prácticas. **Descriptor:** Enfermería, Atención de enfermería, Filosofía en enfermería.

¹Nurse. Master Student of the Postgraduate Program in Nursing of UFRN (PPGENF-UFRN). Substitute teacher of the school of nursing in Natal (Rio Grande do Norte) and a member of the laboratory research group on care, safety and health and nursing technology of Federal University of Rio Grande do Norte. E-mail: petalatuani@hotmail.com. ² Nurse. Doctorate in Nursing. Professor, Department of Nursing and Postgraduate in Nursing and a deputy leader of the group laboratory research of care, safety and health and nursing technology of Federal University of Rio Grande do Norte, Natal, Rio Grande do Norte, Brazil. E-mail: vivianeepsantos@gmail.com. ³Nurse. Doctor on Child and Adolescent Health. Assistant Professor, Department of nursing and leader of the laboratory research group of care, safety and health and nursing technology of Federal University of Rio Grande do Norte, Natal, Rio Grande do Norte, Brazil. E-mail: francistourinho@gmail.br. ⁴ Nurse. PhD in Nursing from the Texas Woman's University, Dallas, Tx, USA. Collaborative Professor at the Federal University of Rio Grande do Norte, Natal, Brazil. E-mail: bertha@ufrnet.br.

INTRODUCTION

Philosophical thoughts evolve continuously according to the historical moment that is experienced in response to concerns that characterize this period. Focusing on the investigation of the relationship between thinking and being, multiple responses, throughout history, have been prepared aiming at explaining this dyad, which differentiated the currents of thought, each with its own particular view of the world.¹

Inserted in this context is health, which likewise had its care models evolving over the years, this due to three main factors: understanding health and disease, largely based on the philosophical approach that follows; technologies available at a given time, and the political and ethical choices, defining priorities in the field of health.²

Evolving *pari passu* to the health situation, nursing as a profession, was born in the nineteenth century, under the influence of capitalism and under the aegis of the dominant paradigm of modern science: positivism.³ Thus, nursing, inserted in the reflections of such a guided paradigm: the understanding of the health/illness as only individual biological phenomenon, the overvaluation of technology, the absolute belief of medicine to eradicate the disease, by nature subordinate the medical profession, and the disregard of common sense populatio.⁴

In this context paradigm, Florence Nightingale organized the modern nursing and the hierarchically subdivided, reproducing the model of class society (capitalism) and the scientific parameter of the time (positivism).³ The profession has then a make empirical and unsystematic, for do technicality, characterized by the compartmentalization of his action/care, the technical division of labor, and the development of quantitative research, basing itself mainly in the techniques.^{3,5}

However, following the context of the crisis of paradigms, in which the positivist thought put insufficient to meet the complex demands of society, nursing, from the 1950s, turned to the investigation of its own phenomena, highlighting the knowledge from theories enfermagem.³

Inserted in this perspective, the comprehensive sociology was built after the 1970s, when viewing social movements vindicated that criticized scientism - positivist conception of a universal science, empirical and timeless value-free - pointing to the negative effects of medicalization and eminence of medical attention that brought no improvement to the level of health of the population.¹

A comprehensive sociology brought therefore reflections on the role of the state and major medical institutions, health promotion, the essentiality of a sociological perspective on health and emphasis on new forms of institutionalized health care: primary care, self-care, community participation and education and health.⁴

Nursing, in this scenario, recognizing itself as a social practice, sought to understand the socio-economic relations within a social and historical dialectics, approaching

qualitative research, especially the phenomenological reflections, pointing to the phenomena sick, dying, relate to each other, trying to understand the human being in its interaction with the world.^{3,5}

Seizes up, through the understanding of the mutual relationship between the currents of thought and health aspects in which nursing is integral odd that the disciplinary knowledge of that profession “[...] ha sido fructífero desde la época de Florence Nightingale en la cual el foco de investigación se centró en el qué hacer, para luego pasar al dominio del hacer técnico es decir, al cómo hacer, pasando luego al por qué hacer [...]”^{6:177}

Currently, nursing is within the context of paradigm shift, focusing on the emergence of thoughts holistic, ecological and complex, comprising its peculiar intersubjective relationship with the subject, focus the essence of your primal phenomenon: caring.

It is in this perspective that sheds light on the possibility of interpretation of nursing from the comprehensive phenomenology of Alfred Schutz, building on the idea of being the practical nursing activities of a complex nature, guided in a face to face intersubjectivity in the nurse tries to understand the biographical situation of the users, focusing on their everyday life world.

From this assertion, brings up guiding question of this reflection: what aspects a comprehensive phenomenology of Alfred Schutz provides a comprehensive approach to nursing?

OBJECTIVE

The objective is to reflect about the comprehensive approach of nursing from the theoretical framework of Alfred Schutz.

METHODOLOGY

It is a theoretical essay - understood as a reflective, argumentative feature, of logical exposure and applicable to personal judgment⁷ - fabric in light of comprehensive phenomenology of Alfred Schutz.

It served as input for competence discussions: the theoretical basis books and articles on the subject that argued about the theme, raised through the Virtual Health Library, in addition to theoretical discussions competence in the discipline "Philosophical and Theoretical Foundations of Nursing", of the Postgraduate Program of Nursing of the Federal University of Rio Grande do Norte (PGENF-UFRN).

RESULTS AND DISCUSSION

Contextualizing the theoretical reference

Alfred Schutz, regarded as one of the most important philosophers of social science of the twentieth century and known as the social phenomenologist, was born in Vienna in 1899, the city where he studied law and social sciences at the University of Vienna, where he had influential teachers such as Hans Kelsen, Ludwig von Mises, Friedrich von Wieser, Othmar Spann.⁸

Left Austria before the Nazi occupation and remained in Paris until a year before emigrating to the United States, where he arrived in 1939 and took a position at the Graduate School of New School for Social Research in New York and was a member of the editorial board of *Philosophy and Phenomenological Research*. Had his career cut short by his untimely death in 1959.⁸

Seeking weave a phenomenological analysis of the concepts of sociology, Schutz's main influences of thought: 1) became interested very early, by the work of Max Weber, and the perception of the logical problems involved in the concept of ideal types and other ideas Weber drove Schutz key to perform a thorough philosophical analysis of the entire methodological position of this author, 2) to seek a coherent theory of meaning, its foundations on the concepts of Husserl, giving a comprehensive foundation phenomenological sociology; 3) also took the Bergson's analysis of the manner in which the stream of consciousness is modified by the phenomenon of attention, and 4) became interested in the significance of social interaction pragmatist George Herbert Mead.⁸

Alfred Schutz therefore proposed a social science understanding as opposed to empiricist stance, based on the place that the world of everyday life occupies as an expression of intersubjective processes of individuals, including those that are intersubjectively shared meanings that define the kind of relationship that established with others in a space and in a time.⁹

His main research therefore revolve around the social actor, in which it relates to other projects and the action that they formulate, which can only be understood through the motivations of subjects.¹⁰⁻¹ Thus, Schutz developed the concepts of reasons for and reasons - why - to interpret the behavior of the subjects in the social world.

Thus, the reasons for - and why - because what Schutz part defines how motivational contexts “[...] contexto motivacional es, por definición, el contexto de significado dentro del cual se encuentra una determinada acción en virtud de su status como proyecto o acto de un determinado actor”.^{8:116-7}

The reasons - to essentially subjective, are the targets they seek to achieve, having a temporal structure facing the future, forming a subjective category of action, that is, reasons that are closely related to action and awareness of the actor: “En la relación-para,

la vivencia motivada (es decir, la acción) es anticipada en la vivencia motivante (es decir, el proyecto), y se la representa en ella en el tiempo futuro perfecto”.^{8:121}

On the other hand, the reasons - because they are guided by the objectivity, evidenced in events already completed, thus having temporal direction toward the past, can be understood in retrospective, ie they are unconscious during the action: “[...] en la genuina relación-porque, el factor motivante es una vivencia temporalmente anterior al proyecto [...] y podemos por lo tanto designar nuestra referencia intencional a ella como pensar en el tiempo pluscuamperfecto”.^{8:121}

A comprehensive phenomenology of Alfred Schutz, therefore, is based on the reality embodied cognitive processes of subjective human experiences: "The phenomenological philosophy presents itself as a philosophy of man in his vital world , able to explain the meaning of this world in a way rigorously scientific”.^{12:36}

In this sense, it is evident that, to investigate the practice of professional nursing based on the comprehensive approach of Schutz, founded on the idea that the action of nursing staff is aware and is geared for someone belonging to a relational context and establishing a face to face interaction, I-thou relationship, a relationship I-we, who can be caring relationships.¹²

Nursing care: face to face relationship

To apprehend a comprehensive approach to nursing from Alfred Schutz theoretical means, in essence, said that this profession is founded on a fundamentally relational practice that is guided in the bilateral understanding the motives involved in the care process, and the reasons for the reasons why the binomial nursing-users.

Elucidates is thus that nursing promotes a face to face relationship, without which it is not possible consolidate care, eminently intersubjective action, integrating, central to both the everyday life-world of the subjects. In contrast, if you visualize a behavior guided by anonymity, looks dead in the true essence of nursing.

Based on these understandings reflected on the interpretation of nursing care from Schutz key concepts, including: caring from the characterization of the other; the care that recognizes the world of everyday life subjects; caring seeking intersubjectivity; care and establishing a face to face relationship, it is emphasized that such reflections are not fragmentary, but part of a complex reflection, namely, the classification of nursing practice.

Caring from the characterization of the other

Reflect nursing from the precepts of Shutz means recognizing that the care is founded in understanding the user through their biographical situation, able to assign distinct meanings in their lived experiences.¹³

The nursing professional, thereby viewing the whole person in all dimensions, in their interactions with the patient, family and community and therefore nursing care involves understanding the knowledge and experience psychosocial, cultural and the

economic paciente.¹⁴ In other words, one learns that "to care, we must know each other's lives, their biographical situation, your background knowledge".^{12:27}

Thus, nursing care solidifies from the situations experienced by the subjects, this through an interpretive analysis that will lead to the apprehension of the type experienced, which is a phenomenological attitude of meaning.¹⁵ Therefore, caring is built up from listening and dialogue as strategies to enhance the experience that is unique, since only the subject of the action can say what you want to feel in relation to the same.¹⁴

Caring from the characterization of other means, Thus, seeking the meaning of the action of the other, understand each other / User protagonist of sanitary practices, since "[...] sólo comprendiendo los motivos del hablante captamos su significado subjetivo".^{8:22} Furthermore, it is understood that "[...] nursing care nurse and patient approach in the development of a mutual awareness of each other [...], enabling a relationship of the type we".^{12:84}

Caring recognizes that the world of everyday life subjects

The world everyday life, in the design of Schutz, is the space in which men lie with their daily problems in intersubjectivity with their peers, not only constitutes a natural world, but a world social, historical and cultural.⁸

The action in the world everyday life is seen as a process based on functions of motivation, reasons and objectives, guided by advances in the form of planning and projections.¹⁴ Search the interpretation of the life world of the subjects corresponds, therefore, to recognize the relevance of understanding the experience of the subject and reflect on the origins of the experiments, which will enable the knowledge of a phenomenon.^{11,16}

Thus, taking care that the world recognizes life of individuals seeking to understand their action projects, considering the motivations, apprehensions, the meanings attributed by the subjects, who entered the world life, influence and are influenced by their social context, historical "[...] the world of everyday life is not a private world, rather it is an intersubjective world, shared with other men".^{16:20}

Nursing care that the world recognizes life thereby to invest in trying to interpret the phenomenon, understand that by establishing a face to face relationship with users, nursing also becomes part of this life world, which also occurs in a reciprocal manner.

Nursing care, based on the conception of the world lives Schutz, takes a challenge: "[...] the central conflict is not co-inhabit the space, but co-exist in this space looking to build a project of their own group, from the singularity and coincidence of motivations and interests of people with other projects ".^{16:95-6}

Care seeking intersubjectivity

Understood as an ontological category of human existence, intersubjectivity is seen from the reference Schutz, targeted transformation of care, providing individualized care

based on the recognition of the life of another world, filled with your values, your beliefs, your fears, their motives and their reasons-for-why.¹²

In this perspective, nursing care integrates actions guided by continuous movements of intersubjectivity, which reveals degrees of complexity in interpreting the needs and choices of others and respect for the uniqueness of the person.¹⁶

Caring seeking intersubjectivity thus presupposes a mutual understanding that is established through communication that seeks knowledge of the world and life of another of his socially shared meaning, which occurs through the exchange not only of signs or language but a live different dimensions simultaneously.^{9,17} Establish a care through intersubjectivity presupposes, in short, to recognize the humanity of the other in its essential dimension.⁹

Care that establishes a face to face relationship

Establish a process of care grounded in intersubjectivity means recognizing the practice of nursing as a production space of a common environment that reveals the state of being united with others, in which the relationship can occur in face to face relationship: "Producing care nursing requires generating relationships face to face nurse with patients".^{16:82}

It is in face to face relationship that directly apprehends the other in a moment of social interaction, a relationship between us, a direct experience between people who only achieved when there is community space and time.¹⁵ A face to face relationship, this way, takes nursing to experience the user as a person whose body is a field of expression, directing care for us.¹⁶

The complexity of caring for a face to face relationship with the user concurrency involves, therefore, a relationship of high degree of interactivity, where people coexist with others in unique conditions, through actions intentionally directed to the user, and, from the moment at which a meaning is assigned to these actions, they are understood to be significant, showing the intention to understand the other.¹⁵⁻⁶

Reasons-why of nursing action

The reasons why-enable understanding, in retrospective, the actions of individuals, ie, are the reasons for the actions, implicit and unconscious during the progress of the action. Thus, understanding them in retrospective set up as a way for the seizure of the intentionality of actions and, therefore, the action in the world life is seen as a process based on functions of motivation, reasons and objectives, guided by advances in form of planning and projections.⁸

With regard to the reasons-because of nursing, these manifest themselves in understanding the process of nursing work load is possessed of historical, cultural, political

and ideological, as well as being directly influenced by the environment and the working conditions experienced by professionals.¹⁴

Moreover, it also shows that learning to have skills in procedures and technical division of labor appear as reasons why the current setting of nursing, lacking greater integration and wholeness in the process of care.¹⁶ The healthcare setting and the understanding of the design aspects of health and sense of quality of care also translate into reasons-because of the action of nursing.¹⁴

Elucidates that understanding the reasons-because it enables the movement to create innovative strategies for transforming the professional practice of professional nursing, overcoming the paradigm Flexnerian and strengthening the paradigm for the development of health care at the juncture of holistic care and humane quality 14, putting in relief, therefore, the reasons for the current configuration of the components of nursing challenges.

Reasons-for the nursing action

As already explained, Schutz, to understand the character of intentional actions, reflects the need to investigate the motivations of subjects as the mechanism hermeneutic another key aspect in the establishment of a face to face relationship. And, among these motivations, the phenomenologist of the social elucidates the reasons for - like “[...] contexto de significado que se contruye sobre el contacto de experiencia disponible en el momento de la proyección”.^{8:119}

The reasons-for reflect, therefore, the goals of actions, the subjective aspect that wants to raise. Study that sought to understand the meaning of nursing through the phenomenological approach of Schutz brought - as reasons for nursing: care to reach the potential customer in relation to psychosocial, exceeding the limit of what is externalized, the meaning of the essence of care, the quality care to achieve the uniqueness of the user, based on ethical knowledge, theoretical and technical - scientific underpinning the profession, and the way to care, valuing the uniqueness of the client.¹⁴

Furthermore, research doctorate in nursing with the aim of tracing the ideal typical understanding of professional nursing practice in public hospitals, for reasons elucidated how this profession: get other abilities that allow you to experience the face to face relationship with intentionality directed to the existence of another person who experiences a limitation of their potential health; desire to relate to the user in a more holistic and deeper, and implicit desire to organize work to achieve consistency with the new paradigms of health care, pointing towards a greater sensitivity to the human condition.¹⁶

Another reason for this in the current discussion of nursing is , according to the conception of Schutz, affirming the profession as a social action,^{14,16} in contrast to the reductionist view of conduct: “[...] lo distintivo entre acción y conducta es que la acción es la ejecución de un acto proyectado”.^{8:90}

Overcome the simple conduct means grasping nursing practices not as spontaneous, free and scientific planning, guided by simple techniques. Grasping nursing as action

translates into the defense of a profession scientifically sound, aspect that still needs to be solidified: "[...] in terms of social action, the practice is in the early stages, since nurses in their motivations reveal desires having conduct -based projects, however these are not yet reflected in the social world as action".^{16:122}

For this to take place, efforts should be to expand the look at the phenomenon of nursing, rescuing the need to understand nursing as both art and science as: "the art science had made it possible for the appreciation of aesthetics, intuition and creativity, contributing to the construction of benchmarks that address the beauty and diversity of the phenomena in nursing".^{18:88}

Therefore, challenges exist for the consolidation of these reasons - to: understanding the complexity of nursing phenomena, to grasp the need for guided care in multiple paradigms, exceeding the linearity hitherto hegemonic practices sanitary; carry out social mobilization, political, technical and scientific, and seek to integrate science, art and spirituality, of subject and object, art and ethics, theory and practice.¹⁸⁻⁹

CONCLUSION

A reflection about the comprehensive approach of nursing from the theoretical possibilities of Alfred Schutz reveals multiple and meaningful interpretation of the practice of the profession of caring, which elucidate, in an extremely consistent through the basic concepts of the social phenomenologist: recognition of biographical situation, establishing face to face relationship, promotion of inter-subjectivity, understanding the reasons for and reasons-why.

The classification of nursing practice translates into the understanding of a profession essentially complex, which is based on caring as spinal element of their practices, placed in a broader context of meaning that incorporate a health situation, which influences and is influenced by currents of thought that is experienced.

Seizes up, above all, a classification that elucidates reasons-for-shaped unique challenges pursued by nurses: seek recognition of nursing as a social action, which is the foundation of the triad-art science-spirituality, seeking a look that is built up a face to face relationship, recognizing the intersubjective we entered the world everyday life, which requires, above all, the understanding of a practice that is within the contemporary search for multiple interaction paradigms, recognizing the complexity of nursing phenomena.

REFERENCES

1. García JC. Medicina e sociedade: as correntes de pensamento no campo da saúde. In: Nunes ED, organizador. Medicina social: aspectos históricos e teóricos. São Paulo (SP): Global; 1983. p.96-131.
2. Silva Junior AG, Alves CA. Modelos Assistenciais em saúde: desafios e perspectivas. In: Morosini MVCG, Corbo A. Modelos de atenção e a saúde da família. Rio de Janeiro (RJ): EPSJV/Fiocruz; 2007. p.27-41.
3. Santos QG, Azevedo DM, Costa RKS, Medeiros FP. A crise de paradigmas na ciência e as novas perspectivas para a enfermagem. Esc Anna Nery Rev Enferm. 2011 out/dez;15(4):833-7.
4. Minayo MCS. O desafio do conhecimento: pesquisa qualitativa em saúde. 12ª ed. São Paulo (SP): Hucitec; 2010.
5. Almeida IS, Crivaro ET, Salimena AMO, Souza IEO. O caminhar da enfermagem em fenomenologia: revisitando a produção acadêmica. Rev eletrônica enferm. [periódico on line] 2009; [citado 25 dez 2012]; 11(3): [aprox. 5 telas]. Disponível em <http://www.fen.ufg.br/revista/v11/n3/v11n3a30.htm>.
6. Truisi MLV. Cuidar e investigar: desafios metodologicos en enfermería. Texto & contexto enferm. 2011 jan/mar;20(1):175-83.
7. Severino AJ. Metodologia do trabalho científico. 23ª ed. São Paulo (SP): Cortez; 2007.
8. Schutz A. Fenomenologia del mundo social: introducción a la sociologia comprensiva. Buenos Aires (Argentina): Editorial Paidós; 1972.
9. Vargas MC. La intersubjetividad como sintonía en las relaciones sociales: redescubriendo a Alfred Schütz. Polis, Revista de la Universidad Bolivariana. 2010;9(27):317-27.
10. Camatta MW, Nasi C, Schaurich D, Schneider JF. Contribuições da sociologia fenomenológica de Alfred Schütz para as pesquisas em enfermagem - revisão de literatura. Online braz j nurs. [periódico on line] 2008 maio/ago; [citado 25 dez 2012]; 7(2): [aprox. 9 telas]. Disponível em <http://www.objnursing.uff.br//index.php/nursing/article/view/j.1676-4285.2008.1446/383>.
11. Riquelme RL. La sociología interpretativa de Alfred Schütz: reflexiones entorno a un planteamiento epistemológico cualitativo. Alpha. 2006 dez;23:201-13.
12. Zeferino MT. Mundo-vida de caminhoneiros: uma abordagem compreensiva para a enfermagem na perspectiva de Alfred Schutz [tese]. Florianópolis (SC): Programa de Pós-Graduação em Enfermagem, Universidade Federal de Santa Catarina; 2010.
13. Silva TJES, Davies WH, Cunha LP. Pesquisa científica em enfermagem sob a ótica docente e discente. R pesq: cuidado é fundamental. 2010 jan/mar;2(1):406-13.
14. Chrizostimo MM, Rosas AMMTF, Alves L, Bartoly MG, Silva CMC, Alves EMC. O significado da assistência de enfermagem segundo abordagem de Alfred Schütz. Cienc enferm. 2009;15(3):21-8.

15. Silva ALAC, Rodrigues BMRD. A sociologia fenomenológica de Alfred Schutz e a possibilidade de compreender em enfermagem. *Rev enferm UERJ*. 1997 dez;5(2):475-8.
16. Banda MZ. Compreensão típico ideal da prática profissional do enfermeiro em hospitais públicos [tese]. Ribeirão Preto (SP): Escola de Enfermagem de Ribeirão Preto, Universidade de São Paulo; 2004.
17. Acevedo MH. Aportes de la teoría social de Alfred Schutz para pensar la política y la acción colectiva. *Trabajo y Sociedad*. 2011;17:83-94.
18. Silva AL, Arruda EM. Referenciais com base em diferentes paradigmas: problema ou solução para a prática de enfermagem? *Texto & contexto enferm*. 1993 jan/jun;2(1):82-92.
19. Soares DA. A enfermagem no contexto das mudanças paradigmáticas. *Diálogos e Ciência - Revista da Rede de Ensino FTC*. 2009 jun;11(9):79-89.



Received on: 26/01/2013
Required for review: No
Approved on: 03/10/2013
Published on: 00/00/2014

Contact of the corresponding author:
Pétala Tuani Candido de Oliveira Salvador
Rua Almir Freire, 324, Centro, Bom Jesus, Rio Grande do Norte, Brasil.
CEP: 59270-000. Telefone: (84) 8869-8426.