



## REVISIONES

### The emancipatory paradigm and its influence on the development of nursing knowledge

El paradigma emancipatorio y su influencia sobre el desarrollo del conocimiento en Enfermería

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### ABSTRACT

This article arises as a need to reflect on the influence of emancipatory paradigm in the Discipline of Nursing. A literature review was conducted in the databases Scielo, Latindex, Redalyc and written documents (books). It was identified that the emancipatory paradigm as a means of reflection and critique of power traditionally exercised, proposes measures for participation and social justice, including important ethical traces in the human action. In the specific case of Nursing, this emancipatory process reorients the traditional view on the essence of being and doing, so that openness to reflective thinking to modify the way in which the profession is positioned, delivers nursing care and teach future Nurses.

### RESUMEN

El presente artículo surge por la necesidad de reflexionar sobre la influencia del paradigma emancipatorio en la Disciplina de Enfermería. Se realizó una revisión bibliográfica, en las bases de datos Scielo, Latindex, Redalyc, así como el uso de documentos escritos (libros). Se identificó que el paradigma emancipador, como medio de reflexión y crítica al poder ejercido tradicionalmente, propone medidas de participación y justicia social, arraigando importantes vestigios éticos en el accionar humano. En el caso específico de Enfermería, este proceso emancipador reorienta la visión tradicionalmente arrastrada en la esencia del ser y hacer, por lo que la apertura al pensamiento reflexivo permite modificar la manera en la cual la profesión se posiciona, brinda intervención y prepara a las (os) futuras (os) enfermeras (os).

## **INTRODUCTION**

The research is of great importance for the development of the discipline, professions and science of Nursing, as it acquires strength by means of it, it is renovated and it turns autonomous, as it constitutes a tool that lets the disciplinary improvement, it avoids the blockage and it leads to give up the practice by tradition <sup>(1)</sup> for giving a disciplinary sense to the practice of nursing.

From this point of view, it results significant to think about the research of aspects that reveal the particularities of the human being, as its understanding and analysis improve the practice, making evident the experiences lived by nurses and users in their interactions.

The previous would be possible enquiring with qualitative methodologies of research and using innovating paradigms. This research trend in the area of health has strongly invaded since approximately twenty years ago and it looks for the comprehension of complex and changeable phenomena, taking special interest in revealing the point of view of the other, who is unknown and who hadn't had voice to build knowledge that includes the feeling and perception of the individuals and the communities, together with the community contexts and letting a dialogic relationship with the several disciplines that take part in the areas of health, society and politics <sup>(2)</sup>.

The purpose of this work is to think about the necessity of using new paradigms and methodologies in the disciplinary Nursing development as a chance to strength the object of study, enhancing in the emancipatory paradigm and its utility to increase the professional autonomy of Nursing, both in the labor and academic field.

## **METHOD**

A bibliographical review was carried out in the databases Scielo, Latindex and Redalyc, as much as the use of the written literature. The articles were based on a referential analysis, that lets the development of a relative positioning of the implications of the emancipation and its scope in the knowledge of Nursing. The key words for the search were: emancipatory paradigm, nursing and professional autonomy.

## **DEVELOPMENT**

### **Paradigm and its implementation in Nursing**

Nowadays several paradigms in the research of sciences of health are used, the disciplined exploration in this field is mainly carried out inside two wide paradigms, both legitimate for the scientific research, which are the positivist and the naturalistic, however, there are other research paradigms from the social sciences which are commonly known as Critical Theory or Dialectical Hermeneutics<sup>(3)</sup>. When carrying out an analysis of the positivism, post positivism, constructivism and critical theory, the two first correspond to the dominating paradigms, to the inherited perspective, its interest is the explanation, prediction and control; whereas the constructivism is interested in the understanding and rebuilding of the facts, as much as the critical theory has a research interest of reflection, transformation, restitution and emancipation <sup>(4)</sup>.

In relation to the applied method by each one of the paradigms, the positivist is focused on the quantitative method, whereas the post positivism applies mixed methodologies. The constructivism and the critical theory use mainly qualitative methodologies. However, different perspectives where it is affirmed that the use of qualitative and quantitative methods can be appropriate for any paradigm of research exist, in spite of the fact that the questions of method are secondary towards the paradigm<sup>(4)</sup>.

The critical theory is a wide paradigm that offers to the Nursing the adequate framework to study phenomena that is not tackled easily, that is, complex situations like the chauvinism, violence, inequality, among others, that normally seem to be invisible, as its boarding implies to make equitable and fair measures to improve the health of the communities, what results complex from a traditional paradigm.

North American authors set out to integrate the emancipatory knowledge to the patterns of knowledge of Nursing by Carper (1978), that includes the aesthetic or artistic pattern, recognized as that which is felt after having interacted and understood the other's experience; the personal, that consists on the way in which knowledge is acquired from the intimate perspective; the ethic that lets recognizing the compromise and respect towards human life and the moral duty of the nursing profession; the pattern of empiric knowledge, that is obtained through the results of the scientific research and since its proposal to include, the emancipatory knowledge pattern, that consists of the capacity not only for noticing the injustices in a social order, but also for examining critically why these injustices are not evidenced<sup>(5)</sup>.

### **Critical theory and Emancipatory Paradigm**

The critical theory was born with the philosophers Horkheimer and Adorno, founders of Frankfurt school, who questioned the modernity of the occidental world arguing that the mythology and tradition fed the process of men alienation. From the critical tradition, Jürgen Habermans was who linked the philosophy with the anthropology and from that, alternative dimensions of emancipatory communicative rationality<sup>(6)</sup> are revealed.

Habermans, is known as a social analyst, who focus his studies on the modern rationality, the interest of knowledge, the theory of the communicative action and the process of emancipation, he marks that knowledge has a liberating and ethic character more than dominating and technical, and that the constitutive interests of the knowledge in the technical field are the empiric-analytic sciences; in the practical field, the history and the hermeneutics, that is to say, the symbolic interaction; whereas the emancipatory knowledge is focused on the social and philosophical sciences. Habermans distinguishes three rationalities: the technical, like the dominance of nature; the hermeneutic, like the communicative interests, the purpose of communication and the understanding between the liberation, which is common of the reflection of the critical disciplines<sup>(7)</sup>.

The approach of the critical theory is the abolition of the social injustice, the justice is shown as necessary and indispensable, the emancipatory paradigm looks for the social change, focused on the freedom and release, both in the process of the research and in the transformation of the society itself, and it accomplishes with three characteristics: to include the experiences of the researcher in the research questions, the objectives of interest and the strategies for changing its condition. This paradigm

covers the distribution of power in the equal situation. In the emancipatory process it is talked about negotiation, reciprocity and empowerment, taking the emancipation as a critical position that through the participative approach leads to a building awareness, using as methodology of research the qualitative, participative, by means of critical analysis, letting the human phenomena to emerge and to be investigated<sup>(8)</sup>.

The interest of the emancipatory paradigm is to recognize the psychological cognitive, moral, political and social reality of all the participants of the research, including the researcher itself, with the aim of focusing on the understanding of the group to provoke a systematic change, that lets transforming the practice and structures, through the empowerment and the transforming process creating collaborative relationships, developing strategies of comradeship, negotiating power and creating participative environments, by means of the action reflection, compromise in dialogue, listening, questioning and setting problems and above all promoting the critical thinking<sup>(9)</sup>.

The building awareness, required for the development of work inside the emancipatory paradigm has been understood and promoted by Paulo Freire as a way for learning to perceive the social, political and economic contradictions and to carry out actions against the oppressive elements of the reality. "The achievement of this building awareness requires, frequently, the problem identification of the conflictive situations in which it is lived, otherwise, they would remain at the level of a general unconsciousness"<sup>(10)</sup>.

The previous would be achieved when implementing critical and emancipating research action, which pursues to integrate the science and politics, not to exceed the resistance against the change among people, but to transform that passive resistance into active opposition. In this research the author is integrated in the community not as a wise or expert but as an equal, what lets him learn by the community and realize their really feeling. "The group is not a simple object of observation and manipulation any more. The object man is transformed into a subject of knowledge and subject of change. This paradigm emphasizes the historical context in which the action is carried out, it strains to maintain the knowledge in the scenery in which it is born, to confront it against the social practice (the evolution of knowledge), by means of tactics and strategies of change"<sup>(11)</sup>.

This methodology in the practice of Nursing leads to develop the comprehensive observation of the phenomena, where it is established not only a friendly relationship between the researcher and the members of the community, but it also creates an analysis in general of the main identified problems by those who live them, to establish strategies and collective interventions orientated to the participative solutions of the problem(s). The introduction of the emancipatory knowledge to the nursing is the way to make possible the social and structural change and it is time to examine regarding the criticism the social influences about the welfare and health. The emancipatory knowledge as the capacity for evidencing injustices in a social order and for examining in a critical way why the injustices seem not to be seen or to remain invisible and let identifying social and structural changes needed to correct the social institutional problems<sup>(5)</sup>.

Nurses need to create a practice where the knowledge that goes beyond the development of abilities to solve problems can be developed. This practice is called "the process of the emancipatory knowledge", what obliges to extend the reference

frames and to detect patterns and structures in the situations which are problematic day-to day<sup>(5)</sup>.

### **The autonomy of Nursing as an emancipatory process**

The discipline of Nursing, like the majority of the areas of health, is kept under a constant improvement in the body of knowledge that lets orientating its efforts to develop a profession with solid basis and critical positions towards the social transformations that exist in the majority of the countries of the globe. By means of these changes the profession has improved in a continuous way and the formulation of questions related to its role (making) and essence (being) and to postulate optimal addressing that lets improving the current social position, orientating the efforts for an autonomy that rescues an approach of higher equity and equality in the sanitary field, towards the patriarchal power of other disciplines that are imposed.

“In these days that we experience a globalized world, the pluralist debate from where Nursing is growing as a discipline, must tackle two aspects: on the one hand, the complex world in which it is immersed the profession of Nursing, on the other hand, the recognition of the inequity conditions that affect to an important part of women.

Nursing is still a profession whose members are mainly women, that live in an inequity system and whose experiences locate them in a particular context when they face social and sanitary problems, as the patriarchal system entrust them the aspect of care, that is recognized feminized in our world<sup>(12)</sup>.

It is precise to retake the historical evolution of Nursing, understood as the process of cognitive conformation and also in the mainly female group that forms it, where it is necessary to clarify that because of being like that, they can't not be responsible for the made mistakes, and it is referred to a mainly patriarchal society that has traditionally charged at women and in one or other way it has given her lower and punitive roles where the dominant man “God” keeps the controller power above his angels (seen these as nurses), so the continuity of a paradigm of access to the power and knowledge, focused on a virile archetype of a model of rational man (a whole semiology of the dominating man) has made room for the hidden of shapes of dominance that are still alive apart from the criticism and the liberating action, what gives rise to a historical discrimination about those less fortunate people, such as women and other socio-demographic categories that suffer specific ways of domination.

“These ways of dominance, promoted in the capitalist civilization (and the brutality) are much more than a super structural effect or a reflection of the economic conditions. They thread the social knitting and have soaked into the human psyche and culture. The permanence of racist, sexist and authoritarian patriarchal relationships that radiate the social knitting to the doors of the new millennium, even under speeches which were expected to be democratic or anti-system<sup>(13)</sup> can't be explained in any other way.

The history shows that Nursing has stepped significantly in the philosophic positioning about the body of knowledge that supports nursing and the use of that knowledge in the daily practice, in the multiple sectors in which it takes part, so it is necessary a way to a domain of equality and equity which makes easier to be a fellow participant<sup>(14)</sup> in



an equal way, taking decisions referring to health, seeing this last one as an action directed to one person or collective.

That freedom or Independence represents a breakup of the power exercised by several social determiners that has to do with a construct established between being and making (without sidelining the historical antecedent) that in some way lead to a blockage of the discipline, but at the same time it lets recapitulating the directions of the future.

It is true that the essence of the profession during many years was coordinated by the defeat and submission to positivist biomedical models, the speech referent to the evolution mustn't come to a standstill in the antecedent, but improve to the critical reflection, "the dominance of the nature becomes in a dominance of the human being above other human beings, and at least in a nightmare of self-domain"<sup>(15)</sup>

It is possible that the power mobilizes the human being or a discipline to initiate dichotomy speeches of the reality and the wondered, or in contrast of the fair by demonstration, however, as it was mentioned before, the blockage of the discipline is not exclusive of its members, but it involves several determiners that make use of the power to generate benefit or prejudice.

Might it be that Nursing has been in some way blocked by the speech of appropriation of others, even itself? Understanding it as the right to speak in the name of certain speeches, understand it and use it, taking into account that to access it, it is necessary to belong to a monopoly group regulated by certain subjects or institutions, like "the speech in the 16<sup>th</sup> century didn't constitute a common speech of free circulation, but it remained circumscribed to a very reduced field of scholars like the medical speech, and in some literary way"<sup>(16)</sup>, conditioning in this way a fairer equity in the participation of the majority.

Is it the speech of nursing little convincing, or dulled by groups of social power inside the health sector? And if it is like that, where has evolved the appropriation of itself to?

"As a result, the main question we must analyze is the fact of whether or not a human being is determined by a language and a conceptual schema of specific facts, that is to say, to inhabit always in a system of thought that prevents for thinking or speaking from an ideal neutral point of view to the environment. I tend to think that this would be the possibility that at any moment, at any situation, any human being can question around him/herself with the intention of discrediting the established"<sup>(17)</sup>.

Although it is true that it is not intended to refute the historically built (for not saying blocked), an emphasis about what should be made is done, free of what has been made because the speech and the tradition has imposed, what provides the opportunity to analyze whether what it is owned nowadays as profession is a value given by others and as a result assumed by others or not.

Under this reflection, the discipline of nursing has generated a shaken change on the structures of seeing the intervention and positioning in an autonomous way as discipline in the field of health, being this the great contribution of the emancipatory process that the professionals have generated in the last decades, the continuous search of why Nursing has a vast body of knowledge that support scientifically the practice, "we count with enough lucidity to question what we have and to decide what

do we aspire to. These reflections bring us to the hypothesis that the human being is not someone absolutely ignorant, but in some way he must know and recognize the ideal, in the less sense of representing at any moment what he/she wants to become<sup>(17)</sup>.

### **Application of the emancipation in the labor field of Nursing**

Nursing has been participant of the central attention, focused on the power of the connoisseurs (wise of the field) with rigid addressing about the decisions that those with less knowledge (users), under positivist lineament (biologists) controlled by a categorical paradigm, far from the sensitivity and reality of those who take part.

It is by means of the analysis of situations like the previous described, that it has been intended to modify the models of attention of Nursing focused on fairer and of interaction conditions, with a high responsibility in the participation of the diverse social sectors that involve a collective construct and that in some way they affect negatively or positively the results of the people's health conditions.

This participation necessarily entails a redistribution of the power and resources among those that take the decisions in health, because if they open spaces of social participation the health personnel loses its dominant hegemony in the resolution of needs in health and it becomes a collective consensus. From this concept the person is visualized as a receptor of the services and opinions about the received attention and a shared participation regarding health conditions are expected<sup>(18)</sup> eliminating the marked model of attention "focused on the illness, individual practice, hegemony of the hospital attention and the intensive use of technologies unable of interfere in an efficient way about an important part of the mortality determinants, the incapacity and the illness"<sup>(19)</sup>, involving the boarding of the several social determiners of the health and an active role of the community instances.

This implies the activation on the half of the Nursing of processes of action and shared interaction with the users, a higher delegation of responsibility to themselves in the decisions making, in the several fields that the professionals of Nursing perform. To promote the social participation in a care level, it is suggested that first must be entry doors to the health systems, where the citizen can implicate in the decision making<sup>(19)</sup>. Another element is the access to the information, taking these as the mechanisms that the population uses to know the services that are given, their rights, prices and the quality of the offered. It must be taken into account that people would be participants if they consider that their actions affect to the results and a benefit would be achieved.

In the case of Nursing, the previous implies an ethic act, where as a product of justice and autonomy, the opinion and active participation of the beneficiary of the service must be taken into account, understanding the participation as a way of intervention that together with the people drive to strategies to improve the health of the individuals, to get over the illness or even to prevent it.

### **Curriculums of Nursing under an emancipatory approach**

"It can be observed that the new roles of the politics in Latin America propose the rebuilding of the political power since the free and participative citizen's practice. Beyond the hegemonic ideologies of the classes and sectors of power, it is required a

society that really recognizes the plurality and diversity of its social knitting, as a principle of advance for programs of citizenship that lead assuming and reaching an agreement regarding differences<sup>(14)</sup>, so generating or developing strengths of production make possible to reduce the pressure of the institutional frame and to change the basis of a obedience towards the culture, a rational basis<sup>(20)</sup>, this condition isn't exclusive of the process of formation at a University level, taking into account that " as the man has a vision of his educational practice about the reality, it is used for the intentions of the intellectual domination, without power, or he can spread out an emancipatory action in the academic context"<sup>(21)</sup>, then the education exercises a fundamental axis in the process of intellectual and attitudinal formation of the individuals that attend to requests of Higher Education, as far as the University should answer to the contextualization of the social systems, orientating its educative proposals towards the necessities of the individuals, with curriculums that by means of "reviews or changes that determine a profile of formation and assignation in the social structure. In this sense, it is built as a political educative space and not as merely technical and pedagogical, for instance, the decisions regarding the way of organization of the contents or the strategies of teaching- even though they are technical- have a political sense, they involve beyond the methodology a social positioning"<sup>(22)</sup>.

Añorga, quoted by Amaro explains that every curricular plan is composed by several dimensions: "the philosophical (it defines the proposed ideals and the goals that orientate the formative tasks of the educative process), social (it locates the curriculum inside a national and international reality), educational psychology (it recognizes the integrity of the human being and the necessity of the reflection and the dialogue), methodological (it orientates the viable way for learning and it characterizes the interaction between students and teachers, among them and their environment), technological (it defines the ways and processes that are used to achieve the aims and goals at the university in the educative process), and communicational (it considers the education not as a system of influences that has as an end the socialization of people, since the interests and values of a society, in a determinate context that lets sharing emotions, questions and reflections, to develop the capacity of logical thinking and to organize actions to transform the reality)"<sup>(23)</sup>.

The curriculums of Nursing, from the critical theory could guide the pedagogical discursive reencounter keeping the emancipatory ideas of the transcendental subject, the realization between objectivity and rationality, the not coincidence between the being and the reasoning, as much as the reasoning and its opposite principle<sup>(21)</sup>.

"The pedagogical discursive reencounter doesn't mean the end of the history, it means the search of how the meta-stories of domination in relation to teacher-students were unfolded, and to which the rationality obeyed"<sup>(21)</sup>, being this the true challenge to the conformation of educative models of Nursing, that delete the dominant pattern of the teachers (me expert), exercised traditionally towards the students (not experts) a way of "violence towards its fellow men in formation with the aim of maintaining a professional standard and reaching the so desired recognition, in the context of a competitive and voracious market, and of an exercise in conflict of multifactorial roles"<sup>(24)</sup>.

Then, "Nursing requires teachers highly qualified to promote the autonomous learning of its students, the same that would originate graduates concerned with their self-education, in a way that as a professional group they assume a protagonist role in the



development of humanity, and they learn from the classroom to create and participate in a more human, equality and responsible world”<sup>(25)</sup>.

The problems live nowadays in the fact that majority of the curriculums of Nursing have a structure that consists of a series of steps that start since the basic sciences, to the practice, what implies a hierarchy of roles of those who possess the knowledge, driving to a subordination of those who are closer in the practice, the ones who are in the production of knowledge<sup>(26)</sup>, then it can be appreciated that the majority of the quantitative distribution of the nursing curriculums are focused on the preparation of people under a mainly assistant approach<sup>(27)</sup> and under a research support because of the surcharge assigned to the diverse mechanist practices.

In Latin America the transformation “... it can't be limited to appeal to ways of investigation commonly accepted as it was made in cases of technical and practical interest. It is not enough to sound out the foundations of established disciplines, but it is necessary to board in epistemological reflections as propaedeutic to formulate a new conception of social and philosophical research”<sup>(20)</sup>.

Equally, in the curriculums of Nursing the research lets the formulation of answers to different problems of social nature that by means of the use of reflective strategies and critical analysis penetrates the sensitivity of those that want to know about the studied. In this sense, the use of qualitative strategies, focused on the cultural competence as an applied knowledge to Nursing would be one of the most significant research topics in the next years, condition that the quantitative research hasn't had in these aspects<sup>(28)</sup>, however, more than a distancing of both positions (quantitative-qualitative), it must be implemented a complementarity among them to improve the answers to some questions.

What it is necessary is the understanding that leads to the emancipation regarding the research, as its boarding is orientated towards the reality of people, generating an approach that lets identifying the realities of those who live them, aspects which are necessarily involved in the formation of professionals in Nursing that “empower to use and develop resources for learning in agreement with the current requirements of the society, taking profit of the scientific technological activity and employing propitious environments for the individual growth of the students and the academic development, promoting a professional active, creative and questioning formation”<sup>(29)</sup>

The qualitative research (without minimizing importance to the quantitative) represents an adequate tool to reach true answers to an ideal of active participation on the half of the person who researches and those who participate in itself, being inside it the research- action a way of “making clear that certain existent distances between theory and practice can't be exceeded while the contextual factors are not modified. In this case, the research action can come from the reflection about the political strategies that drive to the modification of the “system” in a way that the education action can be possible”<sup>(30)</sup>

The articulation between a curriculum that lets the students developing a critical and reflective thinking, based on the importance of setting strategies that generate analysis of real problems, together with the teaching of models of research under the same approach, consolidates the compromise that Nursing has assumed for a long time with the society: the configuration of health strategies that promote the people to take decisions regarding their own health, and a multidimensional comprehension of them.

## CONCLUSIONS

The emancipating paradigm, as a way of reflection and criticism to the traditional exercised power, proposes measures of social and justice participation, putting down roots in important ethical remains in the acts of humans. In the specific case of Nursing, this emancipating process is reoriented to the traditionally vision dragged in the essence of being and making, so the opening to the reflective thinking lets modifying the way in which the profession is positioned towards its role, it offers intervention and prepares the future nurses.

The autonomy in Nursing as a way of disciplinary Independence represents an important step, product of the analysis of those nurses that thought about the dominant models that came from the traditional patriarchy and positivism, favoring in a fair way acting based on the scientific knowledge that the profession has evolved in the last years. It is like that the autonomy of Nursing isn't anything else that the answer supported by the social models exercised traditionally by dominant structures of the power, justified in the absolute knowledge of just some.

It is a product of the process of the reflective analysis of what Nursing is and makes, that arose from the necessity of modifying the way in which it is given assistance to the populations or individuals that need the health services, reorienting the thinking towards the breaking of nurses dominant of knowledge against individuals who lacked it, and to formulate then health mechanisms where the users represent active beings of their own health, and as a result the intervention becomes of reductionist open models and social interaction.

The achievements in the discipline of Nursing, product of the emancipation as a reflective way, also match up the academic field, as they support the curriculums with learning strategies that make easier to the students a critical analysis towards the diverse problems boarding, generating a shared knowledge from the individual knowledge to the collective knowledge, where the teacher represents an accompany during the process.

In the same way, the emancipating positioning has let orientating the research from the academy under less quantum models of the human being, and it has generated an opening towards the approach and participation of those who possess a given problem and that needs to be boarded.

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