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Godoy Serpa da Fonseca, Rosa Maria; Nunes Guedes, Rebeca; Ribeiro Zalaf, Marília Rita; Máxima Pereira Venâncio, Kelly Cristina
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The gender research in nursing production: contributions of the *Gender, Health and Nursing Research Group* from the University of São Paulo School of Nursing*

PESQUISA DE GÊNERO NA PRODUÇÃO DE ENFERMAGEM: CONTRIBUIÇÃO DO GRUPO DE PESQUISA GÊNERO, SAÚDE E ENFERMAGEM DA EEUSP

INVESTIGACIÓN DE GÉNERO EN LA PRODUCCIÓN DE ENFERMERÍA: CONTRIBUCIÓN DEL GRUPO DE INVESTIGACIÓN GÉNERO, SALUD Y ENFERMERÍA DE LA EEUSP

Rosa Maria Godoy Serpa da Fonseca¹, Rebeca Nunes Guedes², Marília Rita Ribeiro Zalaf³, Kelly Cristina Máxima Pereira Venâncio⁴

ABSTRACT

The present study of the theses and dissertations produced by the *Gender, Health and Nursing Research Group*, at the University of São Paulo School of Nursing was performed with the objective to describe and analyze the knowledge production of the referred group, its produce and construction process. The outcomes indicate an expressive production in the collection of gender studies in the national setting, revealing that advancing the understanding of the social phenomenon from a gender perspective has improved not only the research, as well as the intervention domain. In the field of health and nursing care practices, it has been shown that it has proved capable of revealing the pervading limitations and strengths.

DESCRIPTORS

Gender and health
Feminism
Nursing research

RESUMO

O estudo das teses e dissertações produzidas pelo Grupo de Pesquisa *Gênero, Saúde e Enfermagem*, da Escola de Enfermagem da Universidade de São Paulo, teve por objetivo descrever e analisar a produção do saber construído pelo grupo, seu produto e processo de construção. Os resultados mostram uma produção expressiva no conjunto de estudos de gênero no cenário nacional, revelando que o aprofundamento da compreensão dos fenômenos sociais sob a ótica de gênero tem trazido avanços não só no âmbito da pesquisa, como da intervenção. No campo das práticas em saúde e de enfermagem, tem se mostrado capaz de revelar os limites e as potencialidades que as permeiam.

DESCRIPTORES

Gênero e saúde
Feminismo
Pesquisa em enfermagem

RESUMEN

El estudio tuvo objetivo describir y analizar la producción del conocimiento construido por el grupo de investigación *Género, salud y enfermería*, del Departamento de Enfermería de Salud Pública en la Escuela de Enfermería, Universidad de São Paulo, con respecto a las tesis y disertaciones, su producto y el proceso de construcción. Los datos muestran que el grupo tiene una producción significativa en el conjunto de los estudios de género en el ámbito nacional, revelando que la profundización de la comprensión de los fenómenos sociales desde la perspectiva de género no sólo ha traído avances en la investigación y también de la intervención. En el campo de las prácticas de salud y de enfermería ha sido capaz de revelar los límites y el potencial que permean.

DESCRIPTORES

Género y salud
Feminismo
Investigación en enfermería

* Extracted from the Research Group Gender, Health and Nursing, School of Nursing, University of São Paulo, 2011. ¹RN. Full Professor, Collective Health Nursing Department, School of Nursing, University of São Paulo. Head of the Research Group "Gender, Health and Nursing". CNPq 1D Researcher. São Paulo, SP, Brazil. rmsgsfon@usp.br ²RN. Doctoral student of the Inter-unit Graduate Program in Nursing of the São Paulo and Ribeirão Preto *campi*. Member of the Research Group "Gender, Health and Nursing". São Paulo, SP, Brazil. ³Social Worker. Doctoral student of the Nursing Graduate Program, School of Nursing, University of São Paulo. Member of the Research Group "Gender, Health and Nursing". São Paulo, SP, Brazil ⁴RN. Master student of the Nursing Graduate Program, School of Nursing, University of São Paulo. Member of the Research Group "Gender, Health and Nursing". São Paulo, SP, Brazil.

INTRODUCTION

In 22 years of existence, the Research Group *Gênero, Saúde e Enfermagem* (Gender, Health and Nursing) has achieved a significant production in the development of knowledge in the field of Collective Health Nursing, in terms of theoretical-methodological objects and instruments related to the historical processes of femininity and masculinity, resulting from the relationships between men and women – i.e., the gender category.

Knowledge was based on a specific gender episteme, on the belief that

A methodology should address sciences from the perspective of their production – as a result in the form of scientific knowledge – but also as a process – as the genesis of the knowledge itself. The methodology should help explain not only the products of scientific investigation, but, particularly, its own process, because its demands are not strictly submitted to rigid procedures, but, rather, to the fecundity in producing results⁽¹⁾.

This article analyzes doctorate thesis and master dissertations in terms of the yield and construction process, with the purpose to answer the following questions: What social phenomena and research objects have been favored in these studies? What theoretical-methodological frameworks have been used? What empirical fields and methodological approaches for data collection spoke the reality? What is the state-of-the-art in gender knowledge produced by the Group *Gender, Health and Nursing*?

A brief retrospective in history shows that the group originated with the development of the thesis *Mulher, reprodução biológica e classe social: a compreensão do nexo coesivo através do estudo dialético do perfil reprodutivo biológico de mulheres atendidas nas unidades básicas de saúde* (Women, biological reproduction and social class: understanding the cohesive nexus through the dialectic study of the biological reproductive profile of the women users of basic health units)⁽²⁾. The objective was to learn and understand, under the light of historical and dialectic materialism, the biological reproductive profile of women users of the Basic Health Units in Taboão da Serra, according to their social classes. The categorization of the social classes was according to Lenin's definition, a methodology used in Mexican and Brazilian studies performed under the emerging Collective Health framework, the theory of social determination of the health-disease process⁽³⁻⁴⁾.

The data analysis under the most classic category of the historical and dialectic materialism was unable to explain why several women experienced similar problems and situations regarding their biological reproductive pro-

file, despite being in different social classes and, therefore, having a different quality of life. The conclusion was that the social class category was insufficient to explain the differences, thus it was necessary to seek other source of analysis.

At that time, in Social Sciences, gender studies were being intensified, which implied that perhaps that field could help the possible explanation about phenomena in women's lives, regardless of the social classes. The explanation about the biological reproductive profile could lie on the confluence of the two categories rather than on the exclusion of single application of one of them, in this case, social class. The impasse was declared and the gender category was pointed out as the further possibility of application to prove the, so far, traced hypotheses. Later, thoughts would emerge about the existence of a true alchemy between social classes to explain the phenomena (gender, social class, generation and race/ethnicity)⁽⁵⁾.

Hence, a new line of research was open, changing the theoretical framework of historical and dialectic materialism with the inclusion of gender as and explanatory category of reality. It was the first gender study produced at the University of São Paulo School of Nursing, and the first thesis on gender in Brazilian Nursing, according to the Theses and Dissertations Catalogue (*Catálogo de Teses e Dissertações*) of the The Brazilian Nursing Association Center for Nursing Studies and Research (*Centro de Estudos e Pesquisas em Enfermagem da Associação Brasileira de Enfermagem - CEPEn*), as we verified in a subsequent study⁽⁶⁾.

From there on, the gender theoretical-methodological framework was clearly assumed. Even studies that did not address themes related to masculinity and femininity adopted the gender episteme used in specific studies.

OBJECTIVE

To describe and analyze the knowledge production performed by the *Gender, Health and Nursing* Research Group, in terms of the theses and dissertations produced by the members of the group, and supervised by the coordinator.

METHOD

This is a literature review. The database consisted of the theses and dissertations produced by the *Gender, Health and Nursing* Research Group, of the University of São Paulo School of Nursing (EUSP), defended since the formation of the group until current days, that is, from 1990 to 2011. The information was obtained by reading

the material and organizing it using an instrument containing: general data (authors, type, date of the defense), the abstract (type of study, study object and objectives, methodological framework, data collection technique, data sources, data treatment, type of analysis, coherence between objectives and results, and keywords). The original editions were reviewed, which were available at the *Wanda de Aguiar Horta* Library at EEUSP.

RESULTS

The group yielded 16 doctorate and one free-lecturer theses, and six master dissertations. Only three master dissertations and two doctorate theses could be specifically classified as *gender studies*, although it was certain that the theoretical-methodological framework of the remaining studies was within the gender perspective. All of them were produced with the Inter-unit Nursing Graduate Program of the São Paulo and Ribeirão Preto *campi*, and the Nursing Graduate Program, the area of concentration of Collective Health.

Following the theses that actually initiated the production of the research group, the subsequent studies appeared six years later, a time needed in order to advance the knowledge about the emerging health and nursing framework. Next, the production became regular, with theses that, today, are twice the number of dissertations.

Initially, only interviews were used for the data collection. However, considering the transforming potential of the gender category, it became imperative to find equally transforming research methods. That is how the Workshop began being used as a strategy for data collection and, later, for data analysis. It was used for the first time in the free-lecturer thesis, in 1996⁽⁷⁾ and, as of 2001, in nine studies, eight theses⁽⁸⁻¹⁵⁾ and one dissertation⁽¹⁶⁾.

The Workshop, itself, was studied in terms of its potentiality for research and intervention. It is currently considered a method⁽¹⁷⁻¹⁸⁾, because it is based on a specific theoretical framework and has its own systematization.

The semi-structured interview was the data collection technique in 13 studies^(2,10,15,19-28,34). Some studies used various forms of data collection: interview and workshop⁽¹⁰⁾, participant observation and interview⁽²⁷⁾; and participant observation, interview, and workshop⁽¹⁵⁾.

Regarding the lines of research and their respective themes, the predominant ones address nursing or midwifery^(6,8,10-11,23); violence against women or adolescents^(14,15-16,26,34); women's health-disease process^(20,22,24); child care^(9,19); knowing-being ethical-professional in nursing⁽²⁷⁻²⁸⁾; reproductive biological profile⁽²⁾; mental health and work⁽²¹⁾; reproductive health and masculinity⁽¹²⁾; adolescence and empowerment⁽¹³⁾; alcoholism and drug addiction⁽²⁵⁾.

Between 1990 and 2003, the study objects were women's life phenomena or health-disease process, and nursing practice. As of 2005, research began addressing violence against women and adolescents, also comprising the theme of most ongoing studies (three doctorates and one master dissertation).

Weaving along this course, some of the studies developed addressed women and children, drug addiction, masculinity, mental health, and the knowing-being ethical-professional in nursing. All studies followed the gender episteme.

Regarding the settings, ten investigations were performed at primary health care services, mostly Family Health Programs; four at teaching institutions, such as child care, technical nursing school, and higher education nursing school. Two were performed at a psychosocial care center and another two at non-governmental institutions. Three took place at a university student housing facility, one at an infectious-diseases outpatient clinic, and one at a philanthropic institution for comprehensive health care. The latest study was performed at municipal service for coping with violence against women. The majority of the institutions were connected to the National Health System and Collective Health.

DISCUSSION

The studies were founded on the theoretical-methodological framework of historical and dialectic materialism, and the majority used the gender analysis category. Some did not aim to use this category, but eventually did so, because of the strength of its pertinence to understand the analyzed phenomena^(2,19). The yield of the group followed the tendency of gender studies occurring in Brazil.

A study performed about the production of 51 gender research groups (with data until May, 2005)⁽²⁹⁾ revealed

the rapid growth of scientific production, with a total 98 dissertations, 42 theses and 665 articles about gender and health. Women are authors to 86.0% of the theses, 89.0% of the dissertations, and 70.5% of the articles. The themes can be gathered into five subgroups: reproduction and contraception; gender violence; sexuality and health, with emphasis on STD/AIDS; work and health, including domestic work and night jobs; other emerging or poorly explored themes.

Considering the production of the Group *Gender, Health and Nursing* until 2005, the 15 theses that made a direct use of the gender category accounted for approximately one third of all the theses produced and reported in one study⁽²⁹⁾. This implies that the group has an expressive yield considering gender studies in the national academic production scenario, following the tendencies of the other studies.

The Workshop was an important contribution from the group, because it combines data collection and data analysis to the participants' reflections and strengthening. It was confirmed that these techniques

reached the academic setting as a pedagogical instrument for knowledge production, and were adapted to social research objects, aiming at the qualitative transformation of learning environments⁽¹⁸⁾.

Thus, the fertility of this process is verified, as it allows for aggregating research and social intervention. The Workshop consists of a unique method of the feminist episteme, based on the theoretical foundations of critical-emancipatory education⁽³⁰⁾ and on emotions as constructors of knowledge⁽³¹⁾. Furthermore, it uses the premises and systematization of the Theory of Collective Health Praxis Intervention, based on the materialist dialectic⁽¹⁾.

ABOUT THE STUDIES PERFORMED ACCORDING TO THE CHOSEN THEMES

Gender and nursing work

The studies showed that nursing care emerges as a qualified knowledge that combines technical and scientific aspects with affectivity, considering that care and affectivity are socially considered feminine characteristics. The nurse-client relationship is fostered within inter- and intra-gender difficulties and the practice is guided by medical and masculine framework, which assigns Nursing an inferior status in the field of knowledge. The idealization of care defines a relationship with the clients that hinders the improvement of women's capacity to make demands, and the professionals to demand their rights. The nursing practice was also revealed as being un-gendered, not taking into consideration the historical processes regarding the construction of masculinity and femininity, understanding the inequalities between men and women, determined by biological rather than social factors.

Some similarity exists in terms of midwifery⁽²³⁾. Scientific development has brought, within its core, women's cultural option for a labor assisted by a male physician, submitting themselves to a power determined by gender and by knowledge. Because the care provided at times surrounding the delivery, and because midwifery is a historically feminine field, women need other women (midwives) to impose their right to making decisions. Taking this into consideration, the study author committed herself to defending women's rights, so that nurses and women can be partners to promote dignity and security to birth and delivery. This thesis aims to strengthen the need to re-implement the education of midwives, at the undergraduate level, which has been interrupted since the 1960's. In 2005, a course was open at the University of São Paulo School of Arts, Sciences and Humanities to meet this need, which was greatly influenced by the referred study, as the author was one of its proponents⁽³²⁾.

Gender and violence

Since the first thesis, violence against women appears and a recurrent phenomenon, in spite of not consisting of an object of investigation. In that study⁽²⁾, several of the 159 interviewees state being victims of sexual (rapes, abuse), psychological (disqualification, swearing), physical (beatings) and institutional violence (tubal ligation and IUD placement without the women's knowledge and prior consent). The same was found in other studies^(10-11,20,24) until the first specific investigation on women's violence was completed in 2005⁽¹⁴⁾.

Overall, violence is seen as a problem pertaining more to other fields (education, security) than to health, and health care professionals feel powerless and unprepared to deal with it. The conceptions are based on common sense and do not consider the historicity of the unbalance in the power relationship between men and women in determining gender violence⁽¹⁵⁻¹⁶⁾. This field has been currently addressed in a significant number of studies, because of the increasing contribution of women's movements to reveal problems that were once naturalized and without much interest for academic production. It is gradually becoming an important item in the health area. One study on the violence against adolescents, as they perceived it⁽²⁶⁾, was impressive because of the conjugation of many types and intensities of violence in the marginalized groups and the awareness that it represents a serious problem in their lives. Girls as expected, were more affected by sexual violence than boys.

Gender and women's health-disease process

The flagship of the group's production, the first thesis was about the imbricated relationship between the social situation and the women's life phenomena⁽²⁾. Later, other studies would confirm the relationship between gender and the health-disease process, with the social feminine subalternity creating a heavy burden on women's health problems^(20-21,24). HIV seropositivity consisted of a study object to understand the concept of maternity for women in this condition, and it revealed that women were not even given the right to know about the risks to which they were being exposed, an aspect determined by the ideas of romantic love⁽²⁸⁾. Drug addiction was another theme in one of the group's studies, that was revealed as a field where gender violence emerged⁽²⁵⁾.

Knowing-being ethical-professional and nursing practice

In this study area, two dissertations addressed a inter-institution project developed with the Program for the Professionalization of Nursing Workers (*Programa de Profissionalização dos Trabalhadores da Área de Enfermagem* – PROFAE), which aimed to understand the knowing-being ethical-professional of nurse's aides and validate their markers, with a view to proposing a methodology to assess professional competencies⁽³³⁾. The studies revealed that knowledge is permeated by conceptions from com-

mon sense that associate nursing practice to characteristics that are historically and socially feminine, making it more difficult for nursing to be understood as work. The knowing-being ethical-professional is still not much explored in term of the education of nursing technicians⁽²⁷⁻²⁸⁾.

CONCLUSION

The production of the *Gender, Health and Nursing* Research Group reveals that improving the understanding about social phenomena from the gender perspective has made significant advancements in terms of research and intervention. It has proven capable of revealing the strengths and weaknesses of health and nursing practices. In terms of weaknesses, the traditional knowledge has prevailed, and it remains associated with oppressing ideologies. As instrumental knowledge, it has guided the current professional practices, despite the existence of a new and equitable comprehensive health care model proposed by the National Health System (SUS). The gender perspective can be seen as a guiding praxis in health care, changing the view about the reality and the interventions to overcome its contradictions.

The Workshop has proven a strong instrument because its application strengthens and empowers the subjects, leading them to think about the phenomena as

inherent to their condition of men, fathers, aggressors, women, mothers, workers, victims.

Furthermore, the development of studies has permitted to: improve the understanding of the health-disease process of women and men according to the historicity of how femininity and masculinity was created in the Brazilian society; make interventions in nursing education in Collective Health and in general, be creating and developing class disciplines that address the gender issue or other related contents in the undergraduate and graduate nursing *curricula*; make interventions in the qualification of the workforce in nursing, health, and related areas through activities with other institutions and services; implement a generalized nursing practice for women and men, proposing alternatives to overcome the existing contradictions in the life and health of the different population groups; understand nursing as a socially feminine practice, develop and implement alternatives to overcome the subalternity to which it is submitted among the other social practices, namely in the health area; understand violence against women as a socially and historically determined phenomenon, thus permitting an emancipatory intervention through knowledge and health care.

These advancements have strengthened the creation of an innovative field of study that, also, is sometimes contradictory. We are sure that its development will give nursing and women the place in the sun they seek and deserve.

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