

Online Brazilian Journal of Nursing

E-ISSN: 1676-4285 objn@enf.uff.br

Universidade Federal Fluminense

Brasil

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Online Brazilian Journal of Nursing, vol. 11, núm. 1, 2012, pp. 194-204 Universidade Federal Fluminense Rio de Janeiro, Brasil

Available in: http://www.redalyc.org/articulo.oa?id=361441676018



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# ESCOLA DE ENFERMAGEM AURORA DE AFONSO COSTA

v.11, n.1 (2012) ISSN 1676-4285



cebido: 02/08/2011 rovado: 13/04/2012



ORIGINAL ARTICLES

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EXPANSION OF THE NURSING SPECIALIZATION

COURSES - RESIDENCY MODE IN OPHIR LOYOLA

HOSPITAL - PARÁ (1998 2004)

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#### **ABSTRACT**

**Objectives**: Characterize the Nursing Specialization Courses – Residency Mode in Ophir Loyola Hospital and analyze the implications of the expansions of these courses to the nurses and to the Hospital. **Method**: Historic-social Research. The data sources are based on oral testimonies of involved agents with the process of implementation and expansion of the courses and written documents. The theoretical support counted with the concepts of cultural, social and symbolic capital, from the *habitus* of the French sociologist Pierre Bourdieu. **Results**: it was evidenced that the expansions of the courses allowed to the nurse an update of his/her professional *habitus*, with the incorporation of some specific knowledge and of a higher complexity. **Conclusion**: despite the political,

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social and structural difficulties, the investment made by the nurses contributed to elevate the quality of the health institutions that had professionals coming from the Nursing Residence Courses.

**Keywords:** Nursing; History of Nursing; Specialization.

**INTRODUCTION** 

In 1998, the Brazilian North region counted with a low number of professionals, such as doctors and

nurses. The 1999 records from the Brazilian Ministry of Health reveled that the region had 0.6 doctors

and 0.3 nurses for every 1,000 inhabitants. It is observed, though, that the labor market for doctors

was approximately three times the openings for nurses. (1).

Such preoccupation is justified, taking into account the whole extension of the Brazilian North region,

which covers around 60% of the national territory, with nearly five million square kilometers, and

drawing attention as a provider of environmental services that are able to respond the collectivity as a

stabilizer of world climate condition, offering its natural resources, such as the largest hydrographic

basin, largest forest, largest river in extension, in summary, it concentrates the largest biodiversity of

the world<sup>(2)</sup>.

On the other hand, besides this wealth there is also a territory stamped with social conflicts, a

capitalized agriculture, especially soy, aimed to exportation, rising the intra-regional migrations in the

search for better conditions for basic services. All that contributed for the occupation of urban spaces,

in a disorganized way, without proper sanitation, reverberating in a crescent mass of poverty. A

phenomenon observed mainly in the local metropolis of Manaus and Belém do Pará, which are

responsible, in great part, for the maintenance of the social-politic, economic, cultural and sanitary

unbalance of the region<sup>(2)</sup>.

Considering the relevance of the mentioned aspects, it is important to highlight the necessity to give

continuity of a social-economic and sanitary policy to the Brazilian North region, giving prominence to

the areas of Education and Health. This take us to the apprehension with the continuity of the

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programs of Nursing Specialization Courses – Residency Mode as an important measure for the qualification of the health professional in the state of Pará. The residence in Nursing is set as a *Lato Sensu* post-graduation mode, aimed to nurses that is characterized by the development of technical-scientific and ethic competences that come from service training, and in a some way, allowing them to contribute to a more qualified nursing assistance to the service of citizenship<sup>(3)</sup>.

The current study has as objectives: characterize the Nursing Specialization Courses – Residency Mode in the Ophir Loyola Hospital and analyze the implications of the expansion of these same courses to the nurses and to the Hospital. The time framed starts in the year of 1998 to 2004, being the milestone the creation of the Courses and the end corresponding to the year of expansion of the Nursing Specialization Courses Residency Mode in Ophir Loyola Hospital.

#### **METHODOLOGY**

The study had as a theoretical support the thoughts of the French sociologist Pierre Bourdieu on the concepts of cultural, social and symbolic capital, besides the concepts of *habitus* and field. Bourdieu's central argumentation is that social practices are structured, which means, the present typical proprieties of the social position, which produce them. Those practices are expressed by the *habitus*, which "translates the intrinsic and relational characteristics of a position in a univocal life style, or in other words, in a univocal group of choices, of goods and of practices", once that the *habitus* correlates with a group of distinctive traces and differential separations, constitutive of a mythical-ritual system that symbolizes the individuals within the social spaces<sup>(4)</sup>.

The background for this study was the Ophir Loyola Hospital (OLH), that represents the social space where the dialectic relationships among the agents were established (doctors, physical therapists, psychologists, social workers, nurse technicians and other members of the area of health team) and the structures of this space.

The primary sources of this study was composed by semi-structured interviews, performed between the months of October and December 2009 and from January to March 2010, supported by a guide of

open questions, allowing to debate the topic in vogue, without losing sight of the raised question (MINAYO, 2007, p. 64). The deponents were people who participated or witnessed the happenings, a total of three nurses and one doctor, that acted as Managers; amongst the interviewed nurses, one worked as a Manager and also as Class Representative. The interviews were only conducted after the signature of the Free and Clear Consent Agreement. Some written documents were also analyzed: Laws; Decrees; Resolutions and the State Official Journal. These sources constituted the documental corpus of this study.

The secondary sources were constituted of articles, thesis, dissertations and books, which substantiated the analysis of derivate information from the primary study sources. These sources were located in public and virtual libraries, such as: Dr. Orlando Costa Library; Public Health Virtual Library of the State of Pará; Digital Library of Thesis and Dissertations of Pará State University (UEPA, in Portuguese), through the link www.bdtd.ufpa.br and Paulo Freire Library – CCSE – Campus I – UEPA.

As professed by the historical method, in this study there are three essential stages: the data collection; the critical analysis of this information and conclusion. Therefore, after a step of selection and classification of documental sources, it was preceded by the determination of the quality and relevance of the information contained in those sources for the historiography study here proposed. This process of source validation is named internal and external critics. On the data analysis stage, the group of political and social factors was considered for the interpretation of historical data, which allowed the historical exposition from the selected documentation. The present study was submitted do the Ethics in Research Committee of Anna Nery Nursing School/Saint Francis Assisi School Hospital, under protocol number 087/2009, approved on the 30<sup>th</sup> of November of 2009.

### **RESULT AND DISCUSSION**

The motivation that pushed forward the creation of Nursing Specialization Courses in Residence Mode were distinct, but it is possible to consider that the necessity to develop specialized human resources in the field of health in the state of Pará and, above all, to work directly at the OLH, was quite relevant

http://www.objnursing.uff.br/index.php/nursing/article/view/3668 for the nurse professors to organize themselves in a way to transform this desire in a reality, such as

seen in the following testimony:

The Specialization Course started from a necessity to develop specialists in the state of Pará to attend the local need for more specialized professionals, especially of the Ophir Loyola Hospital and also by the great demand of Nursing professionals that looked for the Hospital in search to improve their knowledge [...] (DG1).

In this sense, the nurse professors updated their professional *habitus*, mainly by the incorporation of meaningful scientific capital. The scientific *habitus* is a "scientific *modus operandi* that works in a practical state according to regulations of science without naming these regulations in the beginning"<sup>(4)</sup>.

The Surgical Nursing Specialization Course – Residence Mode was the first to be created at the Ophir Loyola Hospital, in 1998, without the support from a University institution, as the Directives and Bases of Brazilian National Education Bill, promulgated on the 20<sup>th</sup> of December of 1996 establishes<sup>(6)</sup>.

The selection process occurred during the period of 21<sup>st</sup> to 28<sup>th</sup> of January of 1998, and it was run in three stages: written evaluation, curriculum vitae evaluation and personal interview, according to the following report:

To this Residence, the selection process was of a written exam, curriculum vitae examination and, in the end, an interview, which aim to evaluate if the candidate really had the intention and conditions to finish the course, and was aware that there was any sort of recognition by a University, and therefore, no academic equivalence. Everything was always clear to the candidate. [...], and, in this process, it was also created a waiting list to be called in case a candidate left the course. (DGEC)

The program of the Surgical Nursing Specialization Course – Residency Mode had as objectives: to amplify and to improve the technical, scientific, ethic and humanistic knowledge of the nurse, aiming to capacitate him/her to the development of his/her assistance, administrative, teaching and research

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activities, centered in a holistic view in the Theory of Basic Human Needs; to improve the Surgical Nursing assistance to the clients of the Ophir Loyola Hospital (OLH) through the work of many nurses acting in diverse areas, in the preventive, healing and rehabilitation instances; to offer to the labor market specialized professionals in the care to the individual in perioperative procedures of surgical clinics, such as: oncology, neurology, uro-nephrology, thorax, cardiovascular and others (PARÁ. Regulamento do Curso de Especialização em Enfermagem Cirúrgica-Modalidade Residência, 1998).

The Course had the duration of two years, with training in service, in a full time regime, corresponding initially between 40 to 48 hours/week, contemplating a minimum total workload of 2,800 hours under the tutoring of a qualified nurse. The first year was constituted by a common cycle, according to the area of specialization after deliberation of the Residence Commission of the Surgical Nursing Specialization Course (CREnC, in Portuguese)<sup>(7)</sup>.

The Surgical Nursing Specialization Course – Residence Mode had as human resources for the development of the theoretical-practical activities, in a great number, Masters and PhD holders. This means that at that time, it already fulfilled the minimal recommended demands by the Brazilian Federal Nursing Counsel (COFEn, in Portuguese). This initiative aimed to safeguard the participation of professionals with elevated institutionalized capital, quite able to enunciate an authorized discourse in the nursing field that refers to the formation of specialists in the surgical field<sup>(8)</sup>.

Concerning the complexity inherent to the process of qualification of nurses in Residency Courses, we should consider that the scientific field represents a social one, therefore, impositions and solicitations are implied, independently from the global social world that surrounds it. Thus, the capacitated nurses would be ready to contribute to the autonomy of the scientific field, amplifying the power of refraction and retranslation<sup>(9)</sup>.

While it was not able to establish a partnership between the UEPA and the OLH, the difficulties to maintain the Surgical Nursing Specialization Course – Residence Mode increased. This situation is illustrated on the following testimony:

[...] there was a considerable fatigue, and after the fourth yearit was ever harder to get

Even considering the struggle of the professionals involved directly in the maintenance of the Nursing Residence, in 2001, it counted with four classes, totaling 22 conclusive students<sup>(10)</sup>.

The conclusion certificates of the Surgical Nursing Specialization Courses – Residence Mode between the years 1998 to 2001 were issued by the OLH itself<sup>(11)</sup>. Besides the fact it is not a learning institution and at that there was not a formal partnership with the UEPA, the abovementioned document aggregated social value, since the diploma translated a representation of value to the holders. While the cultural capital institutionalized represents the legalization of the professional *habitus* of the holder and constitutes a weapon of elevated symbolic value on the fight for a better labor field position<sup>(4)</sup>.

Only in 2002, throughout the duration of the fifth year of the Surgical Nursing Specialization Course – Residence Mode that the Nursing Residence Program demonstrates advances towards a formal partnership with the UEPA. During this occasion, the University Counsel (CONSUN, in Portuguese) of the UEPA, when analyzing the Project, they decide to approve it under certain conditions<sup>(11)</sup>, as registered on the following declaration:

[...] When the residence project was evaluated by the UEPA, they have asked to the OLH Director a declaration of responsibility for the financial execution of the project [...] (DG1).

The partnership established on the Resolution #683/02 of the CONSUN/ UEPA defined the responsibilities of each institution. In this sense, it was clear that the University was delegated with the pedagogical support, which included the register of students, emission of conclusion certificates of the courses, participation in the development of theoretical content and of dissertation tutoring, coordination of the implemented course and the ones to be created. To the Hospital, there was the availability of financial resources as predicted into the budget sheets of the Nursing Residence Project, destined to scholarships, feeding the residents, developing an environment equipped with computers with access to the virtual network, besides a library with updated bibliographical collection<sup>(11)</sup>.

The nurses of the Nursing Specialization Course – Residence Mode were submitted to theoretic-practical pedagogic activities with a curricular design including eleven subjects related to some thematic areas, making a total of 590 hours in theoretical classes and 2,930 hours in service training, summing up 3,520 hours in a rotation scheme. The first year was then made of theoretical activities, from the subjects named Academic and Scientific Methodology, Research Methodology, Didactics, Fundamentals in Theory and Methodology.

The practical activities were performed in the General Surgery Clinics, aiming the knowledge of assistance/management in Nursing in a holistic way. The second year, the resident opted for an area of concentration, which the Final Dissertation was developed.

### **Expansion of the Nursing Specialization Courses - Residence Mode**

Still in 2002, the governor of the state of Pará at that time, Mr. Almir José de Oliveira Gabriel, projects the creation of regional hospitals in his administration, and asks the Ophir Loyola Hospital an investment towards the formation of specialists in medical and nursing areas, focused to support this necessity. The following testimony supports this political objective:

[...]. The governor Almir Gabriel in his government plan projected the construction of Regional Hospitals, [...], and asked the Hospital, the preparation of specialists, in both medical and nursing areas, to sustain the need of base hospitals that were being constructed. [...], one in Marabé, one in Santarém, one in Altamira and one in Ananindeua, which is the Metropolitan Hospital.[...] (DG5).

This political investment in public health contributed, in the 17<sup>th</sup> of November of 2003, to be published on the State Official Journal, the Public Announcement #1, about open enrollment to the other Nursing Specialization Courses – Residence Mode in Medical Clinic, Oncologic Clinic and in Intensive Care Unit<sup>(12)</sup>.

The candidates were submitted to a selective process that was performed first with an objective exam,

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http://www.objnursing.uff.br/index.php/nursing/article/view/3668 which was eliminatory, including general knowledge in Nursing in Undergraduate level, weighting 9.0 (nine) and Curriculum Vitae analysis, weighting 1.0 (one)<sup>(12)</sup>.

The selected nurses started the course on the 3<sup>rd</sup> of February of 2004, with the Magna Class in a combined session with the candidates selected for the Medical Residence. The lecture called "The Trajectory of Health in Pará" was delivered by Prof. Dr. Camilo Viana, in the Luiz Geolas de Moura Carvalho Room<sup>(12)</sup>.

For the Oncologic Nursing Specialization Course – Residence Mode there were 20 (twenty) enrolled candidates for four open positions (UEPA/Resolution CONSUN #1021/04). The curriculum was constituted of 11 subjects, corresponding to a total of 795 hours of theoretical content and 2,725 hours of service training, summing a total of 3,520 hours. The training was performed in a rotation of service into the related clinics, according to the development of the ability of the assistance/management in Nursing<sup>(13)</sup>.

For the Medical Clinic Nursing Specialization Course – Residence Mode 20 candidates enrolled for the three openings. Five were classified, but only three were selected. The curricular design was made of 15 subjects, and from those, 795 hours of theoretical activities and 2,725 hours of service training<sup>(14)</sup>.

The Intensive Care Unit Nursinf Specialization Course- Residence Mode was made of 11 subjects, a total of 735 theoric-practical hours and another 2,785 hours of service training, a total of 3,520 hours. 24 candidates enrolled for the three existing openings. From these, eight candidates were classified and three were finally selected<sup>(15)</sup>.

The courses had a single statute, which chapter I clarified the objectives, chapter II was about the structure of the courses, chapter III mentioned the Academic Regime, chapter IV was about the access to the courses, chapter V mentioned the Residents, chapter VI stated the Disciplinary Regime, chapter VII dealt with the Evaluations, and in the end, chapter VIII, for the General Dispositions.

The new courses of Nursing Specialization Courses – Residence Mode initiated with professors running classes, and waiting for a solution until a step was taken to solve the lack of financial support for this activity, as it is reported by DG1:

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[...] the professors continued to contribute with the course waiting for a posterior resolution [...] And what was the solution found for this struggle? We proposed to the dean Fernando Antônio Colares Palácios that besides the pedagogical partnership with the University, it could provide us with the management of the funds, or in other words, transfering the budget to the professors at that time. (DG1).

Going against the crisis that happened at the Nursing Residence of the OLH, ABEn promoted the 8<sup>th</sup> Brazilian National Seminar of Nursing Education Directories (SENADEn), in the city of Vitória – state of Espírito Santo, during the period from the 31<sup>st</sup> of August to the 3<sup>rd</sup> of September of 2004, with the views to the Policies in Education in the field of Nursing. In this opportunity, it was discussed how to optimize human resources as consolidating element in the relation teaching/working, imposing responsibilities and new challenges for the category in the search for and in the conditioning to elevate the teaching quality, towards an improvement of theory-methodological, political and ethical aspects of the professional formation<sup>(16)</sup>.

#### **CONCLUSION**

Considering the relevance of the mentioned aspects, it is important to mention the necessity of continuity of a socio-political and sanitary policy for the Brazilian North region, which the unfavorable indicators, especially those related to Education and Health, concern us with the continuity of these policies and the capacitating and qualification in health programs, contributing to a more qualified nursing assistance as a consequence of service training.

The expansion of Nursing Residence courses allowed to the nurses an update of their professional *habitus*, and therefore, allowing them to act in more specialized scenarios, since these spaces demand specific understanding of a higher complexity.

Considering the difficulties inherent related to professional upgrading in nursing in the state of Pará,

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http://www.objnursing.uff.br/index.php/nursing/article/view/3668 the initiative of the Ophir Loyola Hospital and of the nurses involved with the challenge of the creating and expansion of the Nursing residences was notable. With it, they have contributed to elevate the quality in assistance of health institutions that had, in their professional body, nurses that came from the Nursing Residence Courses.

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