

# Meanings of themselves-care of nursing professional women in a emergency unit

*Significados do cuidado-de-si-mesmas de mulheres profissionais de enfermagem em uma unidade de pronto atendimento*

*Significados de el cuidado-de-si-mismas de mujeres profesionales de enfermería en una unidad de urgencia*

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## ABSTRACT

**Objective:** To comprehend the meaning of the female nursing professional living experience on caring for herself in the quotidian assistance in an Emergency Unit. **Methods:** Interviews with 14 nursing professional women were developed between December/2012 and February/2013. The scenery was an EU located at the State of Rio de Janeiro - Brazil. Qualitative investigation of phenomenological approach with a comprehensive analysis method of Martin Heidegger. **Results:** An analysis revealed that women's care of themselves concerns not only the health care itself, but also manifesting the intrinsic dimensions as leisure, rest and family relationships. **Conclusion:** We conclude that care actions were viewed, but not always the professional put these into practice, due of their daily occupations as wife, mother and nursing professional of an EU, just miss time to herself, so taking care of herself is in the background and it is sometimes even forgotten.

**Keywords:** Nursing; Women's Health; Women's Work.

## RESUMO

**Objetivo:** Compreender o significado da vivência da mulher profissional de enfermagem no cuidado de si mesma no cotidiano assistencial de uma Unidade de Pronto Atendimento (UPA). **Métodos:** Desenvolveu-se entrevista com 14 mulheres profissionais de Enfermagem entre dezembro/2012 a fevereiro/2013. O cenário foi uma UPA localizada no Estado do Rio de Janeiro - Brasil. Investigação qualitativa de abordagem fenomenológica, segundo o método de análise compreensiva de Martin Heidegger. **Resultados:** O cuidado de si mesma dessas mulheres diz respeito não só ao cuidado de saúde, propriamente dito, mas também se manifesta nas dimensões intrínsecas como lazer, descanso e relações familiares. **Conclusão:** As ações de cuidado foram visualizadas, mas nem sempre as profissionais conseguem colocá-las em prática, pois em decorrência das suas ocupações cotidianas sendo mulher, mãe e profissional de enfermagem de uma UPA, falta tempo para si mesma, de modo que o cuidar-se fica em segundo plano e, às vezes, é até esquecido.

**Palavras-chave:** Enfermagem; Saúde da mulher; Trabalho feminino.

## RESUMEN

**Objetivo:** Comprender el significado de la experiencia de las mujeres en el cuidado profesional de sí misma en la rutina diaria asistencial de una Unidad de Urgencia (UPA). **Métodos:** Se realizó entrevista a 14 mujeres profesionales de enfermería entre diciembre de 2012 y febrero/2013. El escenario fue una UPA del Estado de Rio de Janeiro - Brasil. Investigación cualitativa de abordaje fenomenológica por el método de análisis comprensivo de Martin Heidegger. **Resultados:** El cuidado de si mismas de las mujeres si refiere no sólo al cuidado de la salud, sino también las dimensiones intrínsecas como el ocio, el descanso y las relaciones familiares. **Conclusión:** Las acciones de cuidados fueron visualizadas, pero no siempre las profesionales ponen en práctica, ya que antes de los roles sociales que desarrollan en su día a día, no hay tiempo para su cuidado pleno, por lo que el cuidar de sí misma está en según plan y a veces, hasta olvidado.

**Palabras-clave:** Enfermería; Salud de la mujer; Trabajo femenino.

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## INTRODUCTION

The increase in female participation as skilled workforce, reduced fertility and changes in family structures and increasing the number of women responsible of household are factors that influence the presence of women in the public sphere. This insertion has occurred gradually and regularly and occurs predominantly through work and social participation. Also, as more women occupy a place in the labor market, the more the activity of caring for children and the spouse ceases to be exclusive<sup>1</sup>.

With regard to the Nursing profession, it is pointed to the process of feminization inherent in this work activity. In Brazil, given its historical and cultural contribution the woman was considered unique for that profession because of their skills and abilities<sup>2</sup>. Female work in nursing is envisioned as a female vocation in which increasingly occurs a process of professionalization that distinguishes practical nurses, nursing assistants and techniques<sup>3</sup>.

Regarding professional nursing women and bring to the field of biomedical practices of the hegemonic health care model also bring to the daily care brands building their own gender identity (individual and collective), including overcharges resulting from the double workload and emotional demands generated in the lived relations in their family and professional world<sup>4</sup>. It occurs in this context that the practice of nursing care and health, whether collective or individual and which are permeated relationships between modes of being in the world where beings who care and those who receive care are intertwined in a mutual inter-subjectivity and imperceptible<sup>5</sup>.

The nurse has the essence of the art of caring, which is a comprehensive and holistic care that is through the understanding of human life and the exchange of information and feelings that come from contact with the client at the moment who cares. So that care requires concern, knowledge, dedication to others and themselves and that the forms of care of them, the other and us when interconnected, circularity happen in strengthening relationships where the caregiver is and feels a carefully balanced of mutual exchange. Thus, caregivers before exercising the care of others should exercise care of themselves, seeking the integration of physical, mental and spiritual dimensions, only thus achieving harmony between self-care and caring for others, caring and feeling cared<sup>6</sup>.

Self-care for themselves produces effective behavior for care with others, so that previously to care for others they take care of themselves<sup>7</sup>. Accordingly the care of the human being and the professional are intertwined and are inseparable, as part of the same human being, who is single and indivisible. It emphasize also that the maintenance of human machine and themselves is just remembered when a problem is expressed, thus underlining the importance of thinking about them to prevent problems and promote health<sup>8</sup>.

The care of us take us to care of ourselves, because what it is built together and provides knowledge and tools enable the

development of autonomy in attitudes and behaviors to take care of themselves<sup>9</sup>. It is stressed the importance of uniting thinking and making in nursing care because nurses will bring more job satisfaction and visibility, contributing to a comprehensive care desired by users of health services and professionals<sup>9</sup>.

Apart from a nursing care guided by a careful process on the other - care of themselves, it is seeking to subjective understanding of care. So that nursing has developed a method of inquiry that encompasses their way of being, while science and art, for the meaning of life and its meanings deserve the careful eye of a referential aspects that are not quantified. Thus, the phenomenological approach has been chosen by the researchers for this purpose in Nursing<sup>10</sup>.

Approaching Nursing care to the phenomenological approach, it is pointed out that the act of caring donates meanings in relation to the attitudes of care, attention and other dialogue. Study indicates understanding of nursing professionals to take care of the sick human being, tend to be-the-world in authentically because the everyday is presented already decided in relation to not take initiatives; and that these professionals need to take care authentically, with therapeutic intent, zeal and help, proclaiming the perception of the human beings who care and provide conditions for freedom and being careful to experience their own possibilities<sup>11</sup>. However, care of professional themselves of Nursing should not be forgotten and when it comes to who takes care of the other, this form of care also needs to be considered and understood.

Thus, considering these professionals to be responsible also for their own health care not only in the biological dimension, but also human and social it is sought to understand the meaning of the experience of professional women in nursing care of themselves in their everyday life of a Emergency Unit. Such care setting is the researcher, nurse, military and woman's field work. Phenomenologically, we can say that the experience of being a woman-of-professional-nursing in a EU, has the possibility of giving meanings about care of themselves.

The EUs are organized by major policies such as the National Humanization Policy - HUMANIZASUS and ordinances regarding the care of an emergency nature such as MS Ordinance N<sup>o</sup> 2048 of 03 September 2009<sup>12</sup>, establishing among others, guidelines for the activities of Fixed Pre-Hospital Care (APHF), in which the EU is inserted. Users in urgency or emergency are taken to the health facility.

Thus, the uneasiness arises from the study of how self-care of women, professional nursing, relates to the care that provides a EU and what emerges from their combined experience of female labor in this scenario that has its peculiarities. Thus the present study aimed to: understand the meaning of the experience of professional women in the nursing care of herself in the daily care of a EU and this is an excerpt of the dissertation entitled: "The women experienced nurses in Emergency Unit: an understanding of self-care." So to answer the question:

"How does a woman, professional nursing staff, mean care of herself in her day-to-day care in the EU" this article has focused on the unity emerged category of meaning "care themselves of professional women in a nursing EU".

## METHOD

This research is a qualitative, phenomenological approach and with theoretical and methodological framework based on the method of Martin Heidegger<sup>13</sup>. This approach has as its starting point the experiences of women in the professional nursing care of themselves in their everyday life of an EU. The research scenario was one EU in the state of Rio de Janeiro - Brazil. The quantity of nursing professionals in this unit is 55 nursing assistants and technicians and 49 nurses. It counts up 59 professional women, 33 nurses and 26 nursing assistants and techniques. The study participants were women who are part of the nursing team in professional groups: nurses and nursing techniques. They may be from civil class - hired temporarily or military class - public servants of the Fire Brigade of the State of Rio de Janeiro. Inclusion criteria were: being professional nursing; female; be under civilian or military regime of work and be on duty.

After approval of the research project by the Ethics in Research Committee of Research Ethics Anna Nery School of Nursing/Hospital School São Francisco de Assis (Opinion N<sup>o</sup> 108 464 and CAAE. 05998512.9.0000.5238), it was developed a step field, which was fulfilled with the protection of participants in the principles of: voluntariness, informed consent, anonymity (identified by pseudonyms of flowers, as agreement of the participants), confidentiality of research information, justice, equity, reduced risk and maximization of benefits, protecting their physical, mental and social integrity of temporary and permanent damage.

The data production occurred from December 2012 to February 2013. The mode access to interviewees was the phenomenological interview. They were invited to participate in the study after or during work activities in the healthcare scenario. The meeting was mediated by empathy and intersubjectivity<sup>14</sup> from the guiding question: "How is it for you woman, a member of the nursing team to experience the day-to-day EUW" "How do you mean to take care of yourself working in the healthcare scenario?".

The number of respondents were 14 women, and it has not been determined in advance, since the field stage showed the sufficiency of meanings expressed in interviews that made it possible to respond to the objective of the research and the statements contemplated the essential structures of the phenomenon of the research<sup>15</sup>.

Their statements were recorded, with the consent, and transcribed as the original speech. During the meeting the interview silences and bodily expressions of women were observed, which were indicated in brackets in the transcription of the interviews.

The analysis proposed by Martin Heidegger consists of two methodical moments described in his book Being and Time<sup>13</sup>. In this study it is presented the first moment: Comprehensive

analysis<sup>13</sup>. First, we developed the listening and reading of the interviews, through the suspension of assumptions of the researcher in order to understand the meanings expressed by the women, without imposing predetermined categories by theoretical/practical knowledge. It was followed the year to highlight (underline) the essential structures (meanings) expressed in the interview transcripts. Later, the analytical framework was composed of empirical material with the meanings of being a professional woman in a nursing EU and their testimonials.

Thus, the meaning units (MU) were recorded, and the caput (statement) is composed of the very expressions of the testimonies of women. Each MU is presented in the results with some graphics statements, followed by the phenomenological discourse of understanding of women themselves. Finally, the MU's express the meanings of the concept of the lived care of themselves of professional women nursing in an EU.

## RESULTS

14 women were interviewed, six of them were techniques nurses and eight nurses. We opted to not separate the two professional categories, as the proposal was to understand the experiences of self-care providers working in nursing women, so as the testimonies show, this difference was not evident in the experience of care in being technical in nursing or nurse. The age of respondents ranged from 24 to 60 years old; four respondents did not have children, and five of the interviews have no partner and/or husband. Operating time in nursing ranged from two to 16 years; Only three of the respondents have only one job. It is noteworthy that the total respondents is pursuing their activities in the EU for over a year and six months.

The statement revealed that nurses mean "Do sports, healthy eating, taking medication, caring for the self-esteem and have hygiene is taking care of herself, besides gynecology (MU1)".

*[...] Taking care of myself in this scenario, I'd like a more personal issue of women [...] is not only a matter of gynecology [...] care of themselves can also return to the esthetic to the body. (Tulipa)*

*[...] This same care in the same health of women, of hygiene, hand wash in the bathroom. (Rosa)*

*[...] Using a lipstick, passing a cream, combing hair, even with basic hygiene care. (Begonia)*

*[...] Care for me is the two sides in relation to appearance, we are women isn't it? Seeking to take medicine, I'm hypertension, taking my medicine. (Camellia)*

*[...] Is trying to do a physical activity, and have it in a routine, improve the quality of my food, eat healthier. (Lily)*

Even though care has a meaning, these women point out that "We do not always have time to take care of, going to the doctor, where care is forgotten, left behind (MU2)":

*[...] You just do not have time to take care of herself! (Orchid)*

*[...] I then take years to go to the doctor, only when I just feel something. (Sunflower)*

*[...] Is that I forget a bit of me! (Macela)*

*[...] So, we try! Sometimes doing things, but is not always enough time, sometimes we leave much behind, careful with ourselves! (Wildflower)*

*[...] It's so long! We want to take care of, but we always try to care a little bit of health. (Dahlia)*

With chores being a woman, working, caring sometimes questioning "Take care of the very close and who will take care of working women? (MU3)":

*[...] Sometimes you start trying to devote more time to patient care and ends up leaving our side a little. (Orchid)*

*[...] We end absorbing many times the problems are not ours! For reasons even from the staff and the patients themselves. (Tulipa)*

*[...] I have to care for others! But unfortunately, depending on the moment, depending on the severity, we end up forgetting some of us. (Begonia)*

*[...] Sometimes we want to take care over who's next to us than for us! And sometimes we get the same back. (Wildflower)*

*[...] I take care of others more than me! It is not good taking care of everyone and do not take care of me! Shortly and I, who will care for me? (Azalea)*

*[...] You take care of others, but you, you forget a little, you end up caring too much from others and forget you a little! Is what I perceive in generates. It ends up absorbing a lot of problems, teams own patients! (Hortencia)*

It is perceived the culture that women were "the weaker sex" because the sensitivity was always seen that way by the male population, but this name makes no difference. MU4 describes the "woman is sensitive, emotional and vain".

*[...] I, like a woman I am very sensitive to patients especially children I deal a lot with the kids. Because I associate and I soon find myself in that situation of mother! So that I as a woman, I have this sensitivity (Rose)*

*[...] Sometimes we can observe certain details that sometimes go unnoticed by the eyes of men! (Macela)*

*[...] In terms of being a woman and stuff, I think the woman actually has the same characteristic of being a woman,*

*we are more sensitive to external! The woman is already a more sensitive, emotionally usually involves more than the male. (Lily)*

*[...] That issue of being a woman, who ends up opening up more to the emotions of each other, sometimes it is not only the professionalism, actually it involves emotional issues. (Dahlia)*

*[...] We try to compensate by using a lipstick, a cream, combing hair. (Begonia)*

*[...] You use a lipstick, a little something to be better! (Wildflower)*

*[...] I would like to be slimmer, beautiful! I wish I were a beautiful brunette woman but I am not! (Camellia)*

The different social roles of women are also disclosed and relevant experience in the professional factors. "The woman is overloaded, she does what she can because she is everything: wife, nurse, mother, daughter (MU5)":

*[...] We arranges time, but have to share with children, husband, home, so then we end up leaving us a little apart! (Orchid)*

*[...] It's hard for women to leave appointments from home, in relation to our children. (Daisy)*

*[...] We are already overloaded! We have a life here but we still got another out there! I'll get home I have to look after my daughter, my husband, I have to take care of my house! (Rosa)*

*[...] We finish accumulating, you are a daughter, you are a woman, you are a nurse. (Macela)*

*[...] I have children then I come home and there's no time to do things. (Wildflower)*

*[...] We, women, have all the responsibility of a house, and when wea are married then, when we have children is that rush to organized our home. (Azalea)*

## **DISCUSSION**

### **A vague and median understanding of Nursing professional women Care-of-themselves in EU**

A vague and median understanding is to be a fact, because when we ask what is "being", we keep us in understanding of "to be", without being able to fixate concepts of what this "to be" means. We do not know the horizon in apprehend and establish its meaning, even if that sense of being is somehow at our disposal. This understanding can be imbued with traditional theories and opinions about being who constitute the dominant sources of understanding. What we are looking at is not something entirely unknown, even to a first approximation be elusive<sup>13</sup>.

Self-care is revealed in some facets in everyday professional nursing woman. Women's health is not addressed only in relation to reproductive health issues, but issues that go beyond the biological. The experience of having a healthy food, exercising, taking medications routinely characterize the care themselves.

The time the woman turns out to be insufficient to care for them, no matter what she will have in health care, chores, day-to-day does not allow them to do a medical monitoring routine and then when they get sick, they go to the assistance. Trying caring of themselves as they may like, sometimes the professionals forget themselves.

The role of the caregiver explained by them, be careful with that family, friends, close people, patients themselves and even teammates can leave the nursing care of themselves in a kind of "anonymity". They are always taking care of others and in the end, are not cared for others and not for themselves.

The woman is seen with a typical sensitivity of femininity, placed opposite to men, who sometimes do not have the same perception of the woman. Affective issues are more observed also an attitude of empathy opposite some situations, an example is when these women are mothers and care in a context that refer to their personal routine. Vanity and self-esteem play a fundamental role, the makeup has a prominent role in the day-to-day life of them and they are always looking to improve the appearance.

Professional, daughter, wife, mother, a woman can interfere with care of them. References of unique tasks, culturally that women - as to take care of the kids, the house, the family - are explained as overload situations. Women are always bent over backwards to let these "commitments" organized.

In this direction, it has been the concept of the lived professional nursing in Emergency Unit in caring for themselves wives: They report that they do sports, eat healthily, take medicines, take care of self-esteem and being hygienic is caring themselves, in addition to gynecology, they refer not always having time to take care of, going to the doctor, where care is forgotten, left behind, and end up questioning, taking good care of others and who will care for me? They understand and see themselves as a woman that is sensitive, emotional and vain, and show overloaded, do what gives time as it is everything: women, nurse, mother, daughter.

It was understood that women are shown as a being of multiple possibilities, assuming the role and responsibility of nursing caregivers and caregivers of home, family, of themselves. Self-care is understood by them through actions considered as a good healthy diet, physical exercise, drug therapy when treating a pathology and routine health monitoring.

Care actions were viewed, but not always the professional put these recommendations into practice, since before the roles they develop in their day-to-day, just missing for full time care so that care is in the back and is sometimes even forgotten.

It turned out that taking care of family, children, users of the health service and own teammates can also ensure health care these women themselves, for the care of the other, sometimes it is not cared for by anyone or by themselves.

Given the difficulty in taking care of themselves, this professional is committed to maintaining showed vanity and self-esteem, because value physical beauty, wanting to look better in daily life, using makeup, cosmetics, hair care, among others. By highlighting their femininity, women proved more sensitive to take empathic attitudes when caring both service users as their health team.

The study provided insights into the similarities and Nursing Care as it extrapolates the relationship with being cared and causes a look to the "being" that needs care, but the patient is to prioritize and fulfill the obligations of maternal care sometimes nullifies his own care. Thus it reveals the importance of rethinking the professional practice of nursing and to see themselves as a being of possibilities to care for another, but also take care of themselves, jointly, rather than a neglecting the other.

## CONCLUSION

The study afforded understand the women lived in the care of themselves and revealed meanings donated by nursing professionals who care in an EU. It was possible to unveil the care of women themselves relates not only to health care itself, but also the intrinsic dimensions as leisure, rest and family relationships. Furthermore, allowed capture their meanings how they feel and experience being female caregiver, since women outnumber this work space of EU and beyond caregivers at work, are still present in the care of social tasks, in a cultural way.

The research provides grants to nursing education regarding the feminization of the profession concerning the ways by which the academy has the ability to know the reality of professionals in nursing care and care of themselves in the dimension of being a woman.

It contributes to health researchers launch a attentional to these female protagonists health care with a focus on existential dimension and require a careful look. So from the perspective of phenomenology, it is for health professionals to understand their own experiences, feelings and needs without presuppositions and prejudices. There is progress paths to the health care of those women who exceed the technical and biological knowledge; and contemplating the existential dimension as the ability to share experiences and experiences of others in a relationship of empathy and procedural care.

This research provides important information of the experience of these nurses in daily care bodies that organize the services of this profession, as COFEN (Federal Board of Nursing) and COREN's (Regional Boards of Nursing), and contribute to the review and monitoring of facing health care and women's health policies.

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