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INTEGRATIVE REVIEW ARTICLE

WHAT IS REALLY IMPORTANT TO THINK ABOUT EVERYDAY LIFE IN NURSING?: AN INTEGRATIVE REVIEW

O QUE É REALMENTE IMPORTANTE PENSAR SOBRE O COTIDIANO DA ENFERMAGEM?: REVISÃO INTEGRATIVA

¿QUÉ ES REALMENTE IMPORTANTE PARA PENSAR LA VIDA COTIDIANA EN ENFERMERÍA?: UNA REVISIÓN INTEGRADORA

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ABSTRACT

Objective: to analyze everyday nursing approaches found in Brazilian scientific literature. **Method:** integrative review based on the question << *How are everyday life studied in nursing-related productions?* >>, national publications indexed in the databases of LILACS, BDNF and MEDLINE, in the period from 2000 to 2011, using the descriptors “nursing”, “daily activities” and “daily nursing activities”. 501 articles were located, refined according to eligibility criteria and quality, leaving 20 articles. **Results:** different aspects and situations were identified that make up the so-called “Everyday Life in nursing activities” this being repeatedly understood as related to what is normal and expected of little reflected activities in the various expertise of these professionals. **Conclusion:** field investigations are considered necessary about this Everyday Life as a possibility for understanding of the strategies and tactics used by nurses in order to “empower” and politicize the category. **Descriptors:** Nursing; Everyday Life; Nursing Research.

RESUMO

Objetivo: analisar abordagens do cotidiano da enfermagem encontradas na literatura científica brasileira. **Método:** revisão integrativa a partir questão << *Como o cotidiano é estudado nas produções relacionadas à enfermagem?* >>, de publicações nacionais indexadas nas bases de dados LILACS, BDNF e MEDLINE, no período de 2000 a 2011, utilizando os descritores “enfermagem”, “cotidiano” e “cotidiano da enfermagem”. Foram localizados 501 artigos, refinados segundo critérios de elegibilidade e qualidade, restando 20 artigos. **Resultados:** identificaram-se diferentes aspectos e situações que compõem o chamado “Cotidiano da enfermagem” sendo esse repetidas vezes compreendido como relacionado ao que é habitual e esperado de atividades pouco refletidas nos diversos lócus de atuação desses profissionais. **Conclusão:** consideram-se necessárias investigações de campo sobre esse Cotidiano como possibilidade de entendimento das estratégias e táticas utilizadas pela enfermagem, no sentido de “empoderar” e politizar a categoria. **Descritores:** Enfermagem; Cotidiano; Pesquisa em Enfermagem.

RESUMEN

Objetivo: analizar enfoques de la práctica de enfermería encentradas en la literatura brasileña. **Método:** revisión integradora del cuestión << *¿Como la cotidiana es estudiada en producciones relacionadas con la enfermería?* >>, publicaciones nacionales indexadas en LILACS, MEDLINE y BDNF en el periodo 2000-2011, utilizando las palabras clave “Enfermería”, “cotidiana” y “cotidiana de enfermería”. 501 artículos, refinaron los criterios de elegibilidad y la calidad se localizaron, dejando 20 artículos. **Resultados:** se identificaron diferentes aspectos y situaciones que componen la llamada “cotidiana de enfermería” entendido éste en repetidas ocasiones como relacionado con lo que es habitual y esperado poca reflejada en la locus de diversas actividades de estos profesionales. **Conclusión:** consideradas las investigaciones de campo necesarias sobre esto como una posibilidad para la comprensión cotidiana de las estrategias y tácticas utilizadas por las enfermeras con el fin de “potenciar” y politizar la categoría. **Descriptores:** Enfermería; Cotidiana; Investigación en Enfermería.

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INTRODUCTION

The theme of Daily Activities is overlooked as scientific theme in the healthcare area, although it is admittedly worked for the social sciences, while in the health sciences that still permeates the idea that is connected to common sense, and for this, it is not part of the scientific field. One realizes that, as Chico Buarque sings in his song “Cotidiano” (“Everyday Life”) (1971): “Every day she does everything always the same way: She shakes me at six o'clock in the morning. I break a smile at that time. And kisses me with her minty mouth”—there is a cadency of repeated actions and little reflected, connected to the day-to-day actions are not perceived by most people as well as by a representative proportion of researchers in the healthcare area.

The interest for this analysis of the studies of everyday life in the area of health, more precisely in nursing, is due to the recognition that this topic needs to be reflected by health professionals. Furthermore, by observing that still works with the process of health work as an activity in which the person operates a transformation through an instrumental determined, subject to a certain end, into an object,¹ arguably organized a positivist and functionalist perspective. However, the health working process has specificities, since this is not about things or objects, as it happens in the industry; it is, instead, about and for people, moreover, on the basis of a shared intercession between the producer and consumer, in which both contribute to the worker process.

In this process, is the process of nursing work as essential to human life work, which is part of the services sector is inserted, being human production sphere work, it completes in the act of their realization, not obtaining a product material result. In contrast, the product obtained is inseparable from the process that produces, being its own realization of the activity.¹ These worker processes can be organized as follows: the work object (such as the production of care), the means and instruments (hard technologies, soft-hard and soft); and finally the activity (actions of each healthcare professional, including nursing).¹ However, this systematization is invisible and has the ability for differentiation only literally, since the healthcare work requires flexibility and fluidity as well as the articulation of several agents to answer the various demands of healthcare services.

The work discusses nursing in sub-processes, such as: caring or monitoring, administering or managing, researching and teaching.² However, in the early days of the profession, the art of nursing care, was performed without technical and scientific definitions, needing to adjust to new situations, such as changes in epidemiological, socio-demographic profiles and the morbidity and mortality, in order to respond to the new public health demands. This scenario changes from the 1960's, due to the establishment of new guidelines for teaching and the beginning of the higher education in nursing which, in addition to training professional for assistance also enabled their performance in other areas beyond direct user assistance.²

The diversification of nursing areas, as well as their workplaces following both private criteria of professional and directions for the whole team, according to the Professional Practice Law No. 7.498/86, which provides that the nursing staff is composed five occupational categories: nurse, practical nurse, nursing assistant, midwives and attendants.³

The position of attendant was extinguished, and from the aforementioned legislation, training for nursing assistants is not recommended, both being encouraged to become nursing technicians. The already graduated assistants, unlike the attendants, still exert activities in health services, which are not directly related to user assistance. In nursing, there are professionals with different levels of training, but who work in order to assist the user by means of complementary activities and matches with medical prescriptions. However, nursing work has suffered important changes in its scenarios, actions and legislation that regulate, even with low adherence that these professionals present to professional associations (such as associations and trade unions).⁴

There is a distancing of professionals and even an “alienation” on the role they play individually or as a team. It is recurring movements claiming minimum wage, better working conditions, recognition of the category, but are silenced by little expressiveness or repercussions of their actions and little political engagement of the professionals. In addition to the historical and social phenomenon of low recognition of certain professional categories by society, described by the sociology of professions and influence in how nurses perceive themselves (self-awareness) and how believe to be perceived by others (hetero-perception).^{5,6}



The reforms do not take place in the air, regardless of those who do and do not always mean transformation. The transformation depends on the critical hunting consisting of thinking that shows that things are not as evident as it is believed, i.e., make the difficult easy gestures to thereby rehearsing a change. Criticism is indispensable for all processing, since a transformation that remains in the same mode of thought would be just a way to better adjust the same thought to the reality of things. And that would only be a superficial transformation, whose modes of action have not been modified and whatever reform bill, it is known to be phagocytosed, digested by “structured” modes of behavior from the institutions.⁷

The search for understanding of these movements silenced can be supported in the theorization of Michel Certeau. First, in his concept of Everyday life which claims to be “what is given to us each day (or that our place on sharing), presses us day after day and oppresses us.”⁸Based on this concept, is the possibility of trying “to extract from your noise the ways to do”⁹, namely get to know through this daily life, which are nursing practices. Another point is the alert that Certeau gives us the end of one of the chapters of “the practice of everyday life”, that “it’s always good to remember not to take people for idiots”.⁹ In the same line of thought, Foucault answering the interview by Didier Eribon after French elections with Mitterrand’s victory says: “you have to consider that people are mature enough to decide on their own at the time of the vote and to rejoice after if need be”.⁷ Such statements lead us to think about the autonomy that the subject has on their daily lives and their practices and thus makes possible the following questions: will nursing be as passive as we learn to recognize the training courses? Is the nursing staff really this legion of heavenly angels in white, submissive and oppressed, as it is portrayed in common sense?

Everyday life, then, is the first place of alienation and mystification, where all efforts should be concentrated for the demystification of human consciousness, the abolition of alienation and the promotion of an effective release of oppressive structures.¹⁰ This daily life qualifies it, therefore as elemental dimension of life in fragmented society, which is promoted by the advancement of the production forces. This fragmentation, in turn, is introducing the separation between individual’s life dramatized the “prose” and “poetry” in the

world, between the everyday and the party, opposition between work and leisure as the Foundation of society.¹⁰

This is everyday life, so that there is possibility of knowledge on resistance movements of hegemonic forces of reproduction and social control.⁹ It is through the daily practices that individual reclaim produced systems and produces anti-discipline networks, the individual creates the means to get rid of the consumer models imposed by the dominant order, inventing everyday life.¹¹ Thus, everyday life configures itself as an important category for analyzing life in society, because it represents the interfaces of ordinary life, aspects of a place shared by different individuals, groups and institutions that maintain permanent relations of cooperation among themselves and conflicts.

OBJECTIVE

- To analyze everyday nursing approaches found in Brazilian scientific literature.

METHOD

Study of integrative review that is justified by the growing and complex load of information in the healthcare area, making it essential to develop methods able to provide those interested in this theme better use of evidence pointed to several studies in the area. In this sense, the integrative review configures itself as an Evidence-Based Practice instrument and of great relevance in the healthcare field due to its potential to allow for the synthesis of the research available on the given theme and targeting the practices and behaviors based on scientific knowledge.¹²

For carrying out the review, the following steps were taken: 1) definition of the research question, 2) drafting criteria for choice of articles, 3) selection of articles, 4) evaluation of the eligible studies, according to the chosen criteria, 5) interpretation of results 6) presentation of the review and synthesis of knowledge.

To guide the integrative review, formulated the question << How is everyday life studied in nursing-related productions? >> Publications selection was performed through electronic search of national and international publications indexed in the databases: Latin American Literature on Health Sciences (LILACS) Nursing Database (BDENF) and Medical Literature Analysis and Retrieval System Online (MEDLINE).

The first selection of articles was made by reading the title followed by the analysis of



the abstracts, considering the criteria for inclusion: full papers indexed and available in these databases, in Portuguese, English and Spanish, and publication period from 2000 to 2011. Exclusion criteria have been, dissertations, theses, editorial and scientific publications that are not in accordance with the issue under study. After the elaboration of selection criteria, the following descriptors were defined for the search: “nursing”, “everyday life” and “everyday life in nursing”. For the search, in addition to the single use of the keywords, using also the association between them, namely, [“nursing” and “everyday life”], [“nursing” and “everyday life in nursing”], [“everyday life” and “everyday life in nursing”].

It is worth mentioning that “everyday life” and, consequently, the term “everyday life in nursing” are not standardized in Health Sciences Descriptors (DeCS), probably because it is directed to the research area descriptors of the social sciences. However, due to the relevance of the above descriptors for the

study and, because it is a relatively new approach for the health sciences, it was opted to keep them as a way to reaffirm recognition of this theme and the need to instigate health professionals for a critical reflection on the daily life of work and not just as something usual and common sense.

From the criteria defined, were located five hundred and one (501) publications whose abstracts were read and, of these, fifty-four (54) articles have been pre-selected for presenting any relation with the object of study. For the analysis of articles has been developed an instrument that allowed group information such as identifying the article and its authors, the study objectives, method employed, results and main conclusions. And, after the evaluation of the pre-selected articles, twenty (20) publications were according to the objective proposed in this study and were elected to compose the final sample, according to the eligibility criteria and quality in Figure 1.



No .	Article	Authors	Journal/Year	Objective of the study	Outline/Level of Evidence
1	Nursing actions in the everyday life of nursing scenario of a psychiatric institution	Souza MCBM	Revista Latino-amer Enfermagem/2003	Observe and describe the actions of nursing that nurses develop into a psychiatric institution.	Descriptive study, qualitative approach/4
2	Understanding of gender and its manifestations in the daily life of a healthcare service	Cortes LF,Vieira LB, Landerdahl MC, Padoin SMM	Revista da Rede de Enfermagem do Nordeste/ 2010	Analyze how the nursing staff comprises the gender theme in everyday healthcare.	Qualitative study/4
3	Considerations about the nurse's identity construction process in their daily work life	Netto LFSA, Ramos FRS	Revista Latino-amer Enfermagem/2004	Understanding the nurse's identity construction process in their daily work life	Qualitative study/4
4	The nurse facing the client's Religiosity	Cortez EA, Teixeira ER	Revista Enferm. UERJ/2010	Identify the presence of religiosity in the lives of nurses and describe how the nurses deal with the client's religiosity in their daily life and nursing practice.	Descriptive qualitative study/4
5	Occurrences of nursing ethics – everyday life of nurse managers and nursing ethics committee members	Freitas GF, Taka Oguisso T, Merighi MAB	Revista Latino-amer Enfermagem/2006	Understand the significance of the actions of nurses facing ethical cases involving nursing professionals.	Phenomenon-logic qualitative study/4
6	Practice of care developed for primary care nurses in primary Health Care - a hermetical dialectical approach	Ferreira VA, Acioli S	Revista Enferm. UERJ/2010	Understanding the practice of care developed by nurses in three Municipal Health Centers in the city of Rio de Janeiro.	Qualitative study, hermetical-dialectic method/4
7	Being a nursing professor, wife and mother – unveiling the experience under the light of the social phenomenology	Merighi MAB et al	Revista Latino-amer Enfermagem/2011	Understand what it's like to be a nursing professor, wife and mother, to reconcile professional life, motherhood and household activities.	Phenomenon-logic qualitative study/4
8	Institutional violence: experiences in the everyday life of the nursery team	Santos AMR et al	Revista Bras Enferm/2011	Describe the experience of nursing professionals exposed to institutional violence and discuss how these experiences influence in daily life and the Organization of the service.	Descriptive qualitative study/4
9	The (re) acting of nursing facing cardiopulmonary arrest: a challenge in everyday life.	Graça TD, Valadares GV	Revista Esc. Anna Nery/ 2008	To know the experience of nursing staff in client care in the cardiopulmonary arrest process.	Qualitative study/4
10	Socioeconomic vulnerabilities and the	Pedroso MLR,	Revista Esc. Anna	Understanding nurses	Descriptive



	daily life of pediatric nursing care: a case report of pediatric nurses.	Motta MGC	Nery/2010	perceptions about the influences of socio-economic vulnerabilities in childcare and their family, in the environment of Pediatric Inpatient Units.	exploratory study, qualitative approach/4
11	Adolescence and sexuality in the everyday life of the basic health service nursing staff.	Tomitta TY, Ferrari RAP	Revista Semina biol. Saúde/2007	Identify the nursing staff perception of Primary Health Care Service, on issues relating to sexuality and adolescence.	Descriptive study, quantitative approach/4
12	The daily life of nurses in clinical research: a case study	Aguiar DF, Camacho KG	Revista Esc Enferm USP/ 2010	Describe and characterize possible activities for the clinical research nurse and promote the knowledge of students, teachers and even nursing professionals about this group of workers.	Descriptive qualitative study/4
13	Language as a nursing care tool in cardiac surgery	Cavalcanti ACD, Coelho MJ	Revista Esc Anna Nery/2007	Describe the language used in everyday life by nurses in a cardiac intensive care unit.	Descriptive qualitative study/4
14	Ways of caring in nursing	Coelho MJ	Revista Enferm/2006	Introduce a mapping with definitions and classification of a thousand and one ways to care their structure, developed in the day-to-day with the proposed visibility and theoretical creation.	Qualitative study, by thematic analysis/4
15	Products of nursing care	Coelho MJ	Revista Enferm/2009	Thinking about production of knowledge and expertise about the act of nursing care, the technologies, the health-disease process and its determinants and care as a product.	Qualitative study/4
16	Science-action: philosophical foundations and relevance in nursing	Enders BC, Ferreira PBP, Monteiro AI	Revista Texto e Contexto Enferm/2010	To analytically present, the philosophical bases of the Science-Action in its relation with the construction of knowledge in nursing.	Qualitative study/4
17	Knowledge and truths about nursing: discourse of new students	Ojeda BS, et al	Revista Enferm/2008	Analyze real systems that permeate the Nursing profession, expressed by students entering	Qualitative study/4



					the undergraduate program.	
18	Reflections about death: a challenge for nursing	Oliveira SG, Quintana AM, Bertolino KCO.	Revista Bras Enferm/2010		Conducting a reflection on the challenging issues of death and dying faced by nurses and other health professionals in their practices.	Qualitative study/4
19	Women and work: the life story of nursing worker mothers	Spindola T, Santos RS	Revista Latino-amer Enfermagem/2003		Describe the daily life of the woman-mother-nursing worker; identify the interference of the profession in their life.	Qualitative study, life story/4
20	Is it possible to produce nursing occupational health?	Azambuja EP, Pires DEP, Vaz MRC, Marziale MH	Revista Texto e Contexto/ 2010		Understand that actions taken by workers maximize their health or wear.	Qualitative study/4

Figure 1. Summary of the studies included in the review of integrative literature.

During the review process of the papers used the descriptive method, based on the selection, recording and analysis of observed phenomena without, however, entering into the merit of their content and in order to gather knowledge produced about the topic explored, enabling the reader to evaluate the applicability of the developed integrative review.

RESULTS

Regarding the type of outline, the 20 elected posts, there was a predominance of qualitative research approach in nineteen (95%) studies and one (5%) descriptive study of quantitative approach. Regarding the type of study, it has sixteen (80%) research articles, three (15%) articles of reflection and one (5%) case study.

It was found in relation to magazines that were published five (25%) studies in the Revista Latino-Americana de Enfermagem, five (25%) in the Revista Brasileira de Enfermagem, three (15%) in the Revista de Enfermagem Anna Nery, two (10%) in the Revista Texto e Contexto Enfermagem, two (10%) in the Revista de Enfermagem da UERJ, one (5%) in the Revista da Escola de Enfermagem USP and one (5%) in the Revista Semina: Biological and health sciences. As for the year of publication of the studies has been selected: two (10%) of studies published in 2003, one (5) published in 2004, two (10%) in 2006, two (10%) in 2007, two (10%) in 2008, one (5%) in 2009, eight (40%) in 2010 and two (10%) in 2011.

For evaluation of evidence of the elected studies, the classification of six levels of

evidence were used, namely: Level 1: meta-analysis of controlled studies; Level 2: experimental study; Level 3: quasi-experimental study; Level 4: experimental study of non-experimental descriptive correlational and qualitative research or case studies; Level 5: report of cases or data obtained in a systematic manner; Level 6: opinion of expert committees clinics authorities.¹³ And in this review, 20 (100%) of studies selected obtained evidence Level 4 – descriptive, qualitative or correlational research case studies. It's relatively low level of evidence and that is justified by the theme “everyday” use predominantly focused in the qualitative approaches to understand phenomena in context.

♦ What do you think about the daily life of nursing?

The literature has found it possible to identify a range of issues and situations that make up the so-called “Daily life of nursing.” This everyday life presents itself connected to the usual, expected little activity reflected and arranged for nursing care in the various locus of expertise of professionals, as well as in the research fields in nursing. It should be noted that care and research are inseparable acts of ways to Nursing Care with denominations, forms, styles and definitions of Care found in the literature.¹⁴

It is noteworthy that all the authors of the chosen articles are nurses, but their publications are described at a distance, as if the “place” where these “nurses” would speak and not another nursing itself, so it was not possible display a sense of belonging in the authors. It is noticeable fierce criticism to



the actions of the nurse and nursing staff, as well as a breakdown of what is considered wrong, but few use the benefit of suggestion more specific and resolving questions or constructivist actions. It may be possible to say that a lot of research in nursing tend to deny the area as a science, because we don't know the essence of nursing and how we were constituted as nurses, but still try to impose an actual reality and everyday life, disrespecting our historicity.

Only three articles that analysis had elected “daily life” with in-depth knowledge and used the concepts elaborated by Certeau. Two of them conceptualize the everyday life and describe “as built by diversified ways of caring in nursing in everyday life (...), whereas the smallest details of the interactional aspects, consisting of a thousand ways to do”^{15,16}, in addition to questioning, silent practices that take place in this space. And the other uses the arts to make constructions by Certeau to weave the ways to handle constructed from the “very special care and away from the biologist division and predominant mechanistics”.¹⁴

One of these articles¹⁶ draws attention to the “products” of nursing care, much of it produced “the silence of everyday life”, but rarely reported as something that could be considered legitimate and creation of nursing, nurses' or one of its members. Admittedly, the improvisations and the recreations that can be found in the health institutions are presented as of unknown authorship and propagated by all institutions in a continuous testing via word-of-mouth outreach, oral form.¹⁶ But in reality are creations of nursing, who uses their “creativity” to circumvent the lack of any apparatus for care, using what is offered to them. It is considered, therefore, that the nursing care products are invisible. In this sense, the author suggests the need to create products that the client can use when they are in their moment of individuality and thus making nursing visible even when it believes to be invisible.

One study highlights the importance of philosophical foundations in nursing research, however, is dedicated to defend the science-action as an innovative inquiry method and that the focus could be a tool to assist in reflection on the actions of the nurse and in practice as a source of knowledge.¹⁷ However, at the same time that one realizes the predilection for Science-Action by being in a philosophical perspective of understanding, contrary to traditional science that purports to explanation of reality, emphasizes the use of the possibility of maintaining reliability

science characteristics, where it focuses on valid data, inferences and explicit public theory testing.

It goes back to a delicate matter visualized in almost all studies, it is often difficult to state nursing research, predominantly qualitative, as a true science, since both the means of publication as the funding, charge a scientific rigor that does not apply *ipis literis* to nursing study problems that are much more complex and diverse than those of biomedical character, facing a positivist and dual science, right or wrong.

In this sense, qualitative research can contribute to increase, the deepening and critical understanding of important research topics related to administration, organizations and society. Continuing on this topic, we highlight that the qualitative work provides better explanation of the voice of the researcher as a subject, for those studies – different from the quantitative ones, in the name of objectivity, removing the researcher from the text – there is a great interaction between the text and researcher, in addition to the mixture of the researcher with their work and the use of first person singular are categories always visible and important in the understanding of all of the research.¹⁸ In this discussion, Douglas¹⁹ in his study on “the irreducible complexity of objectivity”, points out that the terms “objectivity” and “objective” are among the most widely used terms, still poorly defined in the philosophy of science and epistemology because of their common use for their rhetoric strength “I endorse this and you should too” – i.e., confidence in the result of the process of knowledge production through objectivity. This possibility of “knowledge translation” and reproduction-generalization of search results that reinforce the idea of legitimacy of quantitative research can be understood as the possibility of wanting to reduce the complexity of “everyday life” in its social structures.

In the range of fields, the practice of nursing has specific nuances, depending on the complexity and the profiles of patients as well as the relations between thought and established professionals with whom it relates. In addition, it is possible to identify routines and variations between what is expected of these professionals and what really is possible that they perform before the limitations encountered in day-to-day work in the healthcare field. These limitations are presented, among others, the difficulty of solving the issues that require multidisciplinary activities and those related



to hierarchical instances to which it is subjected to the nursing profession and its decision-making processes. These limitations, which are not restricted only to the level of care, but also in the world of clinical research nurses usually have subordinate functions, little recognition and detached decision-making process, as portrayed one of the articles: “we exercise monitoring functions, contributor or Coordinator (...) so far, in fact, the national principal investigator can only be performed by a doctor or dentist “.²⁰

In the studies reports of daily nursing work present in primary health care were mapped²¹⁻²³, bypassing for acting in the field of Psychiatry^{24,25}; in ethics committees²⁶, teaching²⁷, emergency²⁸ and in hospitals^{25,29}, plus some aimed towards research in nursing. This reveals that the map, ie the theoretical described learned in undergraduate nurses is just a guideline for their professional practice, however, each professional defines the course² to be taken in their daily life of work depending on the hierarchical position that occupies, of the beliefs and values constructed over time. Thus, “the nurse is a being that is built in time, in space and in relations of everyday life”.³⁰

In primary health care (PHC) and Psychiatry field, low-density technology requires nursing professionals' use of relational light technologies^{21, 22}, which complicates the operation. The complexity of PHC is the glimpse of a changing patient behavior through the actions of health education and accountability user about themselves (self-care) and psychiatry complexity lies in overcoming prejudices and build with the individual to process a return to social life.

In general, nursing practice ranged from health care activities, action research and managerial nature, understood as bureaucratic actions that prevailed in the studies. Work organization and management in healthcare have strong influence of Taylor and Ford models, classical administration and bureaucratic model.³¹ These principles are present in the Organization of nursing work by the rigid hierarchy, Division of labor and “how to” highlight, with the manuals of procedures, routines, rules, daily tasks and scales care fragmentation.³²

These characteristics are still strongly reaffirmed by the presence of quality certification organizations that have standards and management models, with targets to be achieved by the healthcare services so that they can be certified as quality care producers. Thus allowing the standardization of physical, financial and human resources for

a possible comparison between health services, aiming accession “consumer” those with higher quality.

The divergence between the care and management dimension found in the literature can compromise the quality of service and cause conflict in nursing work, be professional with your own practice, whether in its relationship with the nursing staff and other members of the multidisciplinary team.³³ In this sense, it is observed that the working world is being impacted by the restructuring process and the flexible accumulation of capital and implementation of so-called “comprehensive care” process, recognizing the need for change in the management and organization of work in nursing, requiring new kinds of workers.^{31,34} If the productive organization of Taylor-the Ford model encouraged specialization, fragmentation, utilitarian rationalization, standardization and control in ways of doing now new forms of productive organization are demanding knowledge and practices more likely for integration, flexibility and development diversified and transversal skills.³⁴

However, the achievement of managerial activities and care in a study involving nurses represented, for many of them, a situation generating conflict and uncertainty regarding their roles, considering that, in many cases, assume a wide range of activities, whose reconciliation and prioritization become practically unviable.³⁵ In the lack of definition of roles and responsibilities of the nurse, highlights the historical presence in nursing, the spread of negative feelings, such as lack of pride and low self-esteem, which are due in large part to the lack of an identity.³⁵ These aspects may be related to gender issues, i.e. be a predominantly female profession is “subordinated”³⁶ a profession, until then, predominantly male: medicine.

Gender-related topics and work of nursing were also found in another study that analyzed the real schemes that pertain to the Nursing profession for students entering in the undergraduate program, based upon a Foucauldian referential. Found as a result: the crossing of gender in the practice of nursing - in which women were more concerned with the issue of position, positions and history and men expressed greater concern about the image of the male figure in the context of nursing and what was their role in an eminently feminine universe; Nursing as hierarchical know, who resumed the discussion of hierarchical relationships between medicine and nursing, in addition to the managerial characteristics of the nurse,



the detriment to the ideals of a nurse and caregiver assistance, as advocated in their academic training and lastly, how do power in the academic and professional tasks of Nursing - being crowned the regime of truth that professional means having good technical field, be good performer techniques, and appoints and imposes the nurse the need to practice, pushed into the background, knowledge, indispensable attribute to other professions, such as medicine.³⁷ This study, although from the others, seeking to highlight the truths of discursive subjects, ends up reducing the result to a comparative analysis and nursing dichotomous within medicine.

Power and the leadership are themes that influence the gender issues and are present in one of the studies dealing with the perception of nursing on causes of wasting of care materials. Although there are standards and guidelines, i.e. institutional strategies, nursing professionals, by position front of the use of material resources, subvert and use tactics to modify his/her daily life. Tactics understood as “calculation that cannot rely on their own or, therefore, with a border distinguishing the other as a visible totality”.⁹ It lies on the other, piecemeal, without grasping it completely, or retaining it at a distance. Thus, what they earn does not maintain them: plays with the events and turns them into occasions.

Considering the prevalence of the female gender in nursing, power and leadership theme, stand out as directly linked to the so-called “managerial profile” of pop literature-management, for training manuals and competency of nursing leadership styles. One senses little presence of criticism on the works that attempt to list these elements in the management activity of the nurse, however, there is a tendency to associate this activity with the construction of the identity of nursing as well as the improvement of its image, considering management practices elements determinants of visibility and professional status and evolution in nursing.³⁵

In relation to reflections on the power relations in nursing practice, these appear for limited priori to specific work situations, e.g., nurse-physician relations, nurse-patient, and nurse-staff. However, one of the studies that is based on an issue of post-structuralism authors, argues that this discussion involves quite complex and issues pertain to professional practices and subjectivity of the subject involved in them.³⁸

Understanding the inherent stresses of nursing practice involves the search for answers to questions that may clarify how

they are organized in a particular context. For this, we must consider that knowledge is inseparable from practice, and is the element that constitutes - rules them and their doings and speeches.³⁸

In the daily practice of nursing, the relationship power/knowledge in real production is subjected in order to be able to wield the power, thus, the quest for enhancement of nursing practices, requires greater investment in search of knowledge they subsidize the provision of qualified care to the patient.³⁸ But, above all, they have to be willing to discuss the meaning of qualified care, as well as the consequences of positions and postures assumed in professional practice.

As well as the practice, another important element highlighted by the study of everyday life of nursing is the speech, recognized as reports on those articles, “effect, therefore, a job that, incessantly, turns places into spaces or spaces in places [...]”.⁹ This report, then, is the meaning of an image in a continuous movement that is life itself (...) in their daily lives.⁹

In the reports of workers present in nursing studies, we observed the presence of structural, organizational and managerial factors as causes of poor working conditions, relational difficulties, lack of professional recognition and waste, in addition to reporting some tactics to subvert these situations as absenteeism, improvisations, rearrangement of work schedules and resilience, among others. These tactics can solve immediate problems, but are also a form of alienation in relation to collective bargaining, since instead of nursing professionals seeking more comprehensive solutions and to bring benefits in the mid and long term, workers improvise, wasting energy that could be used in the transformation of the causes for the problems, which would bring benefits to all.³⁹

Health-producing situations for nursing professionals in their daily work appear so timid and incipient as topics related to satisfaction and recognition for the work performed; improves the individual assisted; autonomy; nursing professional credibility facing users and aims with their actions, based on ethical principles, the humanization and continuous improvement of the care process.^{26,39}

Another aspect that emerges in everyday nursing practice is death. However, nurses and other health professionals have aversive behavior when speaking of death; avoiding the issue, or when they speak using substitute words that have, in fact, other meanings. The



argument is that were trained to save lives and, in addition, there are aspects of themselves, namely, how the work is becoming the center of life, hindering a reconciliation with the other dimensions of life and their respective activities, maybe it's the feeling that if not lived intensely, what causes stress, anguish and guilt, causing health professionals don't enjoy the everyday of their lives.⁴⁰

♦ As a conclusion: other ways to think about the everyday nursing life

In this article, whose goal was to reflect on everyday nursing approaches found in Brazilian scientific literature, one realizes that the theme emerges in publications relating to what is customary for the profession and not addressed as an object of research, but as a backdrop for the study of issues related to scenario, processes and working conditions. That everyday life is not seen as “place” of strategies and a “space” for tactics, which differs from the expected by authors, like something close or related to the concept of daily life, understood as a place of production and reproduction of social practices, as well as of individual or collective transgressions that are configured as resistance to external social impositions.

This may be an interesting point to think about is the sale of nursing, with a view that does not recognize their own daily life of work as something subject to questioning, criticism and transformation. Once the questioning and criticism are possible only through the recognition and realization of the possibility of a reflective thought of the actions performed routinely.

The theme is important for nursing because it is from the moment they start to envision new possibilities, in addition to those designed by others, incorporating private ways of thinking and make a profession, which is open the way for the transformation that, although difficult, is possible. Thus, reflecting on what is important to think about the daily life of nursing, if this is a place or space, and what has been disguised by superficial analysis and understanding of everyday life.

It is no longer necessary to question, “What has happened?”, but how and why things happen? It is from this questioning of how nursing has done its work and how they have “behaved” given their Everyday Life, can be anticipated that a change of work processes and most enlightened “empowerment” of the profession. In this sense, there is a need for greater approximation, through investigations into this everyday nursing as a possibility of

understanding of the strategies and tactics used by professionals to be as a politicized and engaged professional category.

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What is really important to think about everyday...



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