OBJECTIVE: to reflect about the attention to women in a situation of social vulnerability in their world of life for studies in nursing from the view of Social Phenomenology. Method: this is a descriptive study, of reflective analysis type, developed through the appreciation of books, documents and materials available online in the Virtual Health Library (VHL). Consultations were held with DeCS descriptors: Female, Social vulnerability, Methodology, Nursing. To conduct this reflection, the Social Phenomenology of Alfred Schutz was used as a referential. Results: after the appreciation of the literature, it was necessary first to reflect about the Social Phenomenology, followed by aspects related to women in situations of social vulnerability. Conclusion: for understanding this phenomenon, it was found that the reference to Alfred Schutz Social Phenomenology is an alternative research that contributes to an effective view of the experiences related to the health-disease process of these women. Descriptors: Women; Social Vulnerability; Methodology; Nursing.

RESUMO
Objetivo: refletir acerca da atenção à mulher em situação de vulnerabilidade social em seu mundo de vida pelos estudos na área da enfermagem à luz da Fenomenologia Social. Método: estudo descritivo, tipo análise reflexiva, desenvolvido por meio da apreciação de livros, documentos e materiais disponíveis online na Biblioteca Virtual de Saúde (BVS). Foram realizadas consultas com os descritores DeCS: Mulher, Vulnerabilidade social, Metodologia, Enfermagem. Para a condução dessa reflexão, foi utilizada como referencial a Fenomenologia Social de Alfred Schutz. Resultados: após a apreciação das literaturas, fez-se necessário refletir inicialmente sobre a Fenomenologia Social, sendo seguida dos aspectos relacionados à mulher em situação de vulnerabilidade social. Conclusão: para a compreensão do fenômeno posto, verificou-se que a referência da Fenomenologia Social de Alfred Schutz constitui uma alternativa de investigação que colabora para um olhar efetivo sobre as experiências relacionadas ao processo saúde-doença destas mulheres. Descritores: Mulher; Vulnerabilidade Social; Metodologia; Enfermagem.

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INTRODUCTION

Knowing the heterogeneity that characterizes Brazil, regarding the socioeconomic and cultural aspects, as well as the access to health services, it is understood that the profile of the female population exhibits important differences from one region to another in the country.¹

According to statistics, men and women behave differently in regards to mortality and morbidity rates, being, for example, the most affected women about morbidity violence, particularly domestic and sexual.¹² Another example is given in the exercise of their sexuality, being women more vulnerable to Sexually Transmitted Diseases (STDs) and AIDS.¹³

Concerning to mortality of women in the country, mainly in cardiovascular diseases, breast and cervical cancer, respiratory diseases, endocrine diseases, nutritional and metabolic diseases and external causes, among them violence.² Other important indicators, to evaluate the health conditions of women and the general population, are the mortality of women of fertile age and maternal mortality.¹⁴

The implementation of public policies related to women’s health becomes of utmost importance but does not deny the need to know/understand how indeed women in socially vulnerable feel about existing policies, access to health services, (no) accepted by professionals and managers and in their social relations. In this context, it is justified the relevance and necessity of this study using the Social Phenomenology, intending to broaden the understanding of issues related to a social vulnerability of women. In this sense, the question is:

Which aspects are related to the social vulnerability of women? In an attempt to reflect on the question and from the perspective of Social Phenomenology, intending to enable committed and understanding glances to these women, aims:

• To reflect about the attention to women in a situation of social vulnerability in their world of life for studies in nursing in the light of Social Phenomenology.

METHOD

The article proposed from the dissertation - ongoing << Perceptions and meanings about motherhood of women in prison situation >>.

This is a descriptive study, of reflective analysis type, developed through the appreciation of books, documents, and materials available online in the Virtual Health Library (VHL). Consultations to scientific journals were held with Descriptors and Health Sciences (DeCS) Women, Social Vulnerability, Methodology, Nursing.

To conduct this reflection, the Social Phenomenology of Alfred Schutz was used as a referential. This theory states that, to live in this world, man is guided by the way as defines the action stage, plays their possibilities and face their challenges from their biographically determined situation and that every person, throughout their existence, plays the world from the perspective of their interests, motives, desires, ideological and religious commitments.⁵

RESULTS AND DISCUSSION

After appreciation of the literature was initially necessary to reflect about the theoretical and methodological framework of Social Phenomenology, followed about aspects related to women in situations of social vulnerability.

♦ About the theoretical framework

Phenomenology is an alternative research that contributes to an effective view of the experiences related to the human health-disease process, and especially those experienced in different assistance and health care settings.⁶⁻⁷

For social phenomenology, the everyday world is the scene where the man lives, which is already pre-structured, before their birth.⁸ “[…] to understand the world, i.e., social reality, one must apprehend their typifications, known as constructs of a first degree, arising from participants’ speeches.”⁹⁻¹⁰⁻¹¹

The action is interpreted by the subject from its existential reasons, derived from the experiences listed on subjectivity, constituting conductors of action in the social world. Those relating to the achievement of objectives, expectations, projects are called reasons for and those who are based in antecedents, the collection of knowledge, experience lived in the bio-psychosocial framework of the person reasons, are called reasons why.⁶⁻¹¹⁻¹²

The phenomenology sociological method of Schutz proposes principles to be followed to achieve an understanding of the studied phenomenon. These principles begin with the description of the disinterested attitude of the observer, the formation of sociological constructs by the rules of relevance and its postulates, the logical consistency, subjective interpretation, and adequacy. The study...
should be completed with the discussion of the reasons and functions of adaptation to the sociology of rational action models.9-10

The relationship in the action for Nursing care involves a social context that expresses different conceptions of health and illness, needs and to the nurse performance, and can lead to positive and negative experiences of the subjects involved in the promotion, prevention, and recovery of health.6,7,9

The studies point out to the importance of using this method for research in nursing, as professional care implies a specific type of social relationship between the subjects who participate.6

The socially vulnerable woman

According to the National Policy of Attention to Integral Women's Health1, there are some relevant situations to health, giving greater emphasis, as the precariousness of obstetric care and contraceptive care, abortion in unsafe conditions, STDs and AIDS, domestic and sexual violence, the health of adolescent women, women's health during climacteric/menopause, mental health and gender issues, chronic degenerative diseases and gynecological cancer, the health of lesbians, black women, indigenous, of residents and workers in rural areas and women's health in prison situation. Some of them proportionally related to social vulnerability.

The period of adolescence is permeated by several changes in the woman's body, as well as situations of financial and emotional dependence on parents and/or partners. During this period, the adolescent is exposed to STDs and AIDS involvement, early pregnancy and repeat pregnancy, often due to the lack of health care, poor socioeconomic conditions and low level of education.1,3

Concerning the black population, socioeconomic data are already indicators of the health status of this population. The vast majority of black women are below the poverty line, and the illiteracy rate is double when compared to white women. As a result, access of black women to obstetric care, either prenatally or at birth and postpartum, as well as gynecological care is lower.1

Women in prison situation are subject to previous conditions of life and more susceptible to various diseases. Even some progress has been achieved over the years; it is still possible to identify the need for access to health care activities in prisons, especially the cultural and socioeconomic variable of women in this situation.2

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Due to the cultural heritage, the woman is already in a deprecating situation in the Brazilian patriarchal society, a fact that leads lesbians, black, indigenous, living and working in rural areas and women's health in prison situation, to almost complete exclusion of their rights.2

“The health and conditions of access vary according to the condition of the individual in the social structure.” 11:285 From this statement, it is possible to note that the availability of resources and the achievement of treatments, medications, technologies and other benefits that support the health of the imbalanced individual of the health-disease process, are not equitable in communities.1,11,12 Care policies to women have failed to incorporate a targeted and comprehensive care to women in this context.2

The term vulnerability features three different situations of the subjects; the social vulnerability related to the social dimensions of the subject; programmatic vulnerability, which refers to the understanding of the obstacles of prevention and access to services; and individual vulnerability, level of beliefs, attitudes and personal practices of human being.12,13

The concept of vulnerability allows a broader view of the ways of the world of people's life, as well as understand the meanings they attribute to their lack of autonomy to address health problems. In a complementary manner, the understanding of the concept of vulnerability allows researching the impact of protection strategies that provide resources to people and families to mitigate the adversity situation and its relation to health and health problems.3,12

The social vulnerability has a multidimensional concept, regarding the subject's condition or collectives in a fragile situation, which makes them exposed to risks and significant levels of social disruption. It is mainly related to the result of any accented action of exclusion, discrimination or weakening of individuals or groups, caused by factors such as poverty, economic crises, poor educational level, poor geographical location and low levels of social, human or cultural capital.15,16

In this sense, in the light of social phenomenology of Alfred Schutz, women nursing care can be considered as a social action with the world of life scene, where interpersonal relations that need to be perceived by professionals are established, in this case, the nurse.6,16,17 This social action
must allow a different look at who receives care from the caregiver, considering their cultural context, vulnerability, and their social relationships.

CONCLUSION

The realization of this reflection becomes satisfactory because it was possible to reflect, in the light of the Social Phenomenology, about attention to women in vulnerable situations, especially to their social context.

The social phenomenology of Alfred Schutz comprises a possibility to consider, motivate, expand and develop research actions about nursing care, with the guiding principle of social relations in the world of life of its informants.

The ability to know/understand how women in vulnerable situations face their daily contexts, such as participate and perceive themselves in their family and social relationships, how is their access to health services, as how are (not) accepted by the professionals and with the support of a theoretical and methodological framework that allows to perceive them with greater reliability, it becomes urgent.

Verifying the complexity involving women in vulnerable situations, it is suggested to perform new studies aimed at understanding their world of life in certain biographically different situations, valuing their lines and seeking to bring issues, often neglected by professionals and health managers, and may allow a different look to these issues and contribute to changes in context.

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