



Journal of Nursing

Revista de Enfermagem

UFPE On Line

ISSN: 1981-8963

REFLECTIVE ANALYSIS ARTICLE

QUALITATIVE RESEARCH: AN ALTERNATIVE FOR THE ANALYSIS OF HEALTH IN THE WORKPLACE

PESQUISA QUALITATIVA: UMA ALTERNATIVA PARA A ANÁLISE DA SAÚDE NO AMBIENTE DE TRABALHO

INVESTIGACIÓN CUALITATIVA: UNA ALTERNATIVA PARA EL ANÁLISIS DE LA SALUD EN EL SITIO DE TRABAJO

Reinaldo Antonio Silva-Sobrinho¹, Marcos Augusto Moraes Arcoverde², Marieta Fernandes Santos³, Patricia Barbosa Lincoln⁴

ABSTRACT

Objective: to present reflections about the Theory of Social Representations and participatory research as a tool for understanding the concepts of health disease contextualized in the workplace. **Method:** it sought to discuss the possible relationships and advantages of this methodological approach as applied to empirical research in the health field. **Results:** the use of participatory research in association with social representations theory constitutes an alternative to solve the demands and problems seen in practice, with the participation of those involved with the research. **Conclusion:** the information obtained from this kind of study could adapt hopefully to the study of health risks related to the work environment. Also the relevance of these methodological options considered the multiplicity of situations involving the workers' health, which enables the analysis of knowledge on the issue and leverages changes in a situation problem observed in a group socially organized. **Descriptors:** Work Environment; Workers' Health; Participatory Research Community Based; Qualitative Research.

RESUMO

Objetivo: apresentar reflexões sobre a Teoria das Representações Sociais e a pesquisa participante como ferramenta para a compreensão das concepções de saúde-doença contextualizadas no ambiente de trabalho. **Método:** buscaram-se discutir as possíveis relações e vantagens dessa abordagem metodológica enquanto aplicada à pesquisa empírica no campo da saúde. **Resultados:** o uso da pesquisa participante em associação com a Teoria das Representações sociais constitui-se em alternativa para resolver as demandas e os problemas visualizados na prática, com a participação dos sujeitos envolvidos com a pesquisa. **Conclusão:** as informações obtidas com essa modalidade de estudo podem vir a se adaptar desejavelmente ao estudo dos riscos à saúde ligados ao ambiente de trabalho. Destaca-se ainda a pertinência destas opções metodológicas consideradas a multiplicidade de situações que envolvem a saúde do trabalhador, que permite a análise das unidades de conhecimento sobre a questão e potencializa mudanças em uma situação problema observadas em um grupo socialmente organizado. **Descritores:** Ambiente de Trabalho; Saúde do Trabalhador; Pesquisa Participativa Baseada na Comunidade; Pesquisa Qualitativa.

RESUMEN

Objetivo: presentar reflexiones sobre la Teoría de las Representaciones Sociales y la investigación participativa como una herramienta para la comprensión de los conceptos de salud-enfermedad contextualizados en el lugar de trabajo. **Método:** se trató de analizar las posibles relaciones y ventajas de este enfoque metodológico aplicado a la investigación empírica en el campo de la salud. **Resultados:** el uso de la investigación participativa en asociación con la Teoría de las Representaciones Sociales constituye una alternativa para resolver las demandas y los problemas observados en la práctica, con la participación de los involucrados en la investigación. **Conclusión:** la información obtenida con este tipo de estudio puede esperar llegar a adaptarse a estudiar los riesgos de salud relacionados con el entorno laboral. Tenga en cuenta también la importancia de estas opciones metodológicas consideradas la multiplicidad de situaciones que afectan la salud del trabajador, lo que permite el análisis de las unidades de conocimiento sobre el tema y potencia los cambios en una situación problemática observada en un grupo socialmente organizado. **Descriptores:** Ambiente de Trabajo; Salud Ocupacional; Investigación Participativa Comunitaria; La Investigación Cualitativa.

¹Nurse, PhD in Sciences, State University of West Paraná/Unioeste. Foz do Iguaçu (PR), Brazil. E-mail: reisobrinho@unioeste.br; ²Nurse, Master in Nursing, State University of West Paraná/Unioeste. Foz do Iguaçu (PR), Brazil. E-mail: marcosarcverde@bol.com.br; ³Nurse, PhD in Nursing, State University of West Paraná/Unioeste. Foz do Iguaçu (PR), Brazil. E-mail: marieta_fs@yahoo.com.br; ⁴Nurse, Specialist in Intensive Care Unit. Foz do Iguaçu (PR), Brazil. E-mail: titalincoln@yahoo.com.br

INTRODUCTION

Social ecology comprises the development, quality of life (leisure, health) social ties, ethics, relations between individual, society and the environment. These relationships define the way of being and living in a group, determining how environmental resources are used, and different between each group of people according to cultural relations of this group with nature.¹

The process of social and economic repercussions in relations that occur in ecosystems, and humans, as part of this, suffer changes in their health profile and disease. The relationship between environment and health is valuable and vital sense, ethically and socially constituted in a process that can be predicted scientifically and therefore is likely to be modified to a greater or lesser degree given the progress achieved by science and technology and dependence social forces in certain reality. The process starts from biological and social relationships that constitute a complex variety of ecosystems present and articulated in a given territory.²

The influence of the environment on health can be positive or negative as it promotes conditions for the well-being and the full realization of human capabilities and contribute to the onset and maintenance of diseases, injuries and traumatic injuries in the population as a whole or for population groups individuals.

The genesis / production of the disease process, the environment would be in exteriority always present and able, in various forms and mechanisms of cause or contribute to the changes and alterations biopsychic understood as illnesses, injuries and health problems. It is recognized, however, that there is any state, dynamic or changing the environment that has the property to perform this role. It requires the existence of antigenic capacity and that its presence in the environmental condition is in effective interaction with a gifted individual susceptibility to the process develops. Thus, it becomes necessary detailed knowledge of the structures and dynamic environment so that they can identify elements and relationships capacity morbid conditions and forms that occur in the effective human-environment interactions to understand the production of so-called risk situations environmental as well as the specific exposure of populations and human communities.²

In the 1990s, the process of globalization became apparent, and as a result, emphasized

the precariousness of work, the reduction of formal jobs and gradually increasing the informalization of labor. This process led to an increase in risk situations in the workplace, making access to the means necessary for the subsistence of the worker and his family.³

To order the study, one can conceptualize the work environment as "habitat labor, that is, everything that surrounds and affects, directly and indirectly, where the man gets the means to provide as much as necessary for their survival and development in balance with the ecosystem."^{4:27}

Therefore, the working environment is part of a broader concept of environment, so that should be considered to be well protected by laws so that workers can enjoy a better quality life.⁵

Therefore, it is important that the promotion, protection and recovery of health workers are integrated interventions involving, among other sectors, public health institutions and the environment, because increasingly there is an understanding that different situations of environmental risks originate up work processes. There are, thus, the synergism between production, distribution, consumption, health and environment, featuring challenges towards the organization of public joint guidelines between different sectors.⁶ this context, this paper aims to present the Social Representations Theory and Research Participating as a tool for understanding the concepts of health disease contextualized in the workplace.

♦ The working environment

The interference of diseases in the performance of professional workers points to the need to search for information relating to the work environment in order to guide the community on the mechanisms to prevent and improve the working conditions and lives.⁷

The constant physical activity and exposure to nature are inherent characteristics of different professions and rarely measures of individual and collective protection are checked to prevent the risk of accidents, the onset of diseases and ailments. Many work activities are carried out informally, away from the protection of the law, contributing to the culture and the economic situation of such workers would prevent the use of tools to prevent accidents at work.

It is worth stating that parallel the socioeconomic situations of work; the worker bears representations of the world. Thus, it is believed, from the social representations of a group of workers against risks of working

environment, it is possible to build collectively a set of measures to raise awareness and educate the group about the relationship between man and environment, minimizing risks health by work activity, focusing in this way, the change in lifestyle through redefinition of labor relations and respect for nature can be an alternative to protect human health and reduce human suffering.

♦ Unveiling a methodological proposal

To understand the level of consensual knowledge about the risks of the workplace is necessary to use some kind of methodological tool. The discussions regarding the health of an individual or community should include knowledge about the social, environmental and political conditions in which the individual lives or group.⁸ this sense, the concepts of health and disease need to be considered not only by the biological aspects of the individual, but also by the environment in which he lives, thinks, feels and wants.⁷

Social representations constitute a collective, multifaceted and polymorphous, being relevant and constituent elements of cognitive, affective, and symbolic values that are generated by the social subjects in situations of interaction with the reality that they live.⁹ In addition, the social representations conform common sense that one has about a particular topic, being able to locate the concepts, prejudices, ideologies and specific characteristics of everyday activities, social and professional people.¹⁰

Studies in the field of health are, increasingly, using social representations theory to identify the concepts and knowledge of individuals and populations on a particular matter. Social representations are related to people who work outside the scientific community, although they may also be manifest in it.⁸ Through social representations can unveil the reality as constituted by this or that group and understand their actions and reactions. This understanding is essential for development and collective action alternatives for the group and in the face of problems experienced.¹¹

Similarly, the study of social representations of an individual or group is important, as these guide the action and if the goal is to change a problem situation, for example, influence change in lifestyle is necessary to understand what underlies action, and that meaning is not to educate, but to raise awareness, make transparent what is opaque and emphasize the creative aspects of individual thought.¹² In this context, proposals to conduct this type of research

permeated by diverse ecosystems are favorable to researchers who wish to understand and transform social reality.

The assumptions of participatory research are stated as search strategies that are proposed as the participation of social groups in the search for solutions to the problems experienced, involving a process of understanding and changing reality.¹³ The research participant can be organized in a way opened as a popular neighborhood, in this situation, it can be triggered with greater initiative by the researchers, which should take precautions not to be excitement and deviations in the conduct of research which may lead to loss of objectivity necessary research.¹⁴

Participant observation is a type of empirical social research designed and carried out in a close association with an action or solving a collective problem and in which researchers and participants representative of the situation or problem are involved in a cooperative or participative.¹⁴ The participatory research process leads to the production of new knowledge that must be transferred to the people involved in a way that allows the understanding of the situation investigated and, collectively, it can propose the action with the best chance of transforming their reality.¹⁵

However, it is emphasized that:

The research process in no way can be set straight, or have all your actions designed a priori, since itself is a dynamic process by being social [...] However, a preview of the activities to be developed, proposals for implementation and also specific instruments for the acquisition of information, data and practices to be the basis of research are needed to guide actions and compliance formal academic requirements. When performing the exposure of the activities to be developed, it may result in the commission of an exhibit "chaotic", even with an impression of disconnection between various stages. But please note that this apparent "dislocation" is inherent in the process of research [...] at the exhibition of the procedures, it shows an overview of the actions and strategies for their achievements, however, safeguarding the proper motion of the method: practice - theory - practice in constant dialogue, at all times in tight, because this understanding is defined theory and practice that make up a whole, which is the social praxis.^{16:49}

To guide the design chosen as method, we propose the formal elements of participatory research, which are:

♦ First element

It is the insertion of the approach to the target population. "This phase has two complementary objectives: to make the researchers and the social group known each other, and allow [...] the commitment of the researcher with the group."^{15:45}

It is hoped that this time has started accepting the proposal of the research participant, as is emphasized as the central concern of this methodology to the process to be developed and not with the product. Therefore, it becomes essential interaction between the researcher and the researched group, providing space for the group to talk about him, revealing his reality, interacting and entering each other. In this sense, the people involved in research and researchers become participants in the construction process for the transformation of the problem situation.¹⁷

The actual insertion therefore implies a permanent tension between the risk of over-identification with the protagonists of the researcher of the situation in which it is inserted and the need to maintain a setback to allow a critical reflection on the ongoing experience. We must together achieve a synthesis between the militant base and social scientist, between observer and participant, without sacrificing the two poles of the relationship.^{13:28}

◆ Second element

Previous survey is a way to get more information for better understanding of the participants and the living reality.

Before even engaging a more systematic dialogue with the community, the researcher can go drawing a temporary profile Group. For this preparatory work, the sources are diverse, as are useful for both the study of official documents and testimony from established authorities as the observation of everyday life, the cultural and religious practices, the identification of the forms of economic activity or mechanisms of internal and external power.^{13:29}

Search will be organizing meetings with the group for personal settings on the life experiences of professionals through exposure histories, lived situations, especially those related to the risks incurred in the workplace, the loads of the profession through dynamic group such as, for example, wheels conversations. These moments will provide the members of one group relaxation and preparation for the next stages. In the next moment, we intend to discuss with technical approaches, the risks in the workplace.

At this point, it is important to understand an internal perspective, what is the point of view of individuals or social groups about

the living situations. What is their perception about such situations? How they interpret it? What is your value system? What are your problems? What are your concerns? It is necessary here to learn what is the logic of the respondents, even though, at first glance, his inferences and reasoning may seem irrational.^{15:204}

Regarding the collection of necessary data to the survey, in addition to procedures already reported participants may be necessary to use a field notebook used to record facts, speeches, impressions, reactions and activities not present in the other documentary material. You can still use the interview as a complementary method, with appropriate ethical and legal observances, and questionnaire. Although research is a qualitative research participant, at certain times it is possible to use instruments typical of quantitative research, such as the traditional preset questionnaire.¹⁶

◆ Third element

The information gathered earlier will grant to build collective knowledge through the analysis of the data output (social representations) by participants, the identification and prioritization of the objectives of the study, with the classification of the explanations situations and relationships arising from the contrast of knowledge routine and systematic universally.

In this phase of a research participant, to understand the social representations made and shared by the subjects, the researcher may choose different paths, including thematic analysis, which "consists in discovering the meaning units that make up the communication and whose presence or frequency of appearance can mean something for the chosen analytical objective."^{18:28} In this situation, the risk to health generated in the workplace.

◆ Fourth element

At this time, there will be the elaboration of proposals for transforming actions to situations raised. Through the knowledge of reality is possible to apply the action plan should consist of:

Educational activities for analyzing problems and situations encountered; measures that could improve the situation at the local level educational activities that make possible the implementation of such measures; actions to forward solutions in the short, medium or long term, locally or on a broader scale.^{15:216}

The action plan should be drawn from the reality and should be able to attend some functions, like trying to solve the practical problems faced and gave rise to the research,

serve as a tool for evaluation and critique of the new knowledge produced, and the same time, allow the stakeholders to reassess your power of social participation, learning in practice to know the mechanisms of action of social power and develop strategies to address them.¹⁵

As described earlier, the goal is that the action plan is a useful tool to educate the group so that work practices be rethought in order to eliminate or reduce the identified risks in order to improve the relationship man - environment and consequently the quality of life.

This discussion aims to provide some key elements in a comprehensive theoretical and methodological framework for the analysis of existing social and cultural factors that underlie the health care field. The literature shows that the research participant and the theory of social representations are widely used in education, health, nursing, biology, among others, showing itself as a benchmark in the alternative proposition of social problems.^{7-11; 16-17,19,20}

CONCLUSION

The synergy between the use of Social Representations Theory and Research Participant may lead to the identification of the conditions under which the work is performed beyond the comprehension of concepts and identification of risks and workloads, characterization of forms of illness and death due the relationship of the worker to the environment, culminating in the development of an intervention and community workers in order to change work practices to eliminate or reduce the identified risks in order to improve the quality of life.

In this sense, the methodology of participative research, in association with the Social Representations Theory, is presented as an alternative attempt to address the demands and problems seen in practice worker, actively and interactively, and with the participation of the subjects involved with the research. Thus, the information obtained from this type of research can hopefully come to adapt to the reality of the health risks linked to the workplace.

It is essential to verbalize the need to develop analytical tools that allow to understand how social groups recognize and interpret the risks that the work environment produces health and from that information to appropriate strategies arising from the collective construction and sociocultural relevance to group in order to protect life in the workplace.

REFERENCES

1. Salzano FM. Genética e ambiente. Rev bioét (Impr). 1997; 5:165-72.
2. Brasil. Ministério da Saúde. Instituto Brasileiro do Meio Ambiente. GEO Brasil. Perspectivas do meio ambiente no Brasil. Brasília: Edições IBAMA; 2002.
3. Instituto Brasileiro de Geografia e Estatística [Internet]. Pesquisa nacional por amostra de domicílios [cited 2012 Apr 12]. Available from: <http://www.ibge.gov.br/home/estatistica/populacao/trabalhoerendimento/pnad2004/default.shtm>
4. Mancuso RC. Ação civil pública trabalhista. São Paulo: RT; 2002.
5. Sant'Anna A. Biossegurança no Brasil: ensinamento das tendências internacionais para um país retardatário. J Ciência Hoje. 1994;9(305, Supl):1-4.
6. Brasil. Ministério da Saúde. Departamento de Atenção Básica. Cadernos de Atenção Básica. Saúde do Trabalhador. Brasília: Ministério da Saúde; 2002.
7. Filipe L. Concepções sobre a saúde e doença: um estudo envolvendo usuárias de uma unidade do Programa saúde da família. [Dissertação]. Maringá: Universidade Estadual de Maringá. Departamento de Enfermagem. Programa de Pós-Graduação em Enfermagem, 2007.
8. Bercini LO, Tomanik EA. Representações sociais sobre saúde e estratégias de enfrentamento das doenças entre as mulheres dos pescadores do município de Porto Rico, Paraná. Ciênc cuid saúde [Internet]. 2006 [cited 2012 Apr 02];5(supl):71-6. <http://periodicos.uem.br/ojs/index.php/CienCuidSaude/index>
9. Silva AMTB, Constantino GDL, Premaor VB. A contribuição da teoria das representações sociais para análise de um fórum de discussão virtual. Temas Psicol. 2011; 19(1):233-42.
10. Moscovici, S. Representações sociais: investigações em psicologia social. Petrópolis: Vozes; 2003.
11. Tomanik EA. Elementos sobre as representações sociais dos pescadores profissionais de Porto Rico. In: Vazzoler AEAM, Agostinho AA, Hahn NS. A planície de inundação do alto rio Paraná: Aspectos físicos, biológicos e socioeconômicos. Maringá: Eduem; 1997. p. 415-34.
12. Spink MJPO. Psicologia social e saúde: práticas, saberes e sentido. Petrópolis: Vozes; 2003.

13. Oliveira RD, Oliveira MD. Pesquisa social e ação educativa: conhecer a realidade para poder transformá-la. In: Brandão CR. Pesquisa participante. São Paulo: Brasiliense; 1981.p.17-33.
14. Thiollent M. Metodologia da pesquisa-ação. 14th ed. São Paulo: Cortez; 2005.
15. Tomanik EA. O olhar no espelho: conversas sobre a pesquisa em ciências sociais. Maringá: Eduem; 2004.
16. Martins FJ. Ocupação da escola: uma categoria em construção [Tese]. Porto Alegre: Universidade Federal do Rio Grande do Sul. Faculdade de Educação. Programa de Pós-Graduação em Educação; 2009.
17. Guariante, MHDM, Berbel NAN. A pesquisa participante na formação didático - pedagógica de professores em enfermagem. Rev Latino-Am Enfermagem [Internet]. 2000 Apr [cited 2012 Apr 02];8(2):53-9. Available from:
http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0104-11692000000200009&lng=en&nrm=iso. ISSN 0104-1169. <http://dx.doi.org/10.1590/S0104-11692000000200009>.
18. Bardin L. Organização da análise. In: L. Bardin, Análise de conteúdo. Lisboa: Edições 70; 2004. p. 89-96.
19. Santos SSC, Lopes RS, Silva BT, Barros EJM, Silva ME, Hammerschmidt KSA, et al. Pesquisa-ação na elaboração de manual de normas, rotinas e técnicas de enfermagem. J Nurs UFPE on line [Internet]. 2011 Mar-Apr [cited 2012 Apr 02];5(spe):426-34. Available from:
http://www.ufpe.br/revistaenfermagem/index.php/revista/article/view/1373/pdf_450
20. Gomes AMT, Silva EMP, Oliveira DC. Social representations of aids and their quotidian interfaces for people living with HIV. Rev Latino-Am Enfermagem [Internet]. 2011 May-June [cited 2012 Apr 02];19(3):485-92. Available from:
http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0104-11692011000300006&lng=en&nrm=iso. ISSN 0104-1169. <http://dx.doi.org/10.1590/S0104-11692011000300006>.

Submission: 2012/05/03

Accepted: 2013/06/05

Publishing: 2013/07/15

Corresponding Address

Reinaldo Antonio Silva-Sobrinho
Curso de Enfermagem
Centro de Educação e Letras
Universidade Estadual do Oeste do
Paraná/Unioeste – Campus Foz do Iguaçu
Av. Tarquínio Joslin dos Santos, 1300
Bairro Jardim Universitário
CEP: 85870-900 – Foz do Iguaçu (PR), Brazil