REFLECTIVE ANALYSIS ARTICLE

PHILOSOPHICAL REFLECTION ON NURSING CARE IN FEEDING CHILDREN EXPOSED TO HIV

REFLEXIÓN FILOSÓFICA DEL CUIDADO DE ENFERMERÍA EN LA NUTRICIÓN DE NIÑOS EXPUESTOS AL VIH

ABSTRACT
Objective: to reflect on the actions of nursing care and child nutrition guidelines in the context mother and son in the presence of HIV.

Method: reflective essay awareness of mothers to care practices offered to their children in relation to nutrition by artificial nursing guidelines

Results: after the philosophical abstraction and careful reading of the literature on the subject, elencaram the following categories: philosophical bases of care, the Nursing and AIDS Care, Child and artificial nutrition.

Conclusion: Upon reflection, It was understood that the philosophical aspects should govern the care and health education to practice more effective care to this population through humane and holistic care, driven by ethics, responsibility and respect for others.

RESUMEN
Objetivo: reflexionar sobre las acciones del cuidar en enfermería y las directrices de la nutrición infantil en el contexto de la madre y el niño en la vivencia del VIH.

Método: ensayo reflexivo de la sensibilización de las madres para las prácticas de cuidado ofertadas a sus hijos

Resultados: se levantó bibliográficamente las publicaciones disponibles por la literatura Latino-Americana y del Caribe en Ciencias de la Salud (LILACS). Para una selección de artículos se utilizó por primera vez tres palabras-clave: cuidado, HIV, crianza, separadas por el operador booleano and; a segunda busca foi utilizada para dar suporte à discussão filosófica sobre as ações do cuidar em enfermagem, utilizando as palabras-clave: cuidado, enfermagem e filosofia.

Resultados: después de la abstracción filosófica y leitura criteriosa de las publicaciones de la temática, se utilizó para la filosofía sobre la atención y la educación en el cuidado para la práctica de cuidado más eficaz a esa población mediante la asistencia humanizada y holística, dirigida por la ética, responsabilidad y respeto al otro.

Para las niñas vulnerables a la transmisión materno-infantil del VIH es esencial sensibilizar y orientar a las niñas en las prácticas de cuidado frente a las prácticas físicas, sociales y subjetivas que envuelven a estar infectado por el VIH. Descritores: cuidados de enfermería; filosofía; enfermagem; alimentação artificial.

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INTRODUCTION

The exposure of individuals to infection with Human Immunodeficiency Virus (HIV) has been treated in different discourses, but those who deal with the prevalent theme in its context or historical biological-physiological and epidemiological. Redirect the discourse of care with children exposed to HIV, giving new looks, is to strengthen the ideal of family autonomy and the subjects in the logic of how society establishes their lifestyle practices and their concepts about illness almost always structured in the objectification of another crippling and offering practices instituted in everyday relationships of care that is not guided in the enjoyment of attitude and unique personal communication, relational care. Understood in this context as a reflection of that which develops in a proper time, is to go beyond the professional knowledge and technology, enabling the inclusion of knowledge of the needs and desire of the other.

Thus, permeates space up to the rescue of the appreciation of the subjects in care practice, and moves the focus from disease care to health and be fragmented to be integral, as indicated in 'Paradigm Nations Human Development Nations, 'whose four key pillars: equity, sustainability, productivity and empowerment, need to be understood in its proper perspective.

In this context, it should be the relationship between coordinated and complementary scientific knowledge and appreciation of the essence of the other in its complexity and comprehensiveness. For this, it requires a realignment of flows at the interfaces of care considered in the study organized signifying a new format configured in a network of interdependence and interdisciplinary comprehensive care in women's health status in HIV-infected and at risk of child virus infection.

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In HIV care process to mother and child development targeted actions aiming to clarify and guide these women on various aspects of child care. Among these aspects, information about the disease itself, the actions needed to prevent transmission of HIV and the care of children born exposed. The presence of a professional service organization committed and facilitate the reception, creating linkages and motivation of the patient through group activities and individual assistance to clarify expectations and doubts arising from the use of therapy and protection to the baby. Thus, we intend to provide a little confidence in the face of difficulties.

When referring to children born at risk of acquiring HIV vertically, the nutritional aspect deserves a bigger, because in Brazil there is a recommendation of exclusion of breastfeeding, which is known to be the recommended food until six months age. Thus, before the visible importance of food for proper growth and development, the child should be exposed vertically artificial feeding satisfactory to replace breast milk. This initiative is expected to meet their nutritional and metabolic needs at a time of your life in which your body's immune response will be decisive in the development or not of HIV infection.

In the context of HIV, mothers showed difficulties to offer food to children born exposed to the virus. The example he mentions is offering breastfeeding crossover supply of breastmilk and other types of milk without adequate preparation, besides the inadequate amount of food offered to children.

Moreover, the development of our assistance is necessary to go beyond the transfer of information about the care of mothers living with HIV to the child vertically exposed. The nurse, in the exercise of their profession, increasingly watching these guys, whether in primary care, either in secondary or tertiary. This practice should therefore consider the demands of the population, greatly subjective aspects of a lethal virus infection and the possibility of contamination of the child, prompting philosophical reflection imperative of health professionals.

One of the forms assumed by nurses to manifest itself as a science and art and care, because it is composed of several elements that characterize it as knowing and doing the profession.

Nursing is a professional group holder of relevant roles, functions and responsibilities in health care. The essence and specificity of the nursing profession is the care of the
human being, individual, family and community, to develop interventions for health promotion, disease prevention, recovery and rehabilitation. Through care, nursing responsibility for the comfort, care, welfare and autonomy of patients in care itself, and in coordination with other sectors and intersection, for the offering of health care.

Thus, like philosophy enables reach beyond what appears to be, lets also reflect on the aspects of experienced reality. Thus, the assistance over time associated teaching about care and about the philosophy and constant readings on the theme of HIV enabled the preparation of this study that seeks the light of philosophy, reflect on the actions of nursing care and guidelines in the context of child nutrition mother and son in the presence of HIV.

**METHOD**

 Developed reflexive study about the awareness of mothers to care practices offered to their children in relation to nutrition by artificial guidelines nursing supported the Ministry of Health

In this context, in order to explore the study of nutrition of infants exposed to HIV, held bibliography of publications available from Latin American and Caribbean Health Sciences (LILACS).

LILACS contributes to the dissemination of technical and scientific knowledge produced in Latin America and the Caribbean. Why are the recommendations about food-related sociocultural context and in accordance with the guidelines of the country, decided to fetch data from LILACS, because this is an important database of more than 500 000 documents, including articles, monographs, dissertations and theses. This source provides complete works, essential for a thorough literature review on various subjects in the area of health sciences.

For a selection of articles capable of supporting the proposed subject were used, primarily, three key words: care, HIV, child, separated by the Boolean operator AND. We found 49 publications. Initially, we proceeded to read each abstract texts found, taking into account the following criteria: articles published between the years 2005 and 2010 and available in full. Thus, two publications contemplated the purpose of the study mentioned above.

The second search was conducted to support the philosophical discussion about the actions of nursing care, using the keywords: care, nursing and philosophy. 157 publications were obtained, but after reading the summaries were selected 16 studies able to base the philosophical perspective on nursing care. Thus, amounted to 18 publications, of which, after philosophical abstraction, emerged the following categories: philosophical bases of care; Caring in nursing and AIDS, child nutrition and artificial.

**RESULTS**

- **Philosophical bases of caring**

  Given the relationship between humans, identifies himself as a caring action inherent in the person. Intuitive and instinctive caring is part of the essence of being humano9 manifested in meeting me with you, to form us. Therefore, as stated, care has relational sense and holds a philosophical ideal. When you come out of yourself and relieve yourself time and efforts for the welfare of the similar, no matter how small and with no intention of rewards, the action takes place of caring.

  Transposing is also the aspect of autonomy of the individual self care that appears intrinsically linked to a service of the soul, which, according to the author, including the possibility of a game with other exchanges and a system of reciprocal obligations by work ethic of respect for the individuality of the other. Does not constitute an exercise in solitude, but a true social practice.

  When considering philosophy as a discipline that shows traces of a reality based on values and principles, care is likely to philosophical analysis. All are capable of exerting actions of caring for requiring simple actions, dismissing the various apparatuses of technology. In care, the important thing is not the instrumental and yes people.

  The actions of care are based on the sense of responsibility for similar, permeated by feelings of care and affection, especially by other more fragile. Moreover, the handle enables the construction of an ethical consensus least in men generating benevolent and attitudes responsible for the living conditions and in the other world.

  However, throughout history, identifies the influence of ideologies and diverse interests in the exercise of care and realizes increasingly shares the commodification of care, with the predominance of interests is not always common. Due to the current context of modern society, in which the domination and power relations governing, one experiences increasingly indifference of the individual to another.
In health, the hegemony of the biomedical model for decades, based on disease, in technique and healing, contributed to the degradation of basic factors of caring. It identifies professional performing actions in this area with impeccable technique, however, devoid of the basic aspects of care. Given the workload and the face of indifference to another's pain, the care exercised is fragmented and devoid of inherent relational aspect. Others, for supremacy of scientific knowledge, attitudes are conditioned to parteneralistas during care, forgetting human dignity.

In recent years, gradually opens up space for the redemption of the appreciation of the subjects in practice. The focus shifts from illness to health and fragmented to be holistic. Thus, the actions of caring became the target of study and reflection in order to be governed by the assistance understanding the other as a whole and so that care is perceived as a unique relationship between two beings.

- The nursing care

Premise of nursing care, the cuidar requires vigilance and attention by the professional in the exercise of their profession. Goes beyond the mere mechanical performance of tasks for the commitment to the pursuit of the welfare of the other, in a relational and human involvement.

Thanks to some requirements and attributes, to be distinguished from nursing care as an expression of humanity. It is characterized therefore by being a helping profession in which the concept of caring is genuine as it covers all the attributes that make human discipline and help, the professionalization of care. However, the great challenge of nursing is the need to reconcile divergent interests, power relations and labor, complex, interactive and interdependent. This is not simple.

The philosophical origin of care is healing. Terms are of Latin origin, understood as synonyms, because the cure-care manifests itself in the attitude of thinking, concern, care, attention and interest. It also means care, diligence, good conversation, and in this sense, is fundamental constituent of human, rooted first, then it can manifest as an essential way of being and genuine concern on the originality of the work process in health, and primarily scenario practice and occupation of nursing action in the production of health services.

This possibility of a clinic-centered care may be opening a fertile ground where nursing can develop their potential. You can think of a model of health to fashion interventionist (which has as main objective cure) to another, whose primary purpose is caring. This is understood as a relationship to develop in their own time, going beyond the professional knowledge and technology, paving the way for the inclusion of knowledge of the needs and desire of the other.

Think carefully as the fundamental concept of nursing practice is a way to break the technical vision and objectifying still prevalent in science. While recognizing the importance of science in technical knowledge, nursing began to awaken to the need to go in search of a framework that values its act. Take consistency studies performed in the line of care when care becomes human delimited, in the literature concerning, as the essence of nursing practice.

In direct contact with the individual weakened by illness, the nurse sometimes stands for perfection of technique rather than the subjective aspects so essential to take care of. Then the person becomes mere object in the hands of professional nursing. Of course, the practical ability and use of technologies can not be denied, but a loving care has equal or even greater importance to the subject, and especially, promotes growth and maturation of people, who are motivated to become protagonists in their stories.

The care involves the relationship between two people: me and you; latter needed care for any reason, is a natural, inserted in a reality of life, habits, beliefs, customs, contexts which are his own. Therefore, care also involves the aspect of autonomy of the subject, the ethical performance of respect for the individuality of the other. In this sense, the care in health care and nursing should be on the relationship between complementary and articulated scientific knowledge and appreciation of the essence of the other in its complexity and comprehensiveness.

Thus, as is believed, the process of nurses' work will be realized within an ethics of intervention, in order to develop a clinic dedicated to the subject, in which the disease will not be forgotten or despised, but considered part of the experiences inherent to its existence.

- Aids, child nutrition and artificial

The primary child health focuses on the monitoring of child growth and development, encourage breastfeeding, infant feeding guidance, immunization, prevention of accidents and attention to childhood illness,
health practices considered to provide good conditions health in childhood.

Usually, the child and family contact the health system and require diverse health practices. Regardless of their fragility or damage requires professional attention in the face of the disease process and care.

When HIV / AIDS is inserted in this context of health and illness, the relationships established between the family and the child exposed to HIV are linked to existential issues that permeate the living of each and their way of being in the world and being-with-the-other. His experiences of being in the world are modified to (con) living with the HIV epidemic; relations with tu-child gain space, and highlight its significance in there. Being familiar unveils meanings related to changes and existential difficulties, the fact of not seeing the child as different because of their indeterminacy serological and care experienced in being-with-the-other in the world.

For the family of a child vertically exposed to HIV, experiences and experiences caused changes in his existentialism. These are described by changes in regard to practical situations, such as the upgrading of their day-to-day.

In discussing these health care within the family, the mother figure of the woman as the primary caregiver urge almost like consensus. Depending several authors point out, care as assignment of women is a worldwide phenomenon. Wives and daughters are the most frequent caregivers, daughters and sisters the least frequent. Therefore, caution is almost synonymous with women. In general, studies exploring little care offered by other members. In childhood diseases, it is emphasized, extraordinarily, the role of mothers.

Uncover and understand the meanings acquired by these phenomena in the life of the mother caregiver is fundamental to nursing, in order to think and develop a care that is both humanistic, ethical, aesthetic and supportive, especially when it comes to a stigmatizing disease, and yet, no cure, such as HIV / AIDS.

In everyday life, the mother hit by HIV / AIDS also shows up in the ambiguity. This way of being is evident when “everything seems to have been understood and discussed authentically captured when deep down it was not. Or it seems that when it was not, at bottom, already.” This is expressed when the woman states that want to breastfeeding, but not breastfeeding, although not understand exactly why it should not. Therefore, there is a perceived lack of communication between mother and HIV positive professional assistance provider. This is reflected in a follow unsuitable recommendations of the Ministry of Health for these cases, which are presented to often without considering the context in which the individual belongs, their perceptions of what was asked and his feelings concerning what is experiencing.

Many women find themselves HIV positive during pregnancy or childbirth, very delicate moments in the life of any woman. Weakened by the diagnosis, HIV positive mothers need to change in your daily life, and experience unexpected situations for which they were unprepared. They need to take care of themselves and each other - the son, who also has a risk of being infected. Moreover, to maintain secrecy about his diagnosis before family and friends, these women may feel alone and without direction.

As soon as one believes, for routine care, urgent care become possible one that values human relationships and interaction between professional and infected woman, in particular, given the impossibility of breastfeeding.

In general, health professionals are concerned about good health practices through techniques, ie, with the technological achievement of good results. Getting good results is essential, but along with technical success, must be printed in attitudes comprehensive care process, walking to construct new understandings of the situations faced by mothers.

With the increase in cases of HIV-infected women created a new type of audience that demands attention from health professionals. However, what is observed is that often the public is not being built by professionals routines guidance on the use of infant formula and food complementary.

This lack of guidance may generate as a result, many errors as to the type and amounts of food offered. These effects contribute to an inadequate intake of nutrients, which can interfere with the child's growth due.

An inadequate feeding practices in both ros primei years of life, especially among disadvantaged populations, is strongly associated with increased morbidity, represented by infectious diseases, malnutrition and micronutrient deficiencies, particularly iron, zinc and vitamin A.

It is necessary nursing professionals modify their repertoire of guidelines for the
expansion of nursing care. It is up to them to create strategies to approach the reality of these mothers, assessing what difficulties the mother / family is having to effective child care.

Integrating practical knowledge and technical knowledge is trying to work with the autonomy of individuals as creative powers, it also make sense to allow people to meet and transit through experiences that put them in positions of solution, not to be confused, to feel safe, to staying connected. Thus, they could compose himself to the situation and go on living.

CONCLUSION

The present study spoke about nursing care with HIV between mother and son, concerning artificial nutrition. Undeniably, assistance and health education should be governed by basic and philosophical aspects of human care, so if you enable more effective outcomes for the practice of mother’s care to children born exposed to the virus.

With the reflections developed during the study, purposed to contribute significantly to the change of posture professionals who choose to care for purely technical. It is recommended, extraordinarily, a humanized, holistic, guided by ethics, responsibility and respect for others.

For children vulnerable to maternal-infant transmission is fundamental awareness of mothers in care practices in the face of physical, social and subjective inherent to being infected with HIV.

The reality is still very deficient assistance, in which the mothers of these children do not receive appropriate information professionals who care for them.

It is necessary to expand systematic interventions on health care specific to minimize vertical transmission (VT) and encourage self-care by mothers living with HIV directed to their children. Moreover, it is imperative to expand the dissemination of training for multidisciplinary teams that embasarão their practices, and thus, if put into practice the guidelines of the Ministry of Health regarding the nutrition of infants exposed to HIV.

It is expected that the proposed questions encourage other health professionals to develop research with the mother and son in the presence of HIV by humanistic and philosophical context.

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