

Review Article

Training of the Nursing in Health of Workers Based on the Perspective of the Holism of Fritjof Capra

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ABSTRACT

Introduction: The nurse in occupational health has been gaining more space in organizations, assuming an increasingly important role worth mentioning. That professional contributes to the employee's quality of life, guiding and preventing accidents in the workplace. Therefore, the concern with the formation of nursing professionals arises.

Objective: To discuss the nurse's formation given the changes in the area of health care and occupational safety, in a perspective of changes in the labor market.

Method: Reflexive study, supported by the Holism

paradigm of Fritjof Capra.

Conclusion: Regarding occupational health, there is still much to change to meet the political and market needs. Regarding the nursing training process in the occupational health perspective, holism of Fritjof applied to nursing education in occupational health transfigures as benefit to build a pedagogical approach valued by a paradigm that improves the training and practice work process in the area of occupational nursing.

Keywords: Nursing education; Occupational Health; Professional practice

Introduction

The work is an important value in society, as well as a striking factor in the formation and transformation of the individual, exerting considerable influence on the motivation of men and also on their satisfaction and productivity [1].

On the other hand, the complexity of the world of work can trigger, according to the conditions of the working environment, workers' disease processes. The risks to workers' health (WH) permeate the physical, chemical, biological, ergonomic and psychological instances because of the interaction of that complex subject and his/her work [2].

In Brazil, legislation on health and work in companies was only regulated in the 1970s, establishing the mandatory development of actions related to occupational safety and medicine, through the creation of specialized services in the area. As for the legislation concerning the development of actions related to health and work in the Public Health System was only implemented in the 90s, after the creation of the Unified Health System – SUS [3].

From the realization that the work environment can bring harm to its workers, affecting the great productive mass of a country, a mobilization worldwide fighting for better working conditions begins, proposing that risks to workers' health are minimized, ensuring a healthy manpower that does not harm the capital.

From those changes, it becomes evident the need for education of the relationship between work and health-disease process in health professional training courses, since the reality of the area of occupational nursing shows the unpreparedness of nursing professionals with inchoate publications about occupational nursing and health [3].

The design of the holistic paradigm emerges from a crisis of the Cartesian-Newtonian paradigm, which postulates the rationality, objectivity and quantification as the only means of attaining knowledge. That paradigm forces a new debate within the various sciences and promotes new construction and attitudes. It forces a systemic view and a transdisciplinary approach [4].

Health professionals trained within that vision of the whole will resize their practices and relationships with their clients and shall become responsible for the balance of individuals and companies [5,6]. A new way of observing arises from that resizing.

The changes proposed by the legislation regarding the actions of care to occupational health followed the Brazilian democratic movement from the health reform process, which began in the 1980s and especially the creation of the Federal Constitution. Later, with the institution of SUS through the Health Organic Law of 1990 (Law 8,080/90), one obtained the basis of the ideas of public policy [7].

In 1998, two decrees were edited in order to ensure workers' health. The first approved the Normative Instruction of Workers' Health Surveillance [5] and the second established procedures to guide and implement actions and services of Occupational Health in SUS [8].

In 2004, there is the creation of the National Policy on Occupational Safety and Health - PNSST (*Política Nacional de Segurança e Saúde do Trabalhador* in Portuguese), in order to ensure the work execution in conditions that contribute to improve quality of life, personal and social fulfilment of workers and without harming their health [9].

Among the strategies listed by PNSST, there is the search for the inclusion of disciplines addressing the topic Occupational Health and Safety (OHS), according to the interests of policy, in the curriculum of higher education, especially in health, engineering and management careers [9].

For the development of actions in OSH, one expects that graduate courses in health offer disciplines in the area, covering mainly: health promotion and surveillance, disease prevention, care and rehabilitation in various social spaces where the actions of care to workers' health occur [9,10].

It is noteworthy, to this day, "occupational health" means "a set of activities that intends to, through epidemiological and health surveillances, to promote and protect the workers' health, as well as aims at the recovery and rehabilitation of the health of workers subject to the risks and hazards arising from the working conditions" [11].

When assessing the current situation, one observes that, despite the great advances in the health policies field, in practice, that care is still developing. It is possible to daily observe the exposure of workers to several risky and unhealthy conditions in labor activity. The situation gets worse especially if one seeks health care, which is fragmented and can rarely support the worker.

Given that reality, in 2006, the pact for life arises - a compromise between the SUS managers around priorities that influence the health status of the population. Therefore, seven priorities were listed, of which there is the strengthening of attention to workers' health to be achieved through the expansion of the integral care network to OH [12].

When we talk about OH, it is necessary to recognize that

those workers belong to the economically active population in Brazil, and, according to the Brazilian Institute of Geography and Statistics - IBGE in its National Research by Household Sample 2001/2009 they represented 62.1% of the entire population. Therefore, we are talking about a policy which aims at offering full support to the health of over half of the population [13].

By understanding that reality, there comes to light the question of how to set up the training of health professionals, especially nursing, to deal with that demand.

The choice of the topic of nurse training in the perspective of holism discusses the importance of the changes in the area of health care and worker safety in the perspective of changes in the labor market based on the principles of Fritjof Capra permeating the role of nurses in the area of Health and worker health education. Occupational Health in the context of the Unified Health System - SUS

The Nurse in the Worker's Health Care

Nurse, as well as other health professionals, should have, in their daily practice, a watchful eye to issues regarding workers' health for two reasons: Firstly, they understand regulated actions in several national policies that guide health actions; and secondly, the nurse, as a natural manager of health actions, is responsible for guiding the team regarding health promotion and protection in order to protect it.

However, it does not happen in practice. Professionals concerned with that issue are only those who focus their practice on it, or because they have specialization in the area.

Most of nursing professionals work in health care, in hospitals, clinics and basic health units, and they ought to act in accordance with national policies, being able to act before the attention to workers.

The reality of the unpreparedness of the nursing staff related to theme is evidenced by analyzing publications on occupational nursing and health, in which the scientific production is weak and is not able to give enough information to understand various issues, mainly in education, basic object of this study [3].

The nursing's action in the area of care to worker's health is required since the National Health Policy expects nurses to have a specialized formation [9]. Nurses, doctors and engineers are the main professionals responsible for the implementation of worker's safety actions, especially in the implementation of Regulatory Standard 09 (NR09) - Program for Prevention of Environmental Risks (PPRA) [14].

Finally, nurses need to hold specific knowledge to protect the health of workers and to coordinate with other government agencies to better subsidize it. They should be promoting agents and health advocates for everyone, here mainly addressed as workers, characterizing them professionals committed to the profession, as it incorporates the knowledge from academia to the practical reality, always seeking to establish a constant link with that, in order to improve their practical knowledge to benefit the community.

Education in Occupational Health

National curriculum guidelines for undergraduate course in nursing aims to provide the professional knowledge required for the performance of various skills and specific abilities, such as recognizing the work relations and their influence on health. They should ensure the professional to act in an integrated and continuous way with other instances of the health system, being able to think critically, to analyze the problems of society and to seek solutions to them [11].

The main changes in nursing education occurred in response to social and political changes that resulted in the Health Reform in the 80s. There were evidenced changes questioning the need to meet the demand of the population by health professionals committed to redefining the training policy, as well as the nursing work [15,16].

Regarding attention to worker's health, the development of educational activities includes general aspects of technical analysis and recognition programs [2]. One questions, however, the number of hours offered to the theme, as well as its coordination with other areas of education. Workers' health theme entered into the curricula not long time ago, according to the institutional menus, pointing to content related to work. Nevertheless, although there are sub-areas in the nursing curriculum alluding to the worker's health and the influence of the work world on people's health-disease process, there is a distinct impression that those contents are taught in an unsystematic way, being the student responsible for grasping and developing that theme by personal initiative [17].

It is noteworthy that the fragmentation of actions seen in education affects the care process in health, when the curriculum organization separates knowledge that necessarily needs to articulate. Thus, the education reflects on the practice, in which there is a reproduction of the split between the design and implementation of care [2].

In addition, the educational model practiced in Brazil for centuries leads us to think of a new approach to education by which man would only become able to cope with contemporary issues through learning. The holistic approach is a response to the global crisis, which can be translated as a time of fragmentation and atomization of the world [18].

The holism of Fritjof [6] proposes a universal reunion between the sciences, and between them and the wisdom traditions. Therefore, nursing education in its current Brazilian educational moment should create opportunities to search for a systemic view with transdisciplinary attitude, enabling an opportunity to build knowledge by constructing a critical awareness of the student, considering all aspects of teaching, both formal as the learning acquired and built in the context of the person, research or extension for learning [6,13].

The holism of Fritjof [6] applied to education in occupational health for nursing transfigures as a benefit to build a pedagogical approach valued by a paradigm that may mediate the relationship between professors and future professionals, and between them and the individuals who will be the subject of the care provided

by them. Therefore, the construction of a form of comprehensive education will be evident, which will produce a full, human and social professional practice, addressing the individual, groups and communities in their entirety, contributing to their process of citizenship and, consequently, improving the process of training and work practice in the area of occupational nursing.

Building a citizen policy for occupational health needs to emphasize the invention of an interdisciplinary social project that considers health throughout its network of conditions. It is necessary to form critical professionals, more committed to their social reality, taking the academic exercise to awaken the citizenship, overseeing a university with education as an instrument to exercise citizenship or as a condition for citizenship to exist [19].

In the meantime, the Law of Education Guidelines and Bases (LDB) brought new responsibilities to Institutions of Higher Education, professors, students and society because it allows the formation of different professional profiles from the vocation of each course/school, looking forward to better fitting the labor market. At that point, one understands the need for more explanation of the area of care to OH, since it is constantly arising and requires a skilled and capable workforce to operate in its market [14].

Conclusion

The occupational health training, as seen in its historical context, goes beyond the causal link of a group of risk factors present in the environment. Training in occupational health seeks to explain the health-disease process through the labor process, seeing that worker in a comprehensive manner.

The development of this study is important since it provides input to discuss contents on Occupational Health in vocational training spaces of nurse's and provides reflections on the need for inclusion of that issue in a systematic way in the nursing curriculum to light a paradigm that addresses the comprehensiveness. It is noteworthy it is an area that still lacks studies and reflective perceptions, especially on the academic space, which promotes personal development and is responsible for vocational training.

When inserting reflections on nursing education in a perspective of occupational health, the desire for innovative discussions that reflect directly in the labor field injects in the academic field. That is the main contribution of this research. Although enabling critical reflection, this study presents as a limitation the fact of working with theoretical concepts, which created a need for new productions aimed at the practical field about the proposed theme; however, it was not the object of this study.

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Submitted: April 19, 2017; Accepted: May 26, 2017; Published: June 02, 2017