

FREEDOM PRACTICES OF NURSING ACTIVISTS FOR THE CONSTRUCTION OF OTHER NURSING OBJECTIFICATION MODALITIES

PRÁTICAS DE LIBERDADE DE ENFERMEIRAS MILITANTES PELA CONSTRUÇÃO DE OUTRAS MODALIDADES DE OBJETIVAÇÃO DA ENFERMAGEM

PRÁCTICAS DE LIBERTAD DE ENFERMERAS MILITANTES POR LA CONSTRUCCIÓN DE OTRAS MODALIDADES DE OBJETIVACIÓN DE LA ENFERMERÍA

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Objective: analyze freedom practices of nursing activists. **Method:** historical research, based on the oral history method with a qualitative approach, involving 11 nurses who have campaigned/campaign for professional issues since the 1980's in the state of Bahia, Brazil. The data were collected in semistructured interviews, organized in n-vivo 10 software and analyzed based on dialectical hermeneutics. **Results:** education and resistance possibilities were identified in the practices of involvement with the world. **Conclusion:** the freedom practices generate activism/activities, with a notion of double intentionality that by itself has a dialectical nature.

Descriptors: Nursing. Policy. Leadership. History of Nursing. Health Attitudes. Practice.

Objetivo: analisar práticas de liberdade de enfermeiras militantes. Método: pesquisa histórica, baseada no método de história oral com abordagem qualitativa, realizada com 11 enfermeiras que militaram/militam por questões profissionais desde a década de 1980 no estado da Bahia, Brasil. Os dados coletados em entrevistas semiestruturadas foram organizados no software n-vivo 10 e analisados com base na hermenêutica dialética. Resultados: identificadas possibilidades formativas e de resistência nas práticas de implicação com o mundo. Conclusão: as práticas de

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liberdade são geradoras de militância/militantes, havendo uma noção de dupla intencionalidade, que representa caráter dialético em si.

Descritores: Enfermagem. Política. Liderança. História da Enfermagem. Atitudes e prática em saúde.

Objetivo: analizar prácticas de libertad de enfermeras militantes. Método: investigación histórica, basada en el método de historia oral con aproximación cualitativa, desarrollada con 11 enfermeras que militaron/militan por cuestiones profesionales desde la década de 1980 en el estado de Bahía, Brasil. Los datos recolectados en entrevistas semiestructuradas fueron organizados en el software n-vivo 10 y analizados con base en la hermenéutica dialéctica. Resultados: identificadas posibilidades formativas y de resistencia en las prácticas de implicación con el mundo. Conclusión: las prácticas de libertad generan militancia/militantes, con una noción de doble intencionalidad, que por sí mismo representa carácter dialéctico.

Descriptor: Enfermería. Política. Liderazgo. Historia de la Enfermería. Actitudes y Práctica en Salud.

Introduction

In the area of nursing, political activism is conceived as an essential aspect to walk the path of change, through an integral, committed and political and socially ethical view on the human being and society. Accommodation and exaggerated acceptance without questioning should be avoided, which often turns the profession into a repetitive and uncreative practice⁽¹⁾. Nevertheless, it was identified that Nursing education remains predominantly based on the clinical model, guided by a physician-center conception of health/disease, focused on healing, biological, highly specialized, fragmented, thus impacting the weaknesses in the political dimension of education⁽²⁾.

This is due to historical issues expressed in the professionalization of Nursing, which is born linked to medical knowledge and institutionalized care. In addition, what the history is concerned, this area is bounded by the technical and social division of labor, with conflicting issues emerging daily between doctors and nurses, nurses and patients, nurses and technicians or auxiliary nurses and technicians or between auxiliary nurses⁽³⁾.

Another consequence of the aspects of the professional origins is the fragility of the political dimension, expressed in the daily problems with the humanization of Nursing/Health care, reflecting in the need to recognize the ethical-political dimension of this process that presents

central aspects: caring to know, caring to confront and caring to emancipate. In this context, the following doubt arises: How can we advise health service users to emancipate themselves if we are unable to understand the political dimension of the nursing work process⁽⁴⁾?

Three studies are added to this problematization: the first deals with the history of nursing and considers that the education moved to support the centrality of the hospital and biomedical power, as well as to enable practices of submission and exploitation of work⁽¹⁾; the other study states that, among nurses, there is a tradition of obedient practice, initially required due to religious and gender issues and in the stereotype of a competent professional, showing that obedience can be taught, learned and cultivated in nursing⁽⁵⁾; Finally, another research identifies nurses' restricted view of their political role, their incipient political participation, the low valuation of this form of participation, even when they occupy different, relevant and political-technical spaces⁽⁶⁾.

In this context, this study seeks to analyze practices of freedom of nursing activists. In other words, it seeks to understand how nurses educated in predominantly hegemonic models break with modes of domination and what are the possibilities of freedom practices guided by a Foucaultian conception and by dialectical hermeneutics.

At this point, the conception of practices of freedom that are anticolonial is fit, as they seek to dissolve identities, pacts and models established in society. In this movement, history is full of shocks, deviations, destruction, masks, connections that are like lightning in the dark sky, that is, there is no stability in the relations of domination and, at any moment, small or large “rays” are produced that crisscross the sky⁽⁷⁾.

In another aspect, when considering the justification for this study and the research carried out on this subject in the collection of the Virtual Health Library (VHL), by entering the search word “Militância Política”, 53 studies were found; when inserting the term “Enfermagem”, one research was detected related to the student movement; when the terms “enfermeiro” and “enfermeira” were added, no academic production was found. The same was true when the terms “engajamento político e ativismo” were sought. When searching the term “Política”, in total, 222,810 studies were identified. With the terms “Política e Enfermagem”, 13,367 scientific productions were observed and, when associated with the word “Enfermeira”, 3,954 studies. With the term “Enfermeiro”, this figure dropped to 2,634.

In the gray literature available in the Capes Journal Portal, 74 studies were found when using the search term “Militância Política” but, when the terms “Enfermagem”, “enfermeiro” and “enfermeira” were incorporated, no research was detected. Using the word “Política”, 10,090 papers were identified. With the terms “Política” and “Enfermagem”, 144 studies could be observed and, when it was associated with the word “Enfermeira”, there were 13 studies. The search using the term “Enfermeiro” resulted in 43 scientific productions.

These findings reveal the dimension of the political theme in health and particularly in Nursing, with a significant number of studies. On the other hand, they express a knowledge gap, when one thinks of engagement, militancy and activism in the profession.

Finally, it should be mentioned that this study is a product of a doctoral dissertation that was based on the theoretical reference framework of

Michel Foucault, a philosopher who aimed to understand the subject in all of its dimensions. The study objective is to analyze the freedom practices of nursing activists.

Method

This is a qualitative study, based on the Oral History method, which is characterized as a systematic approach through collection, organization and critical evaluation of data related to past events. Some steps are considered essential to the production of a historical work: definition, justification and delimitation of the theme; research objectives; theoretical framework and hypotheses; data collection sources; criticism and validation of data; and data analysis and interpretation⁽⁸⁾.

The oral history method permits establishing relationships of higher quality and greater depth between the researcher and the study participants. In this research, we aim to reveal the narratives, which are configured as biographical, representing a possibility for discursive analysis⁽⁹⁾.

In this study, the semi-structured interview and snowball techniques were used to identify and have as participants in the study nurses who were presidents of ABEn and the Union of Nurses of the State of Bahia (SEEB), as well as nurses who did not hold positions of Presidents of ABEn or the Union, but served or are serving as socially acknowledged activists.

From the operational point of view, the data collection took place in two phases:

a) in the first, to indicate the “seeds”, based on a single inclusion criterion: the exercise of a presidential mandate in the Brazilian Nursing Association (ABEn) - Bahia Section and/or in the Union of Nurses of the State of Bahia (SEEB), from the 1980s until 2015;

b) in the second phases, to indicate the daughters/sons of the “seeds” by means of some pre-established criteria: to be a nurse; militating for political reasons specific to the profession, as well as for the valuation, visibility, respect and professional acknowledgement, for a period of at least one year, in a systematic, regular and

socially acknowledged manner, covering the period from the 1980s until 2015; and to take charge of and participate in social and public movements and mobilizations in nursing.

As an exclusion criterion, the limit of five contact attempts to schedule the interviews was established; after this diligence, the activist was excluded from the sample, which occurred with two people. In the others, the data collection was suspended at the moment when the responses were saturated.

The interval was from the 1980s to 2015, due to the effervescence of the social movements at that time and in the belief that this moment could contribute to the expression of political militancy. The spatial segment was due to the existence of records of the expression of the political movement of nurses from Bahia in the Brazilian and international scenario.

The study scenario is the state of Bahia, located in the Northeast of Brazil, with an area of 564,733.081 km², the fifth largest in the Brazilian territory. The estimated population in 2015 corresponds to more than 15 million inhabitants⁽¹⁰⁾. According to the Regional Nursing Council, section Bahia, there were 17 thousand auxiliary nurses, about 60 thousand nursing technicians and approximately 27 thousand baccalaureate nurses, totaling more than 104 thousand professionals in the area⁽¹¹⁾.

Regarding the data collection, after telephone contact and prior appointment, the interviews took place individually in a private room, conducted by a trained and qualified professional, lasting approximately 3 hours. Data were collected from July to December 2015. An interview script divided into four blocks was used: sociodemographic issues; political activism in nursing, correlating it to the social movements of the investigated period; election process of the formal nursing representatives; and life history of the activist subject. The interviews were recorded and later fully transcribed.

Ten female nurses and one male nurse participated in the research, however, due to gender issues, the female term was adopted in Portuguese. To identify the statements, the

expression Wind Rose (*Rosa dos Ventos* in Portuguese) was used, taking poetic license to the song by Chico Buarque de Holanda, followed by the Arabic number corresponding to the order of the interviews.

To analyze the data, the method of Dialectical Hermeneutics based on Comprehensive Sociology was used, which contains two key aspects: the theory of experience and the theory of reconstruction. Based on the experience of the political nursing activists, the objective was to identify the practices of freedom towards other modalities of objectification, to counteract the logic of subjection and subalternity existing in the profession⁽¹²⁾.

From the operational viewpoint, the analysis of the collected data in the interviews involved the following stages:

- a) level of fundamental determinations – exploratory research stage;
- b) data ordering – systematization of all data collected;
- c) data classification – in which one needs to understand that these do not exist by themselves, but are constructed through the practice of questioning them, based on the theoretical foundations;
- d) final analysis – when the articulation between the collected data and the theoretical-philosophical frameworks of the research is established⁽¹²⁾.

In the data ordering stage, N vivo 10 for Windows software was used to organize excerpts from the statements by units of meaning. This software is widely used in qualitative health research, including in other areas, such as anthropology, and in different countries, including Australia and the United Kingdom.

After this stage, the confrontation between the theoretical-philosophical framework consulted and the possibilities appointed in N vivo permitted the construction of the analysis category – The freedom practices of nurses for the construction of other nursing objectification modalities – and its respective subcategories: Educational possibility, Possibility in resistance

and Possibility in involvement practices with the world.

In the study, through the pre-analysis of the data, the objectification mode of the freedom practices revealed in the activists' daily reality was adopted, which made it fundamental to discuss conceptual modules – freedom and power – which are considered key in Foucault's conception.

The study received approval from the Research Ethics Committee at *Universidade Federal da Bahia*, School of Nursing, under CAEE

protocol 28775614.2.0000.5531, on May 27th 2014. The research process complied with the ethical premises recommended in a resolution on research ethics.

Results

After the analysis of convergences, divergences, complementarities and differences in the data, three possibilities were identified in the freedom practices: educational, resistance and practices of involvement with the world (Chart 1).

Chart 1 – Freedom practices of nurses for the construction of other nursing objectification modalities. Salvador, Bahia, Brazil. (continued)

Corpus	Synthesis
<p>[...] <i>but I used to go to the square to see everything happen [...] when I was nine, ten years old [...] I remember Wali Salomão who [...] used to climb on the square bench or cited his texts or recited poetry [...] almost all of the college years, I belonged to an amateur theater group [...] I did not limit myself to coming to school. So I had contact with people from different places and the theater group was a group to do politics. We used to create the plays, the police censored one of our plays. We used to create the texts and present them on the outskirts of Salvador and the interior of Bahia with the student union [...] then I joined the movie club [...] I always read a lot, of course that must have helped, and I read good books. I read literature, I read anything with a striking title I could lay my hands on [...] (Wind Rose 6).</i></p>	<p>Educational Possibility</p>
<p>[...] <i>when you participate in an international congress, as I had the opportunity to participate in, you see that the reality of 170 countries is totally different from one another and that Brazil, in terms of the relation with the United States, we are much more advanced in terms of criticism and political positions than the American nurses; they developed technical skills, the thing of care and so. To the extent that the coordinator of this project, which I mentored, she said: "Discussing with Latin America is more difficult than with European and African countries. You are very critical." That's really true! (Wind Rose 10).</i></p>	
<p>[...] <i>I keep on repeating that, for me, the main education was ABEn. That's where I saw the problems of daily nursing. There I could see the greatness of Nursing itself from the perspective of what it can and should do for the community [...] I certainly think that the wealth of learning, two things, for me, were fundamental in terms of my education, as soon as I started to study gender and to better understand life in society and the activism of the Brazilian Nursing Association from that perspective [...] (Wind Rose 11).</i></p>	

Chart 1 – Freedom practices of nurses for the construction of other nursing objectification modalities. Salvador, Bahia, Brazil. (continued)

Corpus	Synthesis
<p><i>It was a rupture with the Catholic religion [...] and the moment when I understood the role of the Catholic church [...] when I saw that those premises of that religion were very bad things and when I wanted to understand why I had dolls and why that child there next door had none, why I used to live in a house, went to school, had food, had clothes [...] I identify, that day, I said I don't want to anymore, I want something else, I recall telling to myself, I don't want to have anything to do with religion anymore, because it's something that sears, oppresses me [...] (Wind Rose 6).</i></p>	<p>Resistance possibility</p>
<p><i>[...] [talks about the invitation for a new job] the city had no pavement, no light, you couldn't go out, you couldn't even read, because at night it was candlelight. I said: Ah, I didn't graduate for this, I don't like the area, I don't like the area, I went because the salary was higher than all of those existing salaries, I did the interview, they accepted and I went there, from my class about five went, all of them stayed, except me. (Wind Rose 1).</i></p>	
<p><i>[...] activist and, then, I joined ABEn and, together with an activist group of ABEn, we started to discuss the need to change the entity's format in terms of its national congresses, which were driven by laboratories. The elections, without any participation, and the conduction of discussions without any democracy and transparency. There was a group of sympathizers who also participated, who came from Bahia, independent, without party membership. Thus, we created a struggle within the unions, which later, when I participated in the struggles in Bahia, made me run for the 1984 elections, which did not take office and I became deputy in the 1986 elections and, finally, in 1989 and 1992, I took office as the chairwoman [...] (Wind Rose 10).</i></p>	

Chart 1 – Freedom practices of nurses for the construction of other nursing objectification modalities. Salvador, Bahia, Brazil. (conclusion)

Corpus	Synthesis
<p>[...] <i>ah, because the authority only has to supervise and regulate professional practice?! I've got such a machine, that size at hand I am a citizen, a concerned citizen with rights, with political and social concerns, how am I going to a place to merely talk about our ethics code [...] I am going there to talk about the Unified Health System, law, access, political participation, political activism, the conjuncture, you see? About the situation of nursing why it's in this situation today, about people's different alternatives for engagement, you see? I cannot have this kind of machine and I won't do as the others do, use it for my own profit, but I'll put it at the service of, so, like, I have to put it at the service of society, and mainly of nursing, this entire structure we have here inside the Council [...]</i> (Wind Rose 3).</p>	<p>Possibility in practices of involvement with the world</p>
<p>[...] <i>my mother[very] religious, that's what I wanted to say. Well, she made a promise and she used to distribute baskets to the poor. So I was accustomed to seeing and doing that, so, at the age of 14, I started working on the hill, it used to be called Chame-Chame and Calabar, it was a hill with a very poor population. Climbing up and down the hill, every Saturday to assist and catechize, I used to play with the children, take medicine to the people. We made a group of young people who not only worked on the hill, but used to play theater in public schools and join youth to watch speakers committed to our ideas. [...] how the differences marked us, marked a lot, marked my life a lot, understanding that there are people suffering, I recall a woman living in a hut with three children, she had spend the entire night with her back in the hole because it was raining so that her children wouldn't get wet, so, many life histories marked me.</i> (Wind Rose 10).</p>	
<p>[...] <i>when I thought of taking nursing I was already thinking of working in the woman's area really. I always thought obstetrics is a way and that I would like to work with women. Now I see much more like, an engagement, being in the struggle with the other, with the other who does not have the means. There's a lot of my family history [...] so I already came with a mobilization in terms of the work. With the people and with seeking, for the people to be less excluded, to have more access. Something I was brought up with, as a person, and that's why I engaged in that kind of project really [...] The other experience, like, of devising a new care model, it also emerged for me, when I was still a nursing student, when we took the subject rural health, the teacher, she had a project funded by the Kellogg Foundation, which was in the city of Cruz das Almas, where she elaborated a first proposal to integrate health actions.</i> (Wind Rose 11).</p>	

Source: Created by the authors.

Discussion

Initially, the educational possibility for practices of freedom will be discussed. The statements point to educational spaces and experiences that can contribute to political activism, ranging from the intrinsic characteristics of the subjects to their experiences with groups.

Characteristic aspects of the subject, such as love for reading, poetry, theater and cinema, can favor the development of a militant subject. Participation in social movements also reveals an educational possibility for the militant subject, in particular: Health Reform, implementation of the Unified Health System and the Participation Movement. The statements also highlight the

development of activities representative of groups and the understanding of vulnerable groups as devices that generate political militancy.

Despite the possibilities underlined, however, the efforts of the regulatory organizations of society to prevent the practices of freedom should be appointed. In this sense, naturally, a principle of coercion in education is established through the creation of a standardized education. There is an effort to organize a medical staff and a hospital staff to run general health standards, such as surveillance; regulation is one of the instruments of power⁽¹³⁾. The goal is a homogeneous social body, but which plays a role of classification, hierarchization and distribution of places. In a certain sense, the power of regulation forces towards homogeneity, individualizes, allowing the measuring of deviations, determination of levels, fixation of specialties and making the differences useful, adjusting them to each other. The power of the standard works easily in a formal equality system because, according to a homogeneity that is the rule, it introduces the whole range of individual differences as a useful imperative and result of a measure.

Another issue was political participation during the effervescent decade of 1960. According to some studies, power is found in positive mechanisms, producers of knowledge, multipliers of discourse, inducers of pleasure and generators of further power⁽¹⁴⁾. According to the Foucaultian perspective, the exercise of power is not simply a relationship between individual and collective partners; it is a mode of action of some over others. Power only exists in the act. What defines the relation of power is a mode of action that does not act directly and immediately upon others, but acts upon its own action. Power is only exercised over free subjects⁽¹⁵⁾.

As the starting point of modern knowledge, the individual is conceived as an active subject, the author of his own being, destined for revolution, freedom or the conquest of nature. It is within a project that this being must be realized, that the Man or the Woman is revealed as a subjects, building him/herself. It is within the project that the obstacles to the achievement

of woman and man should be analyzed, like so many figures of their finitude: alienation, death, the unconscious⁽¹⁶⁾.

Another aspect highlighted in the list of statements was the report of Wind Rose 11, when appointing the dimension of her practice in ABEN and her educational representation as a woman and a nurse. In this respect, the assertion that the militants constitute organizational and sociability experiences is reinforced. Therefore, education needs to be rethought as an instrument of awareness of the future nursing worker, as well as starting from the recognition that awareness is not spontaneous and not only derives from reading or reflections, but springs from the heart of the struggles that fundamentally occur in the social structure and are made feasible within the political parties, workers' organizations and the school⁽¹⁷⁾.

In a study that deals with the education of the nurse, however, the characteristics of the overvaluation of the posture and the moral to the detriment of the technical knowledge are reinforced and that this aspect contributed to the devaluation, as being a profession of women and not possessing an object of knowledge⁽¹⁸⁾.

Another subcategory identified in the discursive statements was the possibility of resistance, exemplified by the militants, both in relation to the Catholic religion, stereotypes and social norms, to the capital, in the student as well as in the professional field and specifically in the Brazilian Nursing Association.

In the conceptual sense, the term resistance, in Foucault's conception, expresses a temporary externality to the system of knowledge/power; it occurs where there is power, because it is inseparable from power relations. It turns out that it establishes relations of power exactly when it is the result, being the possibility of opening spaces of struggle and of managing possibilities of transformation everywhere⁽¹⁹⁾..

Specifically when considering the Participation Movement (PM), which occurred between 1980 and 1990, it was identified that this movement made it possible for nurses to reflect on their work, their organization and their participation in

the struggle for the country's redemocratization and the right to health⁽²⁰⁾. This event, despite occurring in the national ABEn, was the result of the militant movement in the state of Bahia, as reported by Wind Rose 10, when it states that Bahia, Santa Catarina and Rio Grande do Norte took a leading role in the Participation Movement. The PM is a resistance movement. Resistance of the equipment of the entity in favor of the pharmaceutical and hospital industry, which generated the possibility of thinking and executing a technological exposition for Nursing. Therefore, it is addressed in this study.

In this sense, according to Foucault⁽²¹⁾, one must know how to recognize the events of history, its shocks, its surprises, its vacillating victories, its barely digested defeats, which account for atavisms and heredities. In the same way, one must know how to diagnose the diseases of the body, the states of weakness and energy, their cracks and their resistance to evaluate what is a philosophical discourse; and the PM was a movement that represented an attempt to liberate the nurses before an Association that did not represent them.

Foucault's explanation, however, does not confront the substance of resistance with a substance of power. It simply says that, there being a power relationship, there is a possibility of resistance. No one is ever imprisoned by power; one can always modify domination under certain conditions and according to a precise strategy.

Also in this subcategory, of the possibility of resistance, three resistance histories are present in the statements: one that deals with resistance to the Catholic religion; another concerning the precariousness of labor and the capitalist system; and, finally, the occurrence of centralizing and undemocratic practices, be it in the School or in ABEn.

In the last subcategory, the possibility of freedom/liberation was identified in the practices of involvement with the world, as these actions are also representations of power relations and modifiers/modified by the subject of the action, in the case of the study being women who

militate in the professional field. The findings are about the constitution of activist women through contact with differences, pointing to the sense of being in the struggle with the other and in the actions of contributing to a better world and a better Nursing.

The limitations of this study are the few published works to be used as theoretical basis, as well as the dominant positivist and biologicistic paradigms that entail repercussions in the difficulty to validate a historical research, elaborated with discursive statements of nurses who made the history of nursing and collective health in the state of Bahia, Brazil.

Conclusion

In analyzing the freedom practices of nurses to construct other modes of objectifying nursing, it is concluded that acts of implication with the world, society and nursing are generated by/generate activism/activists, keeping a notion of double intentionality, which represents a dialectical nature in itself.

Considering the practices of freedom as a possibility, recognizing the limits of the historical, economic and social processes and that these open a field for new power relations, which need to be controlled through themselves, the study points to the constitution of activist subjects through modes of objectification/subjectivation of nursing, of practices that have education, resistance and the practices of involvement with the world as the central axis.

Regarding the differences found in this analysis, it was identified that, despite the centrality of traditional pedagogy in nursing teaching, there are educational experiences in the School that collaborated with activist education. On the other hand, the concordance among the oral histories presented constitutes a horizontal axis in the processes of sociability and contact with differences and in democratic spaces. As a vertical cut, life histories are articulated with the University Reform, Health Reform, the country's democratization, the Unified Health System and the Participation Movement.

Collaborations:

1. conception, design, analysis and interpretation of data: Deybson Borba de Almeida, Gilberto Tadeu Reis da Silva, Genival Fernandes de Freitas and Igor Ferreira Borba de Almeida;

2. writing of the article and relevant critical review of the intellectual content: Isabel Cristina Kowal Olm Cunha and Simone Coelho Amestoy;

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