

Nursing and care - the multiplicity and plurality dimensions of the human in us

Mini Review

Since my first moments of professional training in nursing the dialogue about what the work and the profession of Nurse meant was through the understanding of the word care. In this perspective, nursing and care have become connected to the sense of continuously building the learning of nursing knowledge and the development of human self-knowledge of the power of production of care.¹

The horizons of the power of this connection evolved in the curricula of professional training in nursing, in the development of care technologies and in the societal mesh of the transformations that

the role of work reached in the development of the health professions. These forces contributed to the progressive dimensions of the multiplicity of health work and the plurality of human involvement in the complexities of nursing and caring.

Care and the center of the work processes in health, this condition of centrality permeates dialogic understandings of the objective and subjective relations that make it the work of caring for a unique experience among the people involved in the hands, empathy, culture, social organization and exercises of the interlocutions and walking of the interactions that involve the experiences of the practices of the care.²

In the dimensions of work and care the influences of the structure of the health system involve the organization and work processes. The care and work involved in the networks of care, services, technologies and human natures configure the dynamics of the production of care, whose influences have given different specificities and particularities the objective and subjective relations to the conflicts of care. The particularities of intrinsic and extrinsic singularities, the people who dialogue in caring relationships, deepen the dimensions of the multiplicity and plurality of the product of care, since the human dimension of care is imbricated to the elements of consciousness and reflections of each of us on our constructs of empathy, respect, ethics and self-understanding that guides us about the choices we made about the conditions that shaped us as a person.³

The improvement of the anthropology of nursing care and epistemology are potentials that are influenced by the quality of nursing professional training, health education for the self-management of care and the mutual competences of care developed in the social organization and cultural that will allow or not to apply the human attributes of ethics, empathy in the care for and among people in the social group. Dimensions of care are socially constructed throughout the human ecological movement and the development of the practice of interdisciplinary care in the training and improvement of the inheritances of technical-scientific development and of the actions of investigating, diagnosing and planning, organizing, coordinating interventions with potential for creation and understanding of nursing care a competence of empathy and solidarity.⁴

Care and nursing have multi-dimensional characteristics that no longer require the militarized hierarchical control that wrought

Volume 2 Issue 3 - 2018

Paula Raquel dos Santos

Department of Nursing in Public Health, University
Universidade do Estado do Rio de Janeiro, Brazil

Correspondence: Paula Raquel dos Santos, Department of Nursing in Public Health, University Universidade do Estado do Rio de Janeiro, Brazil, Tel 55(21)2868-8236
Email paularaquel.enf@gmail.com

Received: April 25, 2018 | **Published:** June 18, 2018

profession and nursing work through wars. The intelligence of the dimensions of multiplicity and plurality are therapeutic when they appropriate the knowledge and competence to identify conflicts, discuss them instead of neglecting them and dialogue with the strengths and weaknesses that compose them and thus find the necessary alternatives self-management and collective management of work. In the work of the nursing profession, the interrelationship and interlocution established throughout care are continually moving on the semantics and impacts between the empathic connections between the care system, the nursing system, the caregiver, the caregiver and the psychosocial aspects of the family and environment that integrate the microphysics of everyday life in the spaces that make up this integrity.

In these spaces of care the interaction dynamics can and should be considered in the elaboration of the plan of care for the diagnosis of the nurse, since this envelope may or may not enhance the presence of care to meet basic human needs specific to simple and complex that allow the improvement of the self-management in health in the social structures representative of the affective plots and biopsychosocial support of the people.⁵

The particular and socializable that make up the care require the dialogue of the improvement of the hands for the simple functions of the evolution of the modulations and eminence of the human in us. The epistemology and the improvement of care in the face of the contingencies of work activities, and the modulations of inadequacies and knowledge, find in the interactive dynamics of care the innate gregarious and mutual help that allow the extension and development of care work.

The multiplicity of care and the multifacts of the nursing profession extrapolate the rigid frames of the skills, skills, and abilities of the evolutionary historical transmission of nursing care and that serve to point us to the mutual improvement of caring and being cared for in health by the determination of the reciprocal interaction of the power of human labor and of the solidarity that are required by the dimensions of care. The solutions of the innovating technologies and the theories of caring bring us the reflection to dive in search of the compression of the scenarios, practices and multiple possibilities of we admire and of advancing through the increasing complexity of the collective evolution of the work in health. Care and nursing

are increased by the dimensions that make up the inter-subjective relationships of the power of human achievement and happiness that come from working in care.

To be a professional in nursing and a person who cares for and open up the transformation and awareness of the capacity to create and re-create dimensions of dialogue about the things that surround self-analysis and the interdependent flows of the social capitalist micro caution. The questions that are pertinent to the desires, wishes and relationships comprise the choices of the course of the evolution of the sense of human ecology and meanings of the orientations and interfaces of nursing care work.

Acknowledgments

None.

Conflict of interest

The author declares that there is no conflict of interest.

References

1. Aciole, S, Correia LM. *Curricular evaluation-reflections on the pedagogical process in the Faculty of Nursing of the State University of Rio de Janeiro-student look*. Rio de Janeiro: Warehouse of the letters graphic and publisher; 2013.
2. Antunes R. *The meanings of work: essay on affirmation and denial of work*. 6th ed. São Paulo: Boitempo Editorial; 2002.
3. Bauman Z. *Net Modernity*. Rio de Janeiro: Zahar; 2001.
4. Engels F. *The role of work in the transformation of monkey into man*. 4th ed. Rio de Janeiro, Global Publishing; 1990.
5. Franco, BT. Merhy EE. *Work, production of care and subjectivity in health: collected texts 1st ed*. São Paulo: Hucitec; 2013.