



Caring for Epistemic Bases in the 21st Century: Paradigms of Scientific Research

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Abstract

The general objective of this systematic review article was to describe the care of epistemic bases in the twenty-first century: paradigms of scientific research.

Method: The study used an in-depth literature review of the latest research related to the thematic axis of care-care-research in nursing, which included 23 publications in various databases, which went through a process of inclusion and exclusion criteria.

Results: The act of caring has evolved considerably, transforming into a multidimensional practice that goes beyond simple physical attention and is immersed in a deep understanding of the emotional and social needs of individuals. In this context, the epistemic bases that support care in the 21st century find their foundation in the paradigms of scientific research in nursing.

Conclusion: In the 21st century, nursing care is nourished by an epistemic foundation that recognizes the complexity and individuality of the health experience. Scientific research paradigms in nursing provide the conceptual framework to address care holistically, considering not only the physical, but also the emotional, social, and cultural aspects that influence people's health and well-being. This approach reflects the evolution of nursing towards a more inclusive and human-centred discipline.

Keywords: Caring; Care; Nursing; Epistemic Bases; Paradigm; Scientific Research

Introduction

Over time, the definition of nursing care has acquired greater depth in its definition, based on the performance of the professional role of nursing and the position in which the various paradigms in health fluctuate (we can cite the three key paradigms to understand the essence of life, which are the human being, health and disease, incorporating into our time two great paradigms that are immersed in the direction

and impact on nursing care that are the environment or environment, and the participation of other types of life coming from different celestial bodies).

In this panorama, despite the fact that the definitions of nursing care over time become more complex, giving greater breadth and comprehensiveness to nursing activities aimed at satisfying the needs of the patient, and being part of the team of nursing professionals that has been experiencing

the development of nursing care in the present century, I see myself in the situation of accepting that our professional role has grown, it has been strengthened as a discipline, we are encompassing greater positioning in the process of professional identity with the population in general, today we occupy administrative and management positions that in the past became utopian or unattainable, however, I invite reflection that on the road to professional fulfillment a dimension is weakened in the exercise of the As a profession, this being a situation from which we cannot be oblivious, I am talking about the dimension of warmth of nursing care.

Understanding the warmth of care according to Lagos Z, et al. [1] as a dimension of nursing care that responds to a set of attitudes developed by the nursing professional that allow the patient to feel safe, enhances their confidence, being synonymous with empathy and good treatment of the user, but only has to comply with routine clinical procedures [1].

Therefore, it is worth asking: At what time in the history of nursing care did care begin to be mechanized, leading to a progressive dehumanization? When do we allow the biopsychosocial approach to weaken in order to return to the biomedical approach in which even the human being as such was compared to the functioning of a machine? At what point did nursing paradigms and assumptions begin to be redefined from a globalized world immersed in the dehumanization of nursing care?

In order to analyze in a detailed way and to be able to argue the assertion under study, this bibliographic review aims to give an explanation or answer to these and other philosophical questions that determine the construct of the profession in its dimension of Care-Care, in which the need to study nursing care and its variabilities over time arises, taking into consideration that to date the greatest indicator of nursing care is the most important aspect of nursing care. The care provided to the patient responds to a large extent to the satisfaction of the users, however, it is necessary to start by understanding what nursing care is.

In this sense, it is important to start with a first recognition of the key variants in the definition of nursing care, from its beginnings with our pioneer Florence Nightingale, to the definition addressed by large health institutions today. Thus, nursing care is defined by Florence, N. cited by Rosales K [2] as the set of comprehensive care that must be addressed in the patient without underestimating the impact of the environment on their health [2].

On the other hand, the World Health Organization [3] refers to nursing care "It encompasses autonomous and collaborative care provided to people of all ages, families, groups and communities, sick or not, and in all circumstances.

It includes health promotion, disease prevention and care for the sick, disabled and terminally ill" [3].

In textual lines, we can appreciate how the definition of nursing care has effectively gained greater depth and degree of commitment in the role of the professional to be able to specify when providing care to the user, as well as the paradigms that are immersed in its realization, such as the definition of health that, according to Munoz R [4], rescues the analysis that was a dominant model from the eighteenth century until well delivered in the twentieth century which emphasized that to speak of health was to think of the individual as a "body" whose organism has rules of universal functioning, while health as one of the paradigms in essence of nursing care to date is defined by the World Health Organization [3] as Munoz R [4] "a state of complete physical, mental, and social well-being, and not merely the absence of infirmity or disease" [5].

It can be seen, then, that both definitions are somewhat complex to interpret in order to bet on the essence of nursing care: on the one hand, in the biomedical approach it inclines the professional to the dehumanization of care by not considering the individual from a comprehensive panorama in which internal and external factors are present to achieve the maintenance of their health.

On the other hand, the World Health Organization is committed to achieving the full health of the user under three highly complex dimensions (physical, psychological and social) without underestimating the presence of disease, however, it is worth reflecting to what extent these dimensions acquire an unattainable abstract level, then the following question could be analyzed: Could this conflict the goal in achieving user satisfaction in response to the nursing care that We could launch the following premise: in that case, nursing care will always be in search of something perhaps unattainable in the patient. However, we cannot underestimate the participation of external factors that add to these epistemological issues of the century such as job dissatisfaction, insufficient human resources, weak PHC system, etc.

So these questions could begin to answer the reality of nursing care for the present 21st century, they could be the origin of the dehumanization of care, however, it is necessary to see the panorama over time, in that time, the present review aims to carry out a bibliographic review of scientific articles and texts of interest that address the perception of nursing care from users, Likewise, how the paradigms that are immersed in nursing care are being addressed, as well as the positioning of science in its quantitative and qualitative paradigms, correctly addressed, contribute to making nursing care visible and enhancing our days.

Material and Methods

The review was carried out in accordance with theoretical principles by collecting information from various databases. Scientific sources on the network were consulted for information. Inclusion and exclusion criteria were considered as the time limit of publication from 2014 to 2023, as well as the type of literature and the impact factor of the studies. It also considers the remarkable epistemological contribution in response to the overall objective of each article under review. The article also meets the most recent version of the Vancouver-style criteria for the publication of scientific texts and ethical presumptions in research.

Results

There are sufficient data that were taken from scientific articles published in indexed journals and other representative studies of interest related to the approach to nursing care over time, an analysis that is based on studies of the last 5 years that have allowed to reinforce the introductory arguments that seek the full reflection of how nursing care must regain momentum so as not to be submerged in the mechanization of care that leads to the dehumanization of them, this scenario is largely reflected in the dissatisfaction of users.

In this sense, to position the current situation of nursing care from the perception of patients, from how new paradigms have been generated over time that have a great impact on care, from how nursing care is reflected at the intrahospital level and at the community level; In this sense, the following is a bibliographic review and argumentative analysis proposed:

Arroyo L [6] in his study had the general objective of determining the relationship between the quality of nursing care and the satisfaction of the oncology patient of the emergency department of the Eleazar Guzmán Barrón Nuevo Chimbote hospital. The final conclusion is that: there is a significant relationship between the quality of poor care and user dissatisfaction, and there is also low satisfaction with the warmth of nursing care [6].

Leiva F [7] in her study had the general objective of analyzing the discourses and practices of care in the nursing profession. The final conclusion is that: nursing care is between the subaltern, due to the fact that its theoretical and scientific discourse is subordinated to biomedical knowledge, and between reification, since its practices obey the economic requirements of the Colombian health system [7].

Soto P, et al. [8] in her study had the general objective of knowing health education as part of the role of nursing in their

professional work. The final conclusion is that: it is evident that health education is developed at a less important level from the point of view of training, which constitutes a threat because a basic tool for care could be lost, especially at the primary care level, where health education is fundamental for the change of health behaviors [8].

Dandicourt C [9] in her study had the general objective of describing the opportunities provided by nursing care in the community and its influence on the improvement of the health of the population. The final conclusion is that: nursing care in the community provides the opportunity to develop wide-ranging health actions that allow reaching a greater number of the population in the shortest possible time [9].

Escobar B, et al. [10] in their study had the general objective of analyzing the ethical aspects that influence nursing care, caused by the advancement of technology in health services. The final conclusion is that: an approach to care based on ethics implies that nurses consider human beings with respect and absolute dignity. Nursing must demonstrate humanized care in all the actions it performs, applying ethical knowledge, attitudes and values towards the person to be cared for [10].

Alvarado A, et al. [11] in his study had the general objective of analyzing the current scientific evidence regarding nutrition in the elderly, as well as identifying the most relevant aspects of it that should be taken into account by the nursing professional to provide an accurate nutritional education adapted to individual needs. The evidence reviewed in the last 9 years indicates that there has been particular interest in the nutrition of older adults and highlights the important role played by nursing in nutritional intervention and counseling, through health promotion activities, however, the evidence continues to be weak. It is necessary to continue the research with a more comprehensive approach that includes the behaviors, economic, cultural, and social conditions of people as well as the specific dietary needs for the aging stage [11].

Sanchez J [12] in her study had the general objective of identifying origins of critical theory and its relationship with the knowledge of professional nursing practice, for reflective and emancipatory care. The final conclusion is that: care with a critical, scientific and holistic reasoning approach consists of a way of being and being with others. This process involves activities developed by nursing for and with the being of the person, through the word, its essence and the intersubjective relationship, generating spaces of emancipation and liberation for nursing [12].

Landeros E, et al. [13] in their study had the general objective of analyzing the paradigmatic revolution in nursing

care. Having as a final conclusion that: throughout history there have been destructive episodes that are presented as crises, but that also contribute to scientific development; This is known as a “paradigm shift,” which results from an antithesis to what is traditionally accepted [13].

Gonzales N, et al. [14] in their study had the general objective of evaluating the dimensions of the quality of nursing care through the satisfaction of the parent or caregiver of the hospitalized pediatric patient. The final conclusion is that: the quality of care provided by the nursing staff is good; However, there are dimensions that need to be worked on in order to improve results [14].

Santamaria N [15] in their study had the general objective of describing the state of the art on the perception of nursing care for hospitalized cancer patients. The final conclusion is that the nurse-patient relationship with hospitalized cancer is a central point to understand and qualify the care practices of this population. It is necessary to develop strategies for measuring and qualifying this interaction [15].

Sifuentes O [16] in his study had the general objective of determining the relationship between the level of satisfaction of hospitalized users and the quality of nursing care in the Surgery A service of the Regional Teaching Hospital of Trujillo. The final conclusion is that the highest percentage (51%) of hospital users have little satisfaction with the quality of nursing care, 27.8% have a level of satisfaction, only 5.2% have a very satisfactory level and a significant 16% have dissatisfaction with nursing care [16].

Gonzales M, et al. [17] in their study had the general objective of analyzing the process of third-generation nursing care. Having as a final conclusion that: implementing the third-generation nursing process imposes the undeniable ability to apply critical skills, cognitive goals and critical thinking, this application begins to permeate health and educational institutions in Mexico [17].

Munoz C, et al. [18] in his study had the general objective of describing how work-related stress is present and its biopsychosocial effect on nursing care. With the new epidemiological changes, which are a direct effect of the globalized world, it becomes a priority for nursing as the discipline of care, which is responsible for prevention and health promotion, to face new challenges to meet the needs of the population in a timely and effective manner, which are related to a better level of self-care. Therefore, nursing should consider as part of its professional training the management and mastery of educational techniques and alternative treatment to enhance actions, but, above all, health results [18].

Ramirez C [19] in his study had the general objective of describing through the relationship between phenomenology-hermeneutics, care and worldviews. The use of phenomenological perception brings nursing care closer to the reality of human beings, contributes to research, practice and makes nursing care visible [19].

Bazanelly D [20] in his study had the general objective of determining the relationship between the perception of quality of nursing care and the degree of satisfaction of the mature post-operative adult user of the surgery service of the Chapén Support Hospital. The final conclusion is that: there is a significant relationship between the quality of nursing care and the degree of patient satisfaction $p < 0.05$ [20].

Lenis V [21] in his study had the general objective of determining the quality of nursing care perceived by patients hospitalized in a private hospital in Barranquilla (Colombia). The final conclusion is that: patients have a positive perception of the nursing care received in the institution, with a score of 93.22 for the dimension of experience with care and 78.12 for the dimension of satisfaction, which indicates that the quality of nursing care perceived by patients in the institution is good. The results are consistent with findings in studies at the national and international levels [21].

Valdemarra M, et al. [22] in its study had the general objective of identifying nursing care in the administration of blood products. The final conclusion was that during the review, we did not find a complete document that supported nursing care in the administration of blood products, so they were taken from the different bibliographic sources. A national and international consensus on this care was also not identified, and it was evidenced that nurses play a fundamental role in the administration of blood products since they spend more time with the patient [22].

Hernandez A, et al. [23] in their study had the general objective of describing the perception of satisfaction expressed by pregnant women in relation to the nursing care received during prenatal care carried out in a second-level care hospital. The final conclusion is that education strengthens feelings of acceptance and identity in the role of motherhood, awakening a bond of love and responsibility for the development of the new being [23].

Urrutia S [24] in his study had the general objective of determining the quality of nursing care in relation to the degree of satisfaction of the adult user in the emergency service of the Hospital La Caleta de Chimbote, 2015. The final conclusion is that: most of the dimensions of quality of nursing care and user satisfaction are statistically significant $p < 0.05$ and most of the dimensions of user satisfaction have

a statistically significant relationship with the quality of nursing care [24].

Ruiz P, et al. [25] en su estudio tuvo como objetivo general to analyze the level of satisfaction of older adults hospitalized regarding the care provided by nursing staff. Teniendo como conclusión final que: the overall satisfaction was high in 61.8 % of respondents [25].

Loreto M [26] in her study had the general objective of analyzing the usefulness of the ethics of care in the nursing profession. The final conclusion is that: there is no doubt that nursing is a profession that has an important ethical burden. However, for the time being, it lacks a defined bioethical vision, which would help to complete its own professional definition and would also serve as a decision-making instrument for professionals. The ethics of care is intimately related to nursing and, although it is not exclusive to it, it could function as a fundamental pillar to determine its own model [26].

Barbosa L [27] in her study had the general objective of reflecting on the paradigms of modernity and postmodernity and the process of care in nursing. Having as a final conclusion that: the construction of knowledge for nursing means working in the search for new concepts, overcoming obstacles, looking for bases that sustain the development of theories based on philosophy and history, having as the main focus of nursing knowledge the patient, who is the recipient of the practice of that knowledge, considering the individual as unique and integral, inserted in a social, political and economic context surrounded by ethics, dignity and spirituality [27].

Rodriguez S, et. al. [28] in his study had the general objective of investigating the state of knowledge of the art of care in three aspects: aesthetics, care and the art of care. The final conclusion is that: the care of the self and the other is an ethical, aesthetic and ontological act, which promotes the development of the person cared for and the caregiver towards the search for well-being in the life-death process. The nurse sees care as a therapeutic power that she has for herself and for others, she restores the hope of existing in order to achieve autonomy [28].

Discussion

Based on the literature reviews and texts of interest, we could argue that nursing care for the 21st century is immersed in a divergent picture of paradigms of the profession that today need greater defining precision and approach, both to understand in depth the human being himself, health and the health-disease process, Likewise, although studies show that there is dissatisfaction of significant groups of

patients with respect to nursing care, we must highlight that the profession has taken hold and continues to bet on comprehensive and holistic patient care, despite the fact that to date the profession is experiencing the catastrophic impact of the COVID-19 pandemic. The continuity of insufficient human resources programming, a strenuous working day, infrastructure and equipment that far from contributing to the integral health of the patient, the unfair remuneration for the performance of the work, the scarce recognition of the exercise of the profession, the continuity of the CAS labor regimes, Substitutions, Contracts by third parties, etc. that far from giving job opportunities over-exploit the worker, the presence of brainy managers and leaders of health facilities, etc.

On the other hand, it should be noted that both quantitative and qualitative research paradigms in the present century have gained greater strength and impact towards the interest of the nursing profession to strengthen its knowledge, it is important the participation of the profession immersed in continuous training and in the range of nursing professionals who today are committed to scientific research and are immersed in contributing to one of the most important aspects of the nursing profession. dimensions that the millennium demands, to be immersed in scientific communication reflected in research works of good impact addressed by the profession, is the case of the studies in the time of care in nursing to the present day and how these serve as epistemological support to reflect on this critical issue that we have been analyzing, which is the need to strengthen nursing care and that it is not weakened by all On the contrary, despite the difficulties, it remains firm and continues to consolidate over time.

Therefore, in order to promote and preserve nursing care with a broad vocation for service and a holistic approach, as our great nursing theorists of yesteryear and the predecessors of the present twenty-first century left as an indomitable example, it is necessary to strengthen professional competencies without creating imbalances between warmth and quality of nursing care, to fight against the status quo or the system that weakens the practice of the profession, it is necessary to understand that health education from its inception must meet quality standards, it is important to highlight our presence both at the hospital level and in the community with impeccable professional practice, this implies considering the human being with respect and absolute dignity, it is important to recognize our essence as human beings from our own perception and from the collective perception, Likewise, the sustainability of the integral conservation of nursing care over time has to be immersed in the change of paradigms that invites the nursing professional to reflect on the functionality of the antithesis to what is traditionally accepted, on the other

hand, it is necessary to understand that to date there are taxonomies in nursing that strengthen the scientific support for nursing care. It is necessary to innovate and provide the corresponding applicability that allows the development of critical, cognitive and critical thinking skills to contribute to the use of science in well-being of the construct of nursing care.

Taking into consideration these and other aspects of what the experience of the development of nursing care leaves us over time, it is necessary to emphasize its strengthening in view of the fact that the care of the self and the other is an ethical, aesthetic and ontological act in the constant search for the full satisfaction of our patients.

Conclusion

Nursing care in the 21st century has the greatest challenge of all time, overcoming its own limits and being in the emerging need to be immersed in political decision-making. The mastery of epistemology in nursing allows the strengthening of knowledge in the profession, a fact that allows deepen nursing care as a scientific discipline. It is important to leave the comfort zone and leave what is traditionally accepted in order to strengthen or have the ability to break paradigms that weaken the construct of the profession and damage the orientation of nursing care.

The greatest indicator of the impact of nursing care over time is the reflection of user satisfaction. Critical skills, cognitive goals, and critical thinking are the three links that allow nursing care to be self-evaluated.

Only nursing professionals can shape the advancement of science in its quantitative and qualitative paradigms towards the realization of the profession in the continuous process of being part of the advancement of science and not being immersed in obsolete scientific methods. The dehumanization of nursing care gains greater strength the more we adapt to health systems with organizational irregularities, in addition to intentionally making the presence of brainy managers permissible intentionally, by omission of word or action.

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