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The best paradigm for nursing research

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Abstract---Reflects on the best approach of the paradigms in nursing research, which allows human phenomena to emerge and through them generate knowledge for this discipline. The systematic review was carried out of 25 documents, analyzing the hermeneutical positivist and interpretive approach to nursing research. According to the analyzed documents and in knowledge of the multiplicity and multidimensionality of phenomena related to the care of the human health experience, which is the object of study of nursing, one of these two paradigms could not be qualified as the best, since it would be foolish accepting one of them or thinking that one is better than another, even more so at the time science is currently going through. Paradigms will quantitative or positivist and qualitative or interpretive hermeneutic prevail to the extent that nursing science requires it.

Keywords---Philosophy, Nursing; nursing theory; Nursing Research.

Introduction

Currently, nursing has managed to be recognized as a professional discipline; as a scientific field of application because its disciplinary development is based on its own specific knowledge (theories and conceptual models) and on other knowledge derived from the social, natural and human sciences.

Nursing is a discipline basically structured by two components, the professional and the disciplinary (Durán de Villalobos, 2018). As a profession, its interest lies in the activities carried out and resolved by its practitioners, to achieve the promotion, restoration of health and well-being of individuals; As a discipline, it is considered a field of knowledge, which has a body and evolves independently, capable of interpreting phenomena in its field such as care and health (Guía-Yanes, 2019).

Thus, this body of knowledge convenes a group or community of academic members who, at a given moment, accept this knowledge as true and accumulate it as a basis for disciplinary development. To this accepted body of knowledge, Thomas Kuhn calls it "paradigm", since for the author the men who coincide in the same paradigm and accept it as the basis of their research, share the same rules and regulations, for the development of science. . Kuhn, who popularized the term in 1962, called "accomplishments that some scientific community recognizes, for a certain time, as the basis for its superior practice" (Kuhn, 1962). Paradigms constitute the "horizon over which a discipline explores phenomena and the vision of what the discipline can become" (Fawcett & Lee, 2014).

It is understood then that a paradigm becomes the central element on which the way of thinking and acting of the members of a discipline is based, additionally – due to the load of knowledge that they bring with them – a paradigm provides guidelines for education, praxis and research, central axes for disciplinary development.

Due to the above, this work is carried out with the purpose of reflecting on the best paradigmatic approach -for nursing research- that allows human phenomena to emerge and through them generate knowledge for this discipline.

Method

For the development of the bibliographic research, care was started as the object of study of nursing science, since conceptually, it has been influenced by different philosophical and conceptual perspectives that have addressed ontological and epistemological issues around care. the conceptions of the human being, health and its contexts, Nursing and care itself, its attributes, and traits; that reflect in practice the different ways of caring.

Assuming the complexity of human phenomena and the multidimensionality of the care concept, its evolution and permanent construction, we analyze the best paradigm for the development of nursing science and practice. To this end, a systematic review was carried out (figure 1) of documents published in databases (scientific journals, books, among others) such as Redalyc, Scielo, PubMed, Science direct, Elsevier, among others, as well as other scientific documents such as books, these and other texts available in these databases. Articles from 2017 to 2022 written in Spanish, English or Portuguese were reviewed, however, texts were included that, despite not being in this range, were considered important for the study. For this purpose, the Google Scholar search engine was used with the use of the descriptors: Nursing, Nursing philosophy, Nursing theory, Nursing research

Discussion

Paradigms are differentiated by their conception of the world, and –from the scientific point of view– by the relationship that exists between the researcher and the phenomenon under study, that is, the relationship between subject/object (Triviño V. & Sanhueza A., 2005). Currently there are two generally accepted paradigms: the quantitative paradigm, also called empirical or positivist, and the qualitative paradigm, also called interpretive hermeneutic; the opposite position of both is based on the way of approaching reality and developing knowledge (Burgo Bencomo et al., 2019).

Similarly, in nursing these two paradigms, the empiricist and the interpretive, are the ones that generally predominate as the basis for the construction of knowledge (Agrazal García, 2019). Nursing conceptual frameworks support the concepts of the metaparadigm from the perspective offered by these paradigms (Martínez Díaz, 2020). The perspectives of the paradigm assumed by nursing researchers will guide the formulation of a problem and research questions, will support the design, and select the most appropriate methods for data collection and analysis.

Nursing in its beginnings moved from a stage focused on positivist studies and is currently venturing into the hermeneutic interpretive perspective (Castillo Lobos & Pavez Lizarraga, 2021).

The quantitative or positivist paradigm in nursing

Positivism assumes that “what is known can be verified through the senses” (Chinn & Kraemer, 1995). From the ontological point of view, the scientists of this paradigm maintain that there is a reality, that it is out there somewhere, and that it is known through the senses, and that in this paradigm knowledge is developed through the observation of the natural world. , in order to test and argue theories that describe, predict and prescribe (Jackson et al., 2021).

The scientific goal of positivism is behavior; in this paradigm the context of verification predominates; knowledge has an explanatory and predictive character; the subject and the object are independent; generalizations unrelated to time and space can be made; and oversees searching for the causes and effects of social phenomena (Park, Konge, &. Artino, 2020).

The history of nursing research from this paradigmatic approach dates to 1859, when in the notes of Florence Nightingale – a nurse with statistical training – it is evident that in her practice she collected and analyzed data on environmental factors that favor the physical and emotional environment (Galindo Alba et al., 2018). Since then, nursing has not been immune to this paradigm. In the 1970s, the conception that scientific bases for practice can be generated through the verification of theories; just like today when it has also been proven that bases for knowledge and transformation are generated from practice (Triviño V. & Sanhueza A., 2005). The purpose of these first attempts at theoretical testification was to evidence the explanations for the phenomena, that is, to acquire knowledge that would allow them to conceptualize clinical problems in order to

determine which were the most effective interventions and how they could measure their results (Estrada Zapata, 2020; Urra & Hernández, 2015).

The positivist paradigm is necessary for nursing science to support the statements about nursing care and the responses of subjects to health and disease situations, in addition to providing an explanatory model, and allowing theory to be generated and tested (Thanh Tuyen , 2018). The quantitative approach is fundamental and necessary to show the impact of nursing care, and even more so in the historical moment in which the disciplines are going through, in a society that demands results and professional qualification (Veliz et al., 2018).

Results should be clear and concise. Discussion should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature (Berg et al., 2004), the Results section reports what was found in the study, and the Discussions section explains the meaning and significance of the results and provides suggestions for future directions of research. In this section, it is explained the results of the research and at the same time is given a comprehensive discussion. Results can be presented in figures, graphs, tables, and others that make the reader understand easily. The discussion can be made in several sub-chapters.

The qualitative or interpretive hermeneutic

Paradigm the scientific objective of the interpretive paradigm is human subjectivity, for which the sense of discovery predominates in it; research under this paradigm seeks to explain and understand specific situations of the daily life of human beings; recognizes that reality is determined by a context, and that there is a relationship between the one who knows and the known (Freitez R., 2019; Sánchez Flores, 2019). Additionally, the development of knowledge from this perspective is inductive and is achieved by using techniques such as participant observation, interviews, narratives, with the goal of interpreting these data in the search for meaning or meaning that the actors give. to their experiences (Piza Burgos et al., 2019).

Four reasons are recognized why the interpretive paradigm has evolved in nursing science 1. Most of the first scientific nurses were educated in disciplines such as anthropology, philosophy and sociology, which provided them with a new look towards the phenomena related to care; 2. The nurses noted that empiricism did not recognize aesthetics. Pattern of knowledge and nursing personnel; 3. Greater congruence of this approach with the language and beliefs of nursing was identified. Ex. Biomedical model: reductionism, control / Nursing: holism, autonomy; and 4. This paradigm illuminated proprietary methods, such as grounded theory, to generate representative theories of nursing rather than borrowing from other professions (Monti & Tingen, 2009; Younas & Parsons, 2019).

Nursing is currently recognized as "the study of care in the experience of human health", therefore, this type of perspective or paradigm is essential to achieve a

complete explanation of knowledge (Herrera Velázquez et al., 2020; Smith, 2019). Others maintain that it is not only about the study of the human experience, but that this tradition allows us to "understand life in all its intertwined patterns of meanings and values" (Escobar-Castellanos & Sanhueza-Alvarado, 2018).

The best paradigm for the development of nursing science

Considering the above, and in knowledge of the multiplicity and multidimensionality of phenomena related to the care of the human health experience, which is the object of study of nursing, it could not one of these two paradigms can be qualified as the best, for the following reasons in the authors' opinion:

Accepting positivism as the appropriate paradigm for nursing would represent fragmenting the disciplinary nucleus of nursing that consists of care in the human health experience, given the reductive character of this paradigm. In the same way, to reject it would be to ignore its contributions in disciplinary development, through the development of conceptual models that have provided us with guides for practice and research.

Additionally, research with experimental design, carried out under this approach, has gained a wide field when it comes to seeking funding for research projects; thus, allowing nurses to practice evidence-based nursing whose contributions have been numerous to improve the quality of life of people who require nursing care; in addition to opening the door for the participation of nurses in multidisciplinary research projects.

On the other hand, to recognize the qualitative paradigm as the best for developing knowledge in nursing would be to accept the proposal of the authors who agree that accepting a paradigm also means assuming epistemological and ontological commitments, and in this sense, recognizing the care in the human health experience, as the core of the discipline, any approach that does not take into account the lived experience, could not respond to the body of knowledge necessary for the development of the nursing discipline.

However, taking this single position implies leaving aside the analysis of the health situation and its context from the explanation, that is, leaving aside epidemiology and sociodemographic indicators, which are a fundamental part of the determinants of health; This type of analysis is generally taken as the basis for the development of public health policies, strategies and interventions, to the benefit not only of individuals but also of health personnel.

Conclusion

In this sense, taking into account the characteristic that Kuhn gives to the paradigm from its definition, that is, that they are recognized for a certain time, that is, their ability to be replaced, I could say that as long as phenomena related to the activity of caring for humans, paradigms and methods will continue to emerge to explore them, therefore it would be foolish to take advantage of one of them or think that one is better than another, even more so in the moments in

which science is currently passing. Therefore, the paradigms will prevail to the extent that nursing science requires

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