Brazilian nursing research: is it time for a change?

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I am a Brazilian nurse who has been working as a nursing professor and researcher in the United States (US) for the past 9 years. My research agenda is focused on mental health and its relation to culture; specifically, depression among low-income, underserved Latino mothers and children living in rural areas of Florida. This research focus is consistent with reducing health disparities in low-income, minority populations, a primary goal of the 2010 Healthy People(1) initiative. Research findings are expected to contribute to the mental health data reflected in 2010 Leading Health Indicators(1). In accordance with Community Based Participatory Research (CBPR), my research approach involves engaging the active participation of community members (teachers, church members, staff of the public health department and mothers from the actual community) in all stages of the research. Additionally two academic researchers are also part of my research team; a child psychologist and a bilingual educator.

The transition to living in the US has been challenging, since my heart remains in Brazil. Technology, however, has allowed me the luxury of maintaining frequent contact and collaborating with Brazilian colleagues working in academia and in clinical areas. My goal in this editorial is to highlight current research topics that warrant attention and to promote discussion among nurses.

It is evident that Brazilian nurses are addressing the complexities of 21st century health care as well as generating the kind of critical thinkers and researchers who will continue this trend. A recent article about Latin American nursing research indicated that Brazilian nurses are the most productive producers of published articles in Latin American nursing Journals(2). In 2007 I participated in the Brazilian Nursing Conference (CBEn in Brasilia), and was impressed to see the large pool of nursing students (graduate and undergraduate) presenting research projects. According to Mancia et al(3) since 2001 more than 50% of CBEn participants are students. This clearly indicates that the culture of research is being initiated much earlier in the educational process and has a solid foundation in professional nursing. These are exciting and positive advances.

I believe discussion of the following three topics may also further advance our professional mission: 1) client-focused research, 2) a formal nursing research agenda, and 3) more interdisciplinary research. Evidence gained from more client-focused innovative nursing interventions may substantially enhance contribution to evidence-based practice. Next, what is the current strategy for constructing a formal nursing research agenda in different parts of Brazil? Such an agenda could serve as an important tool for guiding nursing research and its application, recognizing the social, economical and cultural differences in a country the size of Brazil. A formal agenda could also generate positive political and social changes in the profession. Finally, it appears that the bulk of nursing research and publications in Brazil are products of collaborations among nursing colleagues and nursing students, despite the important role of interdisciplinary collaboration as part of our theoretical nursing model. My research experience continues to teach me the value of interdisciplinary collaboration with professional colleagues. Over time, however, I learned that in order to promote health programs' sustainability and social transformation in communities, collaborative work with clients is invaluable since they are the true agents of change.

As we all know, consideration of changes in any profession requires in-depth discussion, planning, and action. Hopefully, topics presented here may serve to the development of this process.

REFERENCES