

# THE TEACHING OF AIDS IN THE VIEW OF LECTURERS OF NURSING AND ITS RELATIONSHIP WITH COMPLEXITY\*

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**ABSTRACT:** This study aimed to investigate nursing lecturers' perception regarding their pedagogical practice regarding HIV/AIDS, using Complex Thought as the theoretical framework. This is qualitative research with 13 lecturers who graduated in Nursing, belonging to seven Higher Education Institutions in São Paulo, and was undertaken between January and July 2010. The study respected ethical principles and the data collection occurred through In-depth Interviews. The results were treated using content analysis. The categories evidenced that the teaching process in HIV/AIDS, based in the biomedical model, did not restrict the teaching of ethics, citizenship, encouragement for curiosity, and creativity, much less the understanding of the person with HIV/AIDS as a complex being, on the part of the lecturers. This study shows the importance of valuing teaching in relation to the issue of HIV/AIDS grounded in the human condition and in human solidarity.

**DESCRIPTORS:** Education in nursing; Philosophy in nursing; Higher education; Knowledge; Acquired immunodeficiency syndrome

## ENSINO DA AIDS NA PERSPECTIVA DE DOCENTES DE ENFERMAGEM E SUA RELAÇÃO COM A COMPLEXIDADE

**RESUMO:** Estudo cujo objetivo foi investigar a percepção dos docentes de Enfermagem sobre a sua prática pedagógica em HIV/Aids, tendo como referencial teórico o Pensamento Complexo. Trata-se de pesquisa qualitativa com treze docentes graduados em Enfermagem, entre janeiro e julho de 2010, pertencentes a sete Instituições de Ensino Superior de São Paulo. O estudo obedeceu aos princípios éticos e a coleta de dados se deu por meio da Entrevista em Profundidade. Os resultados foram trabalhados pela análise de conteúdo. As categorias evidenciaram que o processo de ensino em HIV/Aids, com base no modelo biomédico, não restringiu o ensino da ética e da cidadania, do estímulo à curiosidade e da criatividade, muito menos, da compreensão do humano com HIV/Aids como um ser complexo, por parte dos docentes. Este estudo mostra a importância da valorização do ensino em relação ao tema HIV/Aids pautado na condição e na solidariedade humana.

**DESCRIPTORIOS:** Educação em enfermagem; Filosofia em enfermagem; Educação superior; Conhecimento; Síndrome de imunodeficiência adquirida.

## ENSEÑANZA DE SIDA EN LA PERSPECTIVA DE DOCENTES DE ENFERMERÍA Y SU RELACIÓN CON LA COMPLEJIDAD

**RESUMEN:** Estudio cuyo objetivo fue investigar la percepción de los docentes de Enfermería sobre su práctica pedagógica en HIV/Sida, utilizando como referencial teórico el Pensamiento Complejo. Es una investigación cualitativa, realizada entre enero y julio de 2010, con trece docentes graduados en Enfermería de siete Instituciones de Enseñanza Superior de São Paulo. El estudio obedeció a los principios éticos y los datos fueron obtenidos por medio de la Entrevista en Profundidad. Los resultados fueron trabajados por el análisis de contenido. Las categorías evidenciaron que el proceso de enseñanza en HIV/Sida, con base en el modelo biomédico, no restringió la enseñanza de la ética y de la ciudadanía, del estímulo a la curiosidad y de la creatividad, mucho menos, de la comprensión del humano con HIV/Sida como un ser complejo, por parte de los docentes. Este estudio muestra la importancia de la valoración de la enseñanza acerca del tema HIV/Sida pautado en la condición y en la solidaridad humana.

**DESCRIPTORIOS:** Educación en enfermería; Filosofía en enfermería; Educación superior; Conocimiento; Síndrome de inmunodeficiencia adquirida.

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## INTRODUCTION

The epidemic of Acquired Immunodeficiency Syndrome (AIDS) caused by the Human Immunodeficiency Virus (HIV) has provoked local and worldwide changes in crucial aspects of human life, such as each one's relationship with her own body and with other persons, in the private sphere and even in social, cultural, economic and political matters. It has forced society to debate issues such as gender, homosexuality, and drugs, and to reflect on human rights and citizenship<sup>(1)</sup>.

In the same way, the field of work in the area of health, in relationship to the issue of AIDS, has become a privileged locus for questions relating to the current health system: and these responses will certainly contribute in a unique way to confronting authoritarian and biased directives. The phenomenon of AIDS reminds humanity of the need to confront questions which were being neglected or ignored<sup>(1)</sup>.

The social, political, historical and anthropological aspects in relation to the issue of AIDS form a significant proportion, raised by the immense network of human meanings and implications which the epidemic has woven in recent decades, provoking discussions which relate not only to health policy, but also to ethics, morality, and to new possibilities for exercising citizenship. Scientific input originating from the humanities is, therefore, fundamental<sup>(2)</sup>. In the light of this, dialog regarding the problems constructed around the experience of the epidemic imposed communication with different knowledges, evidencing the articulation of the biopsychosocial spheres in the human dimension<sup>(3)</sup>.

As a result, new challenges are made to the areas of knowledge, including Nursing. However, we know that Brazilian Nursing is constituted within the biomedical model, that is, the teaching and consequently the development of its work are nearly always centered in the biologist concept, with individualist and curative work in the hospital field. In this way, it fails to consider the influence of psycho-emotional and socio-environmental factors in the health-illness process, understanding the human body as an object which can be dismantled, and its mysteries understood in a rational way. As a result of this, nurses' care is much more centered on the dimension of the patients' physical needs<sup>(4)</sup>.

It is appropriate, however, to mention that this is not an issue of undervaluing the biological aspects when one thinks about the concept of health-illness within the teaching of nursing. We know that the biological aspects are fundamental in the health-illness process. It is necessary, however, for us also to consider the psychosocial aspects to be as important as the biological aspect.

The question therefore arises: how do the lecturers of Nursing perceive their pedagogical practice in HIV/AIDS? Do nursing lecturers, in the light of their technician and biologist training, value the construction of knowledge in relation to the care which involves psychosocial dimensions in the teaching-learning process in AIDS?

In this regard, we start from the assumption that in the light of the exploration of the issue of AIDS, the role of intermediating the construction of the lecturer's knowledge is extremely important. The lecturer has the responsibility to participate in the construction of knowledge which is contextualized in relation to the dimension of AIDS which have to do with not only the disease's biological aspects, but also with health policies, ethics, morality and further possibilities for exercising citizenship. Thus, health problems related to AIDS must not be evaluated and treated only within the biological dimension.

The objective proposed for this study, therefore, was: to investigate the perception of Nursing lecturers regarding their pedagogical practice in HIV/AIDS.

## METHOD

This is a qualitative study based in the theoretical-methodological framework of Complex Thought, studied and defended by Edgar Morin<sup>(5)</sup>, which arises for questioning the fragmentation and the shattering of the knowledge originating from the 16th century.

Based on this grounding, Complex Thought is defined as a system of thinking which is open, wide-ranging and flexible, and which does not reduce multidimensionality to simplistic explanations or closed sets of ideas. It is a new world vision which accepts and seeks to understand constant changes of the real. It does not deny multiplicity, randomness and uncertainty. It is based in seven principles:

hologrammatic, dialogic, recursive, systemic or organizational, retroactive loops, autonomy/dependence (self-organization) and the principle of reintroduction of knowledge in all knowledge. For this research, we selected the dialogic, recursive and hologrammatic principles<sup>(5)</sup>.

In this way, the conceptual feature of Complex Thought is the basis for the understanding of the study object, which has a double face: for the understanding of the process of teaching, and of the phenomenon of AIDS in the contemporary world. For this, Morin assists the understanding of AIDS in its pluridimensional condition, not considering reductive and unidimensional consequences. It favors the understanding of the teaching process as an open and relational communicational system, integrated within the other levels of the health system.

Data collection occurred in January – July 2010 in seven Higher Education Institutions in the city of São Paulo. In order to participate in this study (inclusion criteria), the lecturers from the institutions selected were to have: training in nursing and to teach content on HIV/AIDS. As a result, 13 lecturers who had graduated in Nursing and teach content on HIV/AIDS participated in the study. For data collection, the technique of Individual In-depth Interview was used<sup>(6)</sup>.

Authorization was obtained from those responsible for the teaching institutions. Following that, a favorable Opinion was obtained from the Committee for Ethics in Research with Human Beings (protocol Coordination of Health Services – Emílio Ribas Institute of Infectious Diseases, recorded under number 197/2008) allowed lecturers, indicated by those responsible for the teaching institutions, based in the inclusion criteria proposed for this study, to be guided regarding the terms of consent. Thus, their names and those of the Higher Education institutions in which they lecture, would not be revealed in the socialization of the study's data. The interviews were led by two guiding questions: 1. How do you understand your pedagogical practice in HIV/AIDS? 2. How do you viabilize the teaching-learning process in HIV/AIDS in undergraduate nursing?

The empirical data were treated using Content Analysis Technique<sup>(7)</sup> at three points: pre-analysis, exploration of the material, and treatment of the results (inference and interpretation). The stages adopted for consistent construction of the

categories were: 1st - after the transcription in full of the recorded interviews, the text was read based on skim meeting; 2nd - through further re-reading, words and phrases from the original texts were highlighted, identifying convergences and divergences in each interview; 3rd - after the convergences and divergences were identified, highlighted words and phrases were selected from the original texts; 4th - after the selection of the words and phrases, the researchers sought to identify convergences and divergences in each interview and between the interviews, so as to develop the categories; 5th - following the construction of the categories, the data were discussed. We remember that the procedures followed for the analysis of the data collected through the techniques of In-depth Individual Interview were undertaken based on the conceptual feature of Complex Thought and on the objectives proposed.

## RESULTS

Based on the analysis of the data regarding the perception of thirteen lecturers who graduated in Nursing regarding their pedagogical practice in HIV/AIDS, four categories emerged.

### **The teaching-learning process in HIV/AIDS, based on the biomedical model**

Each issue addressed in relation to HIV/AIDS is within a course, and often, the issues in common between one course and another are not interconnected and are not valued in relation to the context and meaning. This difficulty in interlinking the knowledges is noted by some lecturers, as in the accounts below, which show the awareness of the strong presence of the biomedical model in the academic environment, as a major source of support in the promotion of knowledges which exist only in isolation.

*[...] In the case of somebody with HIV, the student learns that here in hospital he will receive a certain type of attendance [...]. Different from the Primary Healthcare Center, which focuses on the epidemiology, which focuses on prevention [...]. The cases in which there are complications go to the hospital [...]. It's the biomedical model. (Professor 10)*

[...] *People don't want to leave their own professorships, they don't want to leave their castles [...]. Each one stays in her own castle of knowledges and, perhaps, we do not address all the dimensions of AIDS.* (Professor 3)

This model affects the practice of the nurses who center their activities, almost exclusively, on the patients' physical needs. As a result, Nursing also acts in a unidimensional way, placing greater value on the technical and biological aspects.

Below, one can perceive valuing of the content with a focus on the biological aspect:

[...] *the student has the knowledge on opportunistic illnesses [...]. The student is taken to a nurse who specialized in the study of infectious diseases, where there is AIDS [...]. There, they see antiretroviral drugs being administered, they discuss imaging exams. They see what pneumocystosis is in practice [...].* (Professor 4)

*I approach the issue of AIDS in relation to the epidemiological aspects, the signs and symptoms, the treatment, the disease's complications. We don't work on the anthropological and social aspects of the issue of AIDS [...].* (Professor 3)

Valuing the content focusing on the psychosocial aspects should be as fundamental as valuing the biological content. It is necessary to focus on the development of a teaching process which also values the psychosocial aspects of care for the other, so as not to fragment the human condition.

### **The ethical participation of academics in the provision of services to the community in relation to HIV/AIDS**

In this category, one can note in the lecturers' discourses that the importance of the issue of HIV/AIDS and education is demonstrated, as a form of the academics' direct participation in the provision of services to the community regarding the issue of HIV/AIDS, as these lecturers' concern is clear, as they consider the process favoring collective health:

*The objective is to show the student her role within this situation, which is fairly wide-ranging*

[...]. *Their role in this epidemic [...].* (Professor 1)

*We nurses and professors have the responsibility to guide the population, to show other people, including HIV/AIDS patients, their rights [...]. I always say this to my students.* (Professor 9)

The lecturer's critical perspective, as an indicator for citizenship-based teaching in HIV/AIDS, must respect the ethical question. The AIDS epidemic has raised essential ethical questions, clearing away a variety of legal challenges. As a result, in the excerpts of the discourses below, one can perceive that there is concern on the part of the lecturers in working with the students on the ethics of care for the individual with HIV/AIDS, discussing human rights:

*I believe that it is much more than educating technically, it is promoting citizenship with ethics [...].* (Professor 13)

[...] *We have discussed the question of rights a lot. Not whether the patient is homosexual, if his practices are this or that [...] but the question of human rights, him as a person, as a citizen [...].* (Professor 2)

The lecturer's critical view, as an indicator of citizenship-based teaching on HIV/AIDS, constitutes education directed towards training which is complex and, therefore, supportive of the subject who will care for the person with HIV/AIDS.

### **Curiosity and creativity in the teaching-learning process in relation to the issue of HIV/AIDS**

Recognizing the importance of curiosity and creativity in the teaching process is fundamental for the construction of knowledge, and, consequently, for the reduction of present day problems. One can perceive, therefore, that the discourse below demonstrates that the lecturer recognizes the importance of encouraging the students' curiosity, so that the teaching process may be meaningful. As a result of this, the student constructs knowledge in relation to the individual with HIV/AIDS in a way which is personalized, alive, active and creative:

[...] *One of the biggest difficulties faced by patients with HIV is in relation to those who are sero-discordant, which is a situation which appeared during the placement... The wife was negative and the husband was positive... She wanted to get pregnant [...] And for the student this was a surprise [...] and encouraged the student to research [...] So, I think these are learning possibilities [...]* (Professor 2)

The idea of the production, such as, for example, the encouragement to undertake research, makes it possible for the subject not only to creatively solve a previously given difficulty, but also to find a problem where other people may perhaps not see one, which constitutes an important expression of their potential for curiosity and creation:

*Many students like the area of HIV/AIDS and the vast majority of studies produced by them are about the subject [...]*. (Professor 6)

*I think you have to encourage the student, encourage the student in relation to reflecting on research [...]*. (Professor 5)

In addition to the studies, one way of encouraging the student's curiosity and creativity is to make the lecturer herself to make use of her creativity, in the process of teaching on HIV/AIDS. In the excerpt from the next discourse, one of the lecturers, valuing creativity, proposes a group dynamics exercise, which helps the students to identify their prejudices and – consequently – to deal with them in a meaningful way. Thus, we have:

[...] *We use group dynamics with the students. I separate the class into two groups. One constructs the man, and the other, the woman, and one has HIV, and we discuss whether this counts in a relationship [...]. My role is to deconstruct the prejudice [...]*. (Professor 12)

### **Understanding the human with HIV/AIDS as a complex being**

In this category, one can note in the accounts below the lecturers' concern with teaching the students to see the person with HIV/AIDS in such

as way as to understand their condition as human beings, which goes beyond the disease per se and how the person contracted HIV:

*I think it is important for them to know people with HIV [...]. To recognize that these people are not different from us [...]*. (Professor 2)

*It is necessary for us to see beyond the disease. That the patient is a person, who needs care, who needs to be heard.* (Professor 8)

The discourses show the lecturers' concern in teaching the students not to close their understanding, reducing the person with HIV/AIDS to "a good or bad behavior", or "blaming" their condition on negligence. On the contrary, they alert them to these peoples' suffering in relation to "prejudice and stigma":

*I think it is important for the students to be alert. Firstly, so as not to blame the person who has HIV, but to try to understand what the processes are which led these people to acquire HIV [...]*. (Professor 2)

*Another thing is to lead the student to participate in discussions in relation to prejudice [...]. It is to deconstruct the idea that the individual with AIDS behaved badly, that his conduct was poor in his life, and that it was because of this that he acquired the disease. I tried to deconstruct this idea.* (Professor 7)

The next excerpt reflects the importance of understanding the person with HIV/AIDS as a complex being:

*The student needs to know the patient, his life history [...]. The student who goes on a placement needs to know more than just the medical records, the physiopathology, the opportunist diseases, the tests. He has to make a life history of the patient, he has to understand the process of his health/illness [...]*. (Professor 11)

The lecturers' discourses in this fourth and last category led us to the possibility of the teaching process focused on human complexity.

## DISCUSSION

This study's objective was to investigate the Nursing lecturers' perception regarding their pedagogical practice in HIV/AIDS. As a result, it is important to take into consideration that the lecturers interviewed have an in-depth understanding of the teaching process related to the issue of HIV/AIDS, but also note, as in another study<sup>(4)</sup>, limits relating to the strong insertion of the Cartesian/biologist model in the teaching process in Nursing.

This continuing paradox between the biomedical 'doing' of the lecturers and a project of idealization which is more concerned with the biopsychosocial dimensions in the teaching process in HIV/AIDS relates to an essential concern in the reform of the Thought proposed by Complexity Theory: the dialogic principle. Morinian Thought raises the idea of dialogic as that which allows the coexistence of contradictory notions in the same context, which are not summarized in a new perception, but rather in revealing the thought of that context as complex and processual<sup>(5)</sup>.

As a result, the lecturers investigated here are spokespersons for this unresolvable dialogic which allows the lecturers' action to occur within the movement of the context, even revealed in paradoxes such as this one. This is the richness of human life and action, as they allow people to re-see themselves and their activity in the world, establishing practical and ideological changes, for example, in the educational scenario. The construction of knowledge in relation to the issue of HIV/AIDS, with a view to Complex Thought, requires us to learn to contextualize, to reconnect, to globalize and to multidimensionalize not only the information but also the knowledge<sup>(5)</sup>, mainly because the HIV/AIDS epidemic is changeable and dynamic.

The lecturers perceive that the biomedical model tends to divide the study object or the difficulties which appear in as many portions as necessary for them to be resolved, which causes the division of the knowledge into increasingly specialized areas<sup>(8)</sup>. They also note that the disease is reduced to a mechanical malfunction and that the ill individual loses his psychosocial features, coming to be a scientific object, in which his

emotional aspects, beliefs and values are left to one side<sup>(4)</sup>. It is known, however, that the restriction to the biomedical model in the training of future nurses, to a certain extent, compromises the professional and care relationship<sup>(9)</sup>.

In relation to the ethical participation of the academics, in the provision of services to the community, the lecturers in the process of teaching in HIV/AIDS as defined by the National Sexually-Transmitted Diseases and AIDS Program, must present an ethical positioning defending life, the promotion of citizenship, autonomy, the emancipation of the human person, respect for knowledge, and the search for living conditions which are more worthy and egalitarian between people<sup>(10)</sup>.

The academics' direct participation in the provision of services to the community through the process of teaching on HIV/AIDS may possibly be the best exercising of citizenship experienced by the students. Indeed, it may be the largest gain provided by the cooperative work in the search for the construction of more solid links as part of a new ethical commitment established between the university and the community<sup>(8)</sup>. As a result, the Nursing lecturer, in working with the student on care for others, comes to discuss the notion of ethics and respect for one's fellow man, which are essential in the construction of citizenship<sup>(5)</sup>. Therefore, considering the meaning of ethics, the lecturer must also have a humanistic character in relation to the students, being competent not only from the technical point of view, but above all from the humane, understanding and guiding point of view, so as to be shown to be an example to be followed by the students<sup>(9)</sup>.

Another fundamental point refers to curiosity and creativity. A teaching process which does not use creative expressions, generally, "excludes curiosity, enthusiasm and discovery", emptying this process of meaning<sup>(11)</sup>. Both curiosity and creativity develop when the teaching process ceases to be reproductive, and becomes productive<sup>(11)</sup>. Human beings, when they cease to be subjected to orders, myths and imposed beliefs, become questioning subjects, because they become free spirits<sup>(12)</sup>. This occurs through processes of relating, through dialogue, reflection and contradiction, which are essential elements for involving the subject in the teaching process<sup>(12)</sup>.

The teaching process, in relation to the

issue of HIV/AIDS, requires the use of varying methodologies, in which curiosity and creativity both on the part of the lecturer for leading, and for the student in participating, must be encouraged, and thus become closer to the Morinian principle of recursivity<sup>(5)</sup>. In this way, the valuing of this principle in the teaching process can provide innovative focuses in education<sup>(13)</sup> so as to help to reduce, for example, the stigma and the prejudice in relation to persons with HIV/AIDS.

In relation to the understanding of the person with HIV/AIDS as a complex being, it is necessary to say that there are two forms of comprehension. We can call the first intellectual or objective comprehension, which occurs through reasoning and through explanation. The second is called intersubjective human comprehension, and goes beyond the concept of the first, as it perceives the other not only objectively, but as a person with whom we identify and who identifies with us, in a relationship which is close to the Morinian principle of dialogic<sup>(12)</sup>.

The understanding of the other encompasses objective comprehension and also establishes an essential subjective element, which consists of not reducing the other only to one of his features, of his acts, but tends to take the various dimensions or varying aspects of the person as a set<sup>(5)</sup>. The factors which promote comprehension are: the awareness of human complexity, introspection, subjective openness in relation to the other, and the interiorization of tolerance<sup>(12)</sup>.

In the process of teaching in Nursing, there has always been a concern with providing specific and individualized care, so as to perceive the individual as a being in her totality. As a result, there is a need to see the person with HIV/AIDS in her totality, but also, simultaneously, in her individuality, which brings us closer to the Morinian hologrammatic principle<sup>(12)</sup>; as that which is evidenced in the understanding of a complex system, that the part is always in the whole, but that the whole also reverberates in its part, overcoming the Cartesian and structuralist perspective, which sums up an organization as the sum of its parts, partitioned and individualized<sup>(13)</sup>.

The construction of solidarity is fundamental for confronting the HIV/AIDS epidemic, and must be a conscious part of the routine attitudes of future nurses and the population in general with respect to persons with HIV/AIDS.

## FINAL CONSIDERATIONS

First of all, it is important to recover that the driving force for the present study to be undertaken was the need to investigate the perception of lecturers who graduated in Nursing regarding their pedagogical practice in HIV/AIDS.

It is noted that the dimension focused upon most by the lecturers in relation to the teaching process in HIV/AIDS was the biological dimension. However, one cannot forget that the prioritization of the biological dimension is significantly related to the fact that Nursing is constituted within the biomedical model, the fruit of the Cartesian paradigm, which values this aspect. However, it is noted that the lecturers are clear that the biomedical model limits the way of seeing the human being, and reduces the teaching process in HIV/AIDS in relation to the care to be offered.

In the pedagogical practice of the teaching process in HIV/AIDS, the importance of encouraging creativity and curiosity was made clear, this consisting in the investment of thoughtful activity which promotes the exercise of the new worldview, making the subjects into questioners. The valuing of scientific studies and of teaching strategies such as group dynamics and activities focusing on the exercising of empathy, projection and identification with persons with HIV/AIDS so as to deconstruct prejudice and stigma was made clear.

It may be noted that the teaching process in relation to the issue of HIV/AIDS is shown in dialogic construction, permeated by complementary contradictions between the plural human condition and technicism; the interlinking of knowledges and fragmentation; the creative process and technical repetition. Therefore, this study shows us that the seed of complexity was sown in the fertile soil of the teaching process in HIV/AIDS of the Undergraduate Courses in Nursing studied. This seed has been developing and growing slowly, leading us to perceive the possibility of a teaching process in HIV/AIDS founded in the human condition, in solidarity and in the interlinking of knowledge.

We are certain that this issue requires reflection and has not been exhausted in this work. As a result, it would be interesting for us to seek to

study the perception of the student in relation to this issue, so as to investigate what has actually been significant in her learning, with the aim of extending the results presented in this study.

Finally, we believe that this study's findings are not generalizable. The context of the study fields in question is unique, presenting specific characteristics in the process of teaching about the issue of HIV/AIDS, this being, therefore, a limitation of the study.

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