

# The Aristotelian *techne* and its implication for nursing

*A téchne aristotélica e sua implicação para a enfermagem*

*La técnica aristotélica y su implicación para la enfermería*

## ABSTRACT

**Objective:** To analyze the Aristotelian *techne* and its implications for nursing care.

**Methodology:** Reflective text governed by the question: how can Aristotelian philosophy imply nursing care? To answer this question, the main elements that form the basis of Aristotle's philosophy are established in *Physics* book II and *Metaphysics*; as well as the notions that this philosophy projects onto the science and art of nursing.

**Results:** The art of the profession is manifested in care practice, research, and teaching.

**Conclusion:** Nursing care is a combination of knowing-thinking, knowing-doing, and knowing-coexisting expressed in the profession's *techne*; this encompasses manual skills, innovation capacity, human behavior towards the patient, organization, people and units management; it mediates the scientific and dialogic encounter with the patient marked by the aesthetic sense. In the Aristotelian system, *episteme*, *praxis*, and *poiesis* are in an indissoluble relationship.

**Descriptors:** Nursing; Nursing Care; Philosophy; Knowledge; Art.

## RESUMO

**Objetivo:** Analisar a *téchne* aristotélica e sua implicação para o cuidado de enfermagem.

**Metodologia:** Texto reflexivo regido pela questão: como a filosofia aristotélica pode implicar o cuidado de enfermagem? Para resposta estabelecem-se os principais elementos que fundam a filosofia de Aristóteles no livro II da *Física* e na obra *Metafísica*; e as noções que essa filosofia projeta sobre a ciência e a arte da enfermagem.

**Resultados:** A arte da profissão se manifesta na prática assistencial, na pesquisa e no ensino pelo cuidado de enfermagem. **Conclusão:** O cuidado de enfermagem é conjugação entre o saber-pensar, saber-fazer e o saber-conviver expresso na *téchne* da profissão; engloba habilidades manuais, capacidade de inovação, agir humano perante o paciente, organização, gerenciamento de pessoas e unidades; ele medeia o encontro científico e dialógico, marcado pelo senso estético, com o paciente. No sistema aristotélico, *epistème*, *práxis* e *a poiésis* estão em relação indissolúvel.

**Descritores:** Enfermagem; Cuidado de Enfermagem; Filosofia; Conhecimento; Arte.


## RESUMEN

**Objetivo:** Analizar la técnica aristotélica y sus implicaciones en la atención de enfermería. **Metodología:** Texto reflexivo realizado desde la pregunta: ¿Cómo la filosofía aristotélica puede implicar la atención de enfermería? Para responderla, se establecen los principales elementos que fundamentan la filosofía de Aristóteles en el Libro II de la *Física* y en la obra *Metafísica*; y las nociones que esta filosofía proyecta sobre la ciencia y el arte de la enfermería. **Resultados:** El arte de la profesión se manifiesta en la práctica asistencial, en la investigación y en la enseñanza para la atención de enfermería.


**Conclusión:** La atención de enfermería es una combinación de saber pensar, saber hacer y saber convivir que se expresa en la técnica de la profesión; abarca habilidades manuales, capacidad de innovación, acción humana hacia el paciente, organización, gestión de personas y unidades; y media el encuentro científico y dialógico con el paciente marcado por el sentido estético. En el sistema aristotélico, *episteme*, *praxis* y *poiesis* están en una relación indisoluble.

**Descriptores:** Enfermería; Atención de Enfermería; Filosofía; Conocimiento; Arte.


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## INTRODUCTION

Nursing, as a science and art, was born from the several actions promoted by Florence Nightingale, at the end of the 19th century, originating what historians of the area call modern nursing. Through it, Florence prepared women to work in health maintenance, people management, material resources, teaching, and patient care. The search for its scientificity led nursing to move closer to the traditional philosophy of science, which brought consequences to care pragmatics, management, teaching, and research, based on professional training centered on the biologicist and technician model<sup>(1-3)</sup>.

Currently, it is a challenge for nursing to establish a philosophical critique of the paradigm it is developing and, thus, expand the body of knowledge about its science and art, as well as reassess the influence of the biologicist model on the professional's actions in assistance, management, teaching, and research. To that end, scholars of the profession suggest revisiting the Nightingale paradigm, seeking, thus, to establish a critique of professional training and its care pragmatics. It is known that in this paradigm, nursing is based on an indissoluble and coequal triad in value, highlighting: the knowing-thinking, the knowing-doing, and the knowing-coexisting; these correspond, respectively, in the Aristotelian system, with the theoretical knowledge, the productive knowledge, and the practical knowledge. Due to the greater terminological familiarity with the Nightingale triad on the nursing side, in this article, it will be taken as a synonym of the Aristotelian triad<sup>(1-3)</sup>.

It is through this knowledge triad that the art of the profession is manifested in teaching, in the management of people, of material resources, and in care practice, with the aim of providing the patient nursing care with high ethical, social, and scientific value. Knowledge is not in competition with each other or hierarchized, but rather kept in a position of equality, giving balance to professional activity. The art of nursing is expressed, above all, from the professional care given to the patient,

the family, and the community, starting from the use of the nursing technique, the attentive listening to others, the management of people, the administration of material resources, and health education, among others<sup>(3-4)</sup>.

Therefore, the art of nursing, despite the direct patient care, involves the cordiality between the nurse and the cared-for being, allowing the former to 'see' with sensitivity and touch human nature in all its essence and plenitude, elements that are present in the Nightingale paradigm. Furthermore, through it, nurses express a way of being in the world, assuming the commitment to be with the person in solidarity, sympathy, technical-scientific, and ethical competence relationship. In this sense, for the profession, its art assumes a sense of duty-being, being centered in the holistic and humanistic philosophy, so that the resulting nursing care is significant in its assistance, administrative and social aspects<sup>(5-6)</sup>.

For the purpose of this reflection, the term "art" is taken in the Aristotelian sense, namely: *techne*. It is recognized as a constitutive element of the professional care given to the patient. The latter allows us to identify the axiological base that grounds the profession, previously recognized by Florence, namely: the ethical value (love), the useful value (art, technique, and management), the logical value (scientific knowledge), and the social value (solidarity). It is said that it is in the amalgam of these values that the nurse-being is constituted<sup>(1,7-8)</sup>.

Several methodologies are used by nurses for the exercise of the *techne* in its organizational, care, procedural, normative, and administrative aspects, all united to the ethical dimension manifested in the attitudes and actions that move them to judge, choose, and decide the professional action that seeks the patient's, family's, and community's well-being. Thus, reflecting on the technique is a necessary strategy for the growth and development of the nurse-being<sup>(1,5,8)</sup>.

Furthermore, it is through nursing *techne* that the scientific and dialogical encounter with the patient is mediated, marked by the

aesthetic sense. Aristotelian thinking has a significant influence on the *techne* enlightenment, being a pioneer in its reflection; therefore, it is believed that returning to Aristotle is useful for the purposes of this study<sup>(5-6,8-11)</sup>.

Given these considerations, this article aims to analyze Aristotelian *techne* and its implications for nursing care.

## METHOD

This is a reflective study, guided by the following question: how can Aristotelian philosophy involve nursing care? In order to obtain the answer, the following path is established: to indicate the main elements that form the basis of Aristotle's philosophy present in *Physics* Book II and in *Metaphysics*; and the notions that this philosophy projects onto professional care. The object of study is Aristotelian *techne* and its use in modern nursing.

This reflection was based on two central themes, namely: Aristotle's philosophy in its relevant aspects for nursing and the philosophy's dimension to establish the nursing *techne*. It was admitted that Florence Nightingale's work - *Notes on Nursing: What it is and What it is Not* - points out the elements of Aristotelian thinking which support nursing as science and art.<sup>(12)</sup>

## RESULTS AND DISCUSSION

### Aristotle's philosophy

It is necessary to define the investigative field in which the Aristotelian text is inserted, understanding it as one of the elements that constitute his philosophical system. In this sense, it is necessary to identify the central point that nourishes Aristotle's reflection. As a disciple of Plato, it was in the Academy that he had contact with the Platonic philosophy, starting to reflect and build other solutions to the problems addressed by his master<sup>(8)</sup>.

It is noteworthy the fact that Plato is interested in criticizing the position of some pre-Socratics, a position that moves him to the elaboration of his Theory of Ideas, as a form

of response to the criticisms addressed by him to the propositions he analyzed. Aristotle, looking at the solution proposed by his master, faced with the debate raised by the rejection of Parmenides' monism and the pre-Socratic theories of flux and movement, such as atomism, establishes a new solution<sup>(5-6,8-10)</sup>.

He identified controversial aspects in the dualistic theory proposed by Plato, called the Theory of Ideas, which he came to reject. The issue raised concerns about the difficulties of explaining the relationship between the intelligible and the sensible worlds. His main objection to Platonic dualism is centered on attributing a supposed relationship between these worlds, which can be considered a version of the relationship paradox<sup>(8)</sup>.

It is known that any relationship can be of two types: internal or external. An internal relationship between 'A' and 'B' occurs when 'A' and 'B' are considered to have common elements - in Set Theory language, there is an intersection between 'A' and 'B'. In this sense, 'A' and 'B' have the same nature and the relations are unproblematic. On the other hand, an external relation between 'A' and 'B' occurs when there are no common elements between 'A' and 'B'. This is the intelligible world and the sensible world, being different natures. The relationship between A and B must be made through intermediaries, that is, an external point, which can be called C, and which serves as a link between A and B. Now, the relationship between 'A', 'B', and 'C', will also be an external relationship, requiring a point 'D' that relates the others to each other; leading to regression to infinity. There is a paradox: either the relation is internal, and then there is no problem to explain it, but it is no longer a dualism or the relation is external, and in that case, it is problematic, since it establishes the infinity of points in order to effect itself. Thus, whatever the choice, it is impossible to establish the connection between the intelligible and the sensible world<sup>(5-6,8-10)</sup>.

In order to avoid this kind of problem, Aristotle considers necessary a new starting point for his metaphysics, that is, his conception of

the real, thus avoiding dualism. This new starting point consists of a conception of reality according to which what exists is the individual substance, that is, the concrete material individual. This is the ultimate constituent of reality, which avoids dualism, so the reality is composed of a set of concrete material individuals<sup>(8-10)</sup>.

The Aristotelian argumentative strategy is to introduce Platonic dualism into the individual, i.e. the individual substance. Matter and form are inseparable, constituting unity. There are no pure forms or ideas as there are in the Platonic world. It is the human intellect that, through abstraction, separates matter and form in the process of knowing reality, relating objects that have the same form and abstracting their matter and their particular characteristics<sup>(5-6,8-10)</sup>.

Moreover, Aristotle is interested in identifying the principles, i.e., the rules by which science should be guided in the investigation of its object and the presentation of its results. Nature philosophy is a discipline distinct from science because it is responsible for formulating general principles that should guide the specific work of the natural scientist, providing him/her with parameters to formulate his/her hypotheses and conduct his/her investigations. These principles are autarky or self-sufficiency and hylomorphism<sup>(5-6,8-10)</sup>.

Autarky is understood as intrinsic perfection by which something preserves itself independently of external conditions. Everything that has this principle in itself is called perfect, that is, it guarantees all the activities and functions necessary to maintain itself being what it is. The same term (*telos*) can designate, in other contexts, the completion of a given thing, understood as its plenitude or intrinsic perfection. Hylomorphism derives from *hylé* (matter) and *morphe* (form). It is the set of essential characteristics that define what something is. Natural beings have, besides form, another constitutive principle, matter. This is understood as nature and, therefore, presents itself as the principle by which the natural being determines itself to a movement<sup>(5-6,8-10)</sup>.

The same argumentative strategy is used by Aristotle regarding the notion of cause and the causality problem when introducing the four

causes theory, namely: material cause, formal cause, efficient cause, and final cause, showing that previous philosophers, by not making this distinction, ended up committing mistakes. He then makes the distinction between the four senses or dimensions of causality<sup>(5-6,8-10)</sup>.

The causes are four evident modes: the formal cause deals with the model with which the thing is what it is and proposes to answer the question: what is 'x'? The material cause indicates the constituent element of the thing under scrutiny, that is, the matter of which it is made, and sets out to answer the question - what is 'x' made of? The efficient cause consists in the primary source of change, that is, the agent of the thing's transformation; acting in this way, it seeks to redress the question: why is 'x' 'x'? And, finally, the final cause. This seeks to answer the question - why 'x'? This way, it aims to identify the objective, the purpose, and the finality<sup>(5-6,8-10)</sup>.

For Aristotle, examining causes allows one to know their principles; for him, a cause is what the beginning of change or rest comes from. For example, the one who deliberates is the cause, just as the father is the cause of the child and, in general, the producer is the cause of what is produced, and that which effects change is the cause of that which is changed. In addition, cause is called an end, that is, that in view of which something is done. For example, walking to promote health; in fact, why walking? One says that the end is to be healthy and, thus, one believes to have given the cause<sup>(5-6,8-10)</sup>.

Everything that - one thing having initiated the movement - comes to be an intermediary is also called a cause. For the purpose, for example, of health, and weight loss. Thus, there are several causes for the same thing, not by concomitance; for example, both the art of sculpting and the bronze are causes of the statue not while it is another thing, but while it is the statue, although not in the same way - one is as matter, the other is as that from which it comes<sup>(5-6,8-10)</sup>.

Going forward, it has been possible throughout the history of philosophy to recognize that Aristotle's philosophical thinking

is systematic and, therefore, that this system constitutes an integrated vision of knowledge and that it is subdivided into specific areas. Thus, the Aristotelian system is structured in three parts, namely: theoretical knowledge, practical knowledge, and productive knowledge<sup>(5-6,8-10)</sup>.

In the Aristotelian system, theoretical knowledge, which constitutes science as knowledge of reality, is divided into general science - what Aristotle calls First Philosophy, later known as metaphysics or ontology; that is, the science of Being as Being, the most general characteristics of reality being considered in the abstract, and includes theology and mathematics. Natural science - knowledge of natural reality, divided into physics and astronomy - sciences that examine the Being in motion. The treatise on physics contains an analysis of natural reality, the laws of motion in the physical world, and the four causes, and concerns the sublunar world, that is, everything from the moon down; in life science - science that investigates living being in motion; and psychology - the study of living, sentient, intelligent being in motion<sup>(5-6,8-10)</sup>.

The second part of the system consists of practical knowledge - it includes ethics and politics and its goal is to establish norms and criteria for good action, that is, correct and effective action. The third part of the system is characterized by the productive knowledge or *poiesis* - covering, above all, aesthetic studies - the productive or creative arts. Aristotle's view of the knowledge process is more linear than Plato's, thus, there are no breaks, nor a process of deviation and adaptation of the gaze as occurs with the prisoner in Plato's allegory of the cave; on the contrary, it is an accumulative process, in which step by step one progresses from the previous stage to the next based on the knowledge already obtained, each stage presupposes the previous one<sup>(5-6,8-10)</sup>.

The beginning of the productive knowing process or *poiesis* is sensation. Through the sense organs, reality is captured and then stored in the memory. Later, this memory allows the individual to recognize the occurrence of similar

facts that he/she encounters in the real world, crediting him/her with the experience. In the face of this experience, he/she proposes a way of coping (*techne*) through the creation of artifacts that allow him/her to achieve a better practical result. Next, after these steps have been taken, the individual can turn to the construction of a rational explanation of the processes involved, creating the science or episteme<sup>(8)</sup>.

For the sake of a better understanding of this article, it is up to the authors to analyze the technique a little more. In Aristotle's words: "[...] in general, the *techne* does certain things that nature is incapable of doing and imitates it<sup>(8)</sup>."

This term, *techne*, can be translated as art or technique. It is known that the Greeks did not distinguish between the activity of the shoemaker and that of the sculptor, considering them all as types of *techne*. Thus, *techne* is the work of the craftsman or artisan, consisting of a knowledge of rules that allow certain results to be produced, as well as manual work. In the *techne*, one knows the 'why of things', that is, one can determine the cause. It is only at the level of *techne* that one has the possibility of teaching since teaching involves the determination of rules and causal relationships. Aristotle even observes that, in certain respects, the one who has strictly practical knowledge may have an advantage over the one who has only technical knowledge, but the one who knows the rules is superior to the individual who has only the practice because he, not only knows how to do but knows what he does and why he does it<sup>(5-6,8)</sup>.

The last and highest stage of the knowledge process is episteme or scientific knowledge. This is the real, abstract, and generic knowledge, the knowledge of concepts and principles. This theoretical knowledge is characterized by being contemplative, defined by the vision of truth, and by not having practical objectives or immediate ends. It is a free knowledge that satisfies a natural human curiosity: the desire to know. It is this free knowledge, together with abstraction and generality, that characterizes its superiority over the *techne*. It is only at the

beginning of the XVI-XVII century, with the dawn of modern science, that science and *techne* interacted, at which point the latter became a practical application of scientific knowledge<sup>(5-6,8-10)</sup>.

### **Aristotelian philosophy is the basis for the science and nursing *techne***

It is necessary to make some remarks about Florence Nightingale, starting from her work: *Notes on Nursing: What It Is and What It Is Not*, in order to point out some of her principles for this reflection development. Florence's work is considered a philosophy. Scholars point out that there are three principles of her theory: healing, leadership, and global action. His work has influenced the Nursing profession and education for more than a century. Florence believed that five aspects were essential in achieving a healthy environment, namely: pure air and water, efficient sewage, cleanliness, and light. Therefore, the planning of nursing care to be provided at home should take into consideration the patient's home aspects, as well as the family members' disposition toward health<sup>(12,13)</sup>.

Although the concepts of the metaparadigm of nursing only appeared 130 years later, Florence, in her work, identified them, namely: the human, environment, health and nursing. In Nightingale's work, nursing care has a meaning that minimally involves: feeding, body hygiene, bed organization, and appropriate bedding. She was convinced that nursing care was essential for the healing of the sick. In her view, nursing was an art, and as such, it had empirical, ethical, and scientific knowledge. In her work, she established what she believed was important in the nursing care of the sick, based on their needs<sup>(12,13)</sup>.

Florence advocated that nurses should accurately observe their patients, taking a systematized approach. She explained that nurses should develop the competence of knowing-thinking about nursing care. Florence's performance was revolutionary because of its impact on the profession and its art, in terms of nursing care to the patient. Going forward, it is necessary to identify the link between

Aristotelian thought and the Nightingalean perspective. So, let's see. Since the advent of modern science, there has been a search to identify the cause-and-effect relationship in the various phenomena present in nature. This *modus operandi* has characterized the scientific work and, from the point of view of origin, this perspective comes from Aristotelian philosophy, notably identified through his theory of the four causes. Through the use of reason, Aristotle sought to unravel this relationship and, thus, elaborate scientific knowledge. He was the first in the history of Western thought to recognize and investigate this relationship. It can be affirmed that Florence Nightingale was a reader of Aristotle, because, in her work *Notes on Nursing: what it is and what it is not*, in several passages, words such as middle term, causation, and the use of the non-contradiction principle, among others, are present. Furthermore, Florence mentions as an attribution of the nurse the systematic observation capacity as a strategy to identify the cause-and-effect relationship before the health-disease phenomenon present in care pragmatics, a typical positioning of the philosopher's legacy. In this sense, the construction of the profession's science is influenced by Aristotelian thought<sup>(1-2,5-6,8-12)</sup>.

It is known that nursing is a nascent science, whose historical development process has shown promise. It is recognized that the phenomenon present in professional pragmatics should constitute its own object of research, because it is instrumental for the specificity of the scientific knowledge built, since it limits the field and establishes the boundary of nursing as a discipline. Therefore, it is up to nursing to establish it in order to guarantee the specificity of the scientific knowledge produced. It is advocated that this object is in the work of the nurse and constitutes the essence of the profession. If we accept this premise and recognize its appearance in Florence Nightingale, nursing care is admitted as the profession's object of study<sup>(1-2,5-6,8-12)</sup>.

Regarding nursing care, it is known that it has theoretical, philosophical, and historical bases,

expressing its science and art. As a science, nursing is notable for being an investigative practice, recognized as consistent and focused on assisting in the health sciences field. Therefore, it is important to understand that, in the intrinsic and dynamic relationship between knowledge and the elaboration of a new know-how, it is necessary to question what is done with the intention of apprehending the action of caring, revealing the theoretical foundation and tendencies before the current challenges, a position admitted in Aristotelian philosophy<sup>(1-2, 5-6, 8-12)</sup>.

Thus, nursing care is one of the essential phenomena for health and human development, besides allowing the formation of social bonds, comfort, and maintenance of life in its biopsychosocial dimension. It refers to the act, the experience, and the ideas directed to the patient, family, or community. Its indelible objective is to help, offer support, facilitate, and allow the development of the state of health or the facing of death. Therefore, it has an ethical dimension, a unifying element of the Aristotelian system<sup>(1-2, 5-6, 8-12)</sup>.

Going forward, for nursing, its art (*techne*) is the intersection between knowing-thinking, knowing-coexisting, and knowing-doing. Through his *techne*, the nurse possesses a type of knowledge that allows him/her to produce certain results by providing nursing care to the patient, the family, and the community. In it, the nurse who uses it knows the 'why of things', that is, the cause can be determined. At the same time, the teaching of this technique becomes feasible for the generations in the formation process, because it is only at the technical level that one can instruct since nursing teaching involves the determination of rules and causal relations<sup>(5-6, 8-12)</sup>.

In the Aristotelian perspective, the nurse appears among the other nursing team members as the one who has a more complex type of knowledge, arising from his/her access to the scientific evidence that holds the collection developed by science. It is up to them to bring to the care and teaching scenario the scientific results of their training. In this regard, the nursing

technician, as the one with manual knowledge, can manifest greater dexterity in the use of basic techniques, for example, in the bed bath technique execution, especially considering the time spent to perform it. However, the nurse, by having the scientific knowledge for the technique foundation, is superior to the nursing technician who has only the practice, because he/she not only knows how to do but knows what he/she does and why he/she does it, having the ability to base and preserve the scientific aspects that should guide the practice of the *techne*.<sup>(1, 4, 7-12)</sup>

Therefore, the *techne* of nursing involves compliance and respect for established norms, requiring manual skills and appreciation of scientific knowledge (*episteme*), as well as the use of adequate material resources, in order to bring out nursing care in the care practice. Through know-how, the professional develops the manual skills that surround the procedures, the organizational aspects, attitudes, as well as actions that allow the operationalization of nursing care<sup>(1, 5, 6-8, 12)</sup>.

It is worth highlighting the role of know-how. Through it, the ethical and solidary commitment is built - in Aristotelian language, the practical knowledge - which is aligned with the technical-scientific competence. This knowledge is the guarantor of the ethical dimension of the nursing *techne*. It has two complementary sides. The first is that which is established in the nurse-patient relationship. Through it, the patient is perceived as a person and not as an object, therefore, a value in itself and irreducible to objectification. The second is the nurse's ability to judge the good and the bad in the dynamics of his professional action<sup>(5-8, 10, 12)</sup>.

The professional code of ethics seeks to confer a logic of conduct, but it is not about a code that the knowing-coexisting is about, but about the nurse's ability to critically evaluate his/her professional actions, described or not in a code, all this manifested in nursing care. This is an attitude of consideration, knowledge, love, and solidarity; it is a moral obligation on the part of the nurse-being. It is responsible for helping unconditionally, offering support,

security, and sympathy. It includes perceiving the other's vulnerability and need for care, moving toward him or her in a sympathetic and responsible manner<sup>(7-10)</sup>.

Sympathy - in conjunction with love - makes full communication between people possible. It constitutes an amalgam and, in this way, one cannot speak of one without referring to the other. Only one who is able to love and, by loving, is able to "sympathize with". Thus, the relationship based on sympathy allows nurses to establish in their daily care nursing interventions that meet the biopsychosocial dimension of the patient. It is known that sympathy has two forms: 'feeling with the other' and 'sympathizing with'; first 'feeling with' the other, then 'sympathizing with' the other. 'Sympathizing with' brings to consciousness the patient's particular case and a reality equal to one's own self. 'Feeling with the other' is a lower impact appearance of the emotional life, since it moves the nurse to face the joys and sorrows aroused in the care meeting with the patient; however, it is unable to produce compassion, that is, the ability to put the patient 'inside oneself', feeling for him/her; only 'sympathizing with' is able to foster this attitude, allowing the nurse to move to a humanizing attitude of his/her professional practice<sup>(11)</sup>.

In light of this statement, it can be seen that the nursing technique is not exhausted in the expression of manual skill; there is at its core a scientific, ethical, and social dimension, that is, a solidary and loving perspective. Thus, solidarity is a constitutive element of nursing care and, for this reason, the nursing *techne* cannot be dissociated from this element, since it is not the mere execution of a given procedure or observance of a rule, but the very essence of the profession<sup>(5-6,8-12)</sup>.

Further on, the knowing-coexisting encompasses the moral component that is related to the difficult choices that are made in the health care process, and that involve fundamental questions about good and evil, establishing the principles, norms, and codes that are subject to judgments of professional actions and, therefore, is directly linked to ethical action in the care pragmatics<sup>(1-2,5-6,8-12)</sup>.

It is also known that nursing care in pragmatics involves systematized planning, and goals to be achieved that encompass choices that may be conflicting. That is why ethics is the decision-making for the nursing professional's foundation because the decisions of everyday life and health come collided by the established power, going beyond its technical-scientific aspects<sup>(1-2,5-6,8-12)</sup>.

It is through thinking-knowing, knowing-doing, and knowing-coexisting that nursing is faced with the patient and identifies his/her condition as a person. Thus, he/she is recognized as having a peculiar behavior built from values, cultural patterns, and experiences that cannot be objectified and that constitute his/her ethical-existential field. It is from this context that ethical and bioethical dilemmas emerge, based on ethical-legal principles and determined by complex choices in the care process<sup>(1-2,5-6,8)</sup>.

The art of nursing values the Nightingale paradigm, because it is through it that nursing care is established in the care pragmatics. It is not only a manual ability before the actions and procedures of the technique, but a unifying element. In this sense, the Aristotelian system composed of three interrelated knowledges, namely, the theoretical knowledge, the practical knowledge, and the productive knowledge, points to the complexity that is the basis of the nursing *techne*, since it transcends the manual work. It is inherent to the profession to have knowledge that articulates with each other, with the purpose of establishing its acting<sup>(1,4,7-10)</sup>.

## CONCLUSION

In conclusion, it can be stated that Aristotelian philosophy has implications for nursing as a science and art. In the text, the term art was taken in the Aristotelian sense - *techne* - and its expression is given in the care pragmatics, in management, and in teaching. In care pragmatics, it is commonly identified from the nursing care given to the patient. It was possible to analyze the *techne* of the profession, in terms of nursing care, taking into account theoretical knowledge, productive knowledge, and practical knowledge.



It was judged that the *techne* of nursing was not exhausted in the expression of manual skill; there is at its core a scientific, ethical, and social dimension, having a solidary and loving perspective. Therefore, the nurse is not one who only possesses technical knowledge, but someone who uses this knowledge to undertake a dialogical, holistic, humanistic, and supportive relationship with the patient, the family, and the community in the act of providing nursing care. At the same time, it was admitted, a priori, that Florence Nightingale's work - *Notes on Nursing: What It Is and What It Is Not* - pointed out the elements of Aristotelian thinking that ground nursing as a science and art; in it, the Aristotelian triad (the theoretical knowledge, the productive knowledge, and the practical knowledge) has a correspondence identified by researchers in the area in the knowing-thinking, the knowing-doing and the knowing-coexisting.

Several critics point out that man is in the process of forgetting his humanity. They identify this situation from the marks that are the basis of contemporary society, especially manifested in existential emptiness and violence in its various forms. The nurse, as an integrant of social life, is not unscathed from this deleterious action. However, it is possible that, mediated by Aristotelian-Nightingalean thought, he/she may perform the reflexive movement and establish the critical position before this context and, thus, ratify or rectify his/her professional action, promoting and developing nursing care in its amplitude in knowing-thinking, knowing-doing, and knowing-coexisting.

Regarding nursing care, it is known that it has theoretical, philosophical, and historical bases of the profession, expressing its science and art. As a science, nursing is notable for being an investigative practice focused on health care. For it, professional care is one of the essential phenomena for human development, besides allowing the formation of social bonds, comfort, and the maintenance of life in its biopsychosocial and spiritual dimensions. Nursing care aims to help the patient, family, and community in the

development of the state of health or in facing death. It is based on scientific knowledge, being permeated by love and solidarity, among others; it is a moral, sympathetic, and responsible obligation of the nurse-being.

It is well known that nursing care has axiological elements that allow it to transcend manual work. These values were identified by Florence Nightingale and form an amalgam, being them: the logical value (scientific knowledge), the useful (art, technique, and management), the ethical (love and sympathy), and the social (solidarity). In a Nightingalean sense, *techne* is not only a manual skill, but a conjugation between the triad, knowing-thinking (logical value), knowing-doing (useful value), and knowing-coexisting (ethical and social value), its Aristotelian equivalent is expressed by *episteme*, *praxis*, and *poiesis* in an indissoluble relationship.

It is through knowing-thinking that nurses justify their professional actions by valuing the scientific knowledge that they use to legitimize their skills in care practice, research, and teaching. Through knowing-doing, the professional develops the manual skills that surround the procedures, the organizational aspects, the attitudes, and the actions that allow nursing care to be operationalized. Knowing-coexisting, on the other hand, guarantees the ethical dimension of the *techne*, and has two complementary sides. The first is in the nurse-patient relationship when the patient ceases to be a thing and is seen as a person. The second is the professional's ability to judge the good and the bad in his/her actions. Knowledge is not in competition or hierarchized, but rather, it is kept in a position of equality, giving balance to professional pragmatics and teaching, bringing forth scientific, ethical, and solidary nursing care.

Furthermore, through the mastery of nursing *techne*, nurses possess the knowledge that allows them to produce certain results that aim at the patient's, family's, and community's well-being. In addition, they know the 'why of things', being able to determine the cause-effect relationship, a fundamental element of

scientific knowledge, which makes it possible to teach this skill to the generations in the education process.

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