SPECTRAL COMMUNICATION IN NURSING CARE AND THE RISKS OF VIRTUALITY

La comunicación espectral en el cuidado de enfermería y los riesgos de la virtualidad

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Abstract

The communication process in nursing care plays a key role in caring for people entrusted by society to professionals in this discipline. The crisis caused by the COVID 19 pandemic has highlighted the serious situation of nurse-person communication because it has not only become complex but frankly spectral, in other words, communication is permeated by a strong bodily presence, paradoxically disembodied, which provides guidelines for discussing identity. (Sánchez Martínez). The spectral is not a static concept, because as technology advances, the frequency ranges used in communications increase (or decrease). Today human survival is threatened globally and the new communication strategies show that it is not a simple action since the identity and image of the nurse herself by incorporating virtuality as an alternative way of caring is also threatened, as well as the identity dependent on corporeality is diluted and threatened. Due to the COVID19 pandemic, face-to-face interpersonal communication is compromised, as well as the confidentiality of information, privacy and security. The public and the private have lost their limits crossed by virtuality, which is the technological phenomenon of digital as a new way of relating, both in time and space

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and provides experiences that are perhaps only possible in that dimension. However, there is also a distorted image of the subject, the setting of care and the role of health service providers. Due to the COVID19 pandemic, the public and the private have requested their limits crossed by the virtuality that is the technological phenomenon of digital as a way of relating, both in time and space, and provides experiences that are perhaps only possible in that dimension for which there is a distorted image of the subject, the setting of care and the role of health service providers.

Keywords: Communication; Spectral communication; Care; Nursing; Virtuality; COVID-19

Resumen

El proceso de comunicación en el cuidado de enfermería ocupa un papel primordial en la atención de las personas confiadas por la sociedad a los profesionales de esta disciplina. La crisis suscitada por la pandemia de COVID 19 ha puesto en evidencia la grave situación de la comunicación enfermera-persona porque no solo se ha tornado compleja sino francamente espectral es decir que la comunicación está permeada por una fuerte presencia corporal paradójicamente sin cuerpo, lo cual da pauta para discutir la identidad. (Sánchez Martínez). Lo espectral no es un concepto estático, pues a medida que avanza la tecnología aumentan (o disminuyen) rangos de frecuencia utilizados en comunicaciones. Hoy la supervivencia humana se encuentra amenazada de manera global y las nuevas estrategias de comunicación ponen de manifiesto que no se trata de una simple acción ya que se ve amenazada la identidad y la imagen de la propia enfermera al incorporar la virtualidad como forma alternativa de cuidar. La identidad dependiente de la corporalidad se ve diluida y amenazada. Por la pandemia COVID-19 está comprometida la comunicación interpersonal cara a cara, así mismo la confidencialidad de la información, la privacidad y la seguridad. Lo público y lo privado han pedido sus límites atravesados por la virtualidad que es el fenómeno tecnológico de lo digital como una forma de relacionarse, tanto en el tiempo como en el espacio y brinda experiencias que tal vez solo son posibles en esa dimensión por lo cual existe una imagen distorsionada del sujeto, del escenario de la atención y del papel de los prestadores de servicios de salud.

Palabras clave: Comunicación; Comunicación espectral; Cuidado; Enfermería; Virtualidad; COVID-19

1. INTRODUCTION

Undoubtedly, the COVID-19 pandemic has impacted all aspects of the lives of both the common man and health professionals. Communication, after its fundamental role in human evolution and in human knowledge, has become an essential pillar of everyday life. All social institutions: family, school, society have seen their strengthening and decline influenced by communication.

In Mexico, the Federal Government, the Ministry of Health, as well as the Undersecretary of Prevention and Health Promotion declared a health emergency and established the suspension of non-essential activities from March 30, 2020. Mexico thus adopted the virtual education modality that involves the use of ICTs. In the case of higher education, most institutions proceeded to move to this modality, taking advantage of their progress and infrastructure in this area (Hernández, R. A. M., 2020, p3).

The mandatory suspension of classes at all levels of education, with the confinement of students and teachers to their homes, has created a network of multiple effects on all actors in the educational process. Teachers have left the classroom to which they have been accustomed, to become forced users of the technological tools that exist to interact remotely between themselves and their students, while having to deal with the personal pressures of confinement and its economic, health and emotional implications.

Students, at home, share, if any, digital devices and the internet network used by the whole family, and have the need to continue their learning activities, through homework, virtual conferences while facing the possible effects of the pandemic on health, emotions, physical activities and those of youth (Sanchez Mendiola, M., 2020, p.3). In this complex environment, uncertainty holds students, teachers and the general population in its grip.

Behind the substantive problems of social order, ethics and knowledge lies the intersubjective communication of thought between humans and now between machines designed to accelerate the processes of understanding -thinking machines-. The present problems of intolerance - gender violence, racism, migration - are clearly defined by the crisis of communication between humans.

The examples of human survival refer us to the first men; Cro-Magnon and Neanderthal that when they hybridized gave origin to homo sapiens. But their relationships were also conflicting to the extent that the survival of the former could have been the annihilation of the latter. The phonation capacity of the Cro-Magnons prevailed over that of the Neanderthals; and therefore their capacity for language and communication. Today it is recognized the persistence of the genetic imprint of both; but also the social participation of the former in the extinction of the Neanderthals (Máxima, U. J., 2020, p.20).

On the other hand, the myth of the tower of Babel tries to highlight the importance of communication and collaboration among men. Language and communication allow the

achievement of common purposes. But it also highlights through this story the role of the translator of languages and the recognition of the diversity of the forms of communication of men (Conde Rubio, R., 2019, p.4).

In the face of the pandemic's advance and the abundance of information available, there is a vacuum regarding the risks of the virtual communication adopted.

2. OBJECTIVE

The aim of this paper is to reflect on the risks of spectral communication in care and the risks of virtuality of nursing professionals due to the COVID 19 pandemic.

3. SPECTRAL COMMUNICATION

Spectral communication is part of the ways of relating in our era of communicative saturation that go from conversation and chatting (face to face) to "mediatized" and "spectral" communication. Marc Guillaume (2000, p.25), points out that -when the actors of communication partly dispense with the usual resources of control and identification, such as the name and surname and, even, the corporal presence (case of the telephone conversation or the use of the Internet)- it raises a diversification of the relations of communication including the one that requires the own identity and the relation with the body. It is an inauguration of a new Babel in which the different components of identity participate, here comes into play all the symbolic personal and collective cultural communication, from which springs the "belonging", the "matria", the affinity from which the relationship with others is born: the principle of otherness (Sánchez Martínez, J. A., 2010, p.6).

As ancient forms of "spectrality", the cases of the anonymous letter, the mask and disguise in certain types of parties or the use of pseudonyms in literature are cited. Another example is the need to wear masks as a protective measure during the pandemic. In all cases, identity loses its objective of reaffirming the person as someone singular. The very impotence of human communication that turns the reflective act into self-reflection by dispensing with the interlocutor (Reck, I., 1999, p.2-3).

For Foucault, taking care of oneself starts from the relation of identity of these two elements - belonging and identity -; the concept of identity defines the subject that now at a distance depending on electronic devices, situates the relation in a new identity.

3.1. Nursing practice and communication

In the practice of nursing, communication plays a major role in the helping relationship; however, communication is not only verbal since it is nourished by all the corporal expression and even by silence. In the encounter of the nurse and the people under her action, the communication frames not only one more relation; but an alternation, an alterity. Communication is a relational human activity in which subjective consciences are put into play that from more or less shared knowledge manage to

understand in a similar way the basic strategies of behaviors in the world of life and, as a result, manage to understand each other and confer similar meanings to the environment (Madrigal Ramirez, M., Forero Pulido, C. and Escobar, C., 2013, p.49).

The nursing professional supports a growing social pressure not only by the demographic changes of the population including those due to migration or aging; but by the own problems of sanitary character and its repercussions in the social order as the own expectations and demands of the citizens in general. In this order of ideas it is not possible to remain on the sidelines of the advance in information and communication technologies -ICT- and face the vertigo of the advance in health care in the first level care -tele-nursing, telecare, telehealth- that poses proactively for self-care, home visit, online counseling or remote assistance (Girbau García, M. R., Galimany Masclansb, J. and Salas Miravitllesa, K., 2010, p.5).

The new scenarios of care and the very process of communication between actors confront the risks of virtuality that wear down the eventual otherness and identity itself. Culture as a world of conversations, of plots of meaning and interpretable signs allows to establish a recognizable and significant order to our experience and the government of our conduct (Chardon, M. C., 2008, p.5); including the own identity and the otherness with the other. This construction of care capable of creating regulations that take care of another not even present, but ethically considered as a peer to care for, allows us to think of a future of prevention more as an ideality in the face of the dilution of the subject of care itself.

All these ways of relating of the nurse in the care she provides are trapped in a mechanism of regulation, control, automation and technification of the very act of communication that is spectralized.

3.2. Virtuality and the other

Nowadays, the other has become an object of production by being diluted in this complex and diverse reality; that is to say, the body, sex and the social relationship itself have become diverse. An example in the production of the other is the indifferentiation of the sexes and sexual practices take on a useless character - there is no longer a need for sexuality for its reproduction. In the age of the transsexual, conflicts are perpetuated even though the real otherness of the sexes has disappeared.

In the virtuality of the network, the subjects no longer find themselves as persons, but as texts that are reinterpreted in each relationship/interaction and at the same time re-signified. But it is necessary to say that it is not a free choice of the personality since the assignment comes from the others. The person who enters the network is nothing more than an object of semiotic construction - a sign - which is expressed by a concrete text (Sixto García, J., Ugarte, M., 2008, p.1). On the web, the person remains through a process of semantic fragmentation - the person is a set of statements - i.e. it is textualized. Therefore, its existence is linked to diverse meanings that emerge in the process of reception. In the network, the person is another/something that is constantly reinterpreted without us realizing it, that is to say, otherness itself is threatened.

The identity on which otherness depends is actually a construction of identities where multiple factors of historical character converge - vitally linked to the space and time we live - that when combined give us meaning (Muros, B. 2011,52). The person through the diverse lived situations becomes a plural being. It is worth mentioning that it is not enough for people to perceive themselves as different under some aspect; they also have to be perceived and recognized as such. Every identity (individual or collective) requires the sanction of social recognition in order to exist socially and publicly (Giménez, G., 1997, p.38).

Identity implies otherness since it indicates both what it is and what it is not. In this sense, virtuality itself shares with identity this characteristic of delimiting what it is from what it is not. In this regard, the modern and post-modern perspective differ when the latter points out that social actors -individuals and collectivity- conceptualize identity as fragmentation, as a mutable body, a removable element of the actor, something very different from what we think about identity to analyze the virtual space (Sánchez Martínez, J. A., 2010, p.40).

In illness, disability or death, otherness is clearly threatened and nothing can be done against this since the body is a place of otherness. It seems that all success or failure depends on the individual will and even more so on a will outside of the social. The body itself, the technical means of the human being and the motor of the reflection of the personal being, derives the most intimate part from the above. Human identity always derives from the body and any trait or mark that deviates from this, attempts against identity.

According to Bourdieu, the processes of incorporation and internalization of bodily habitus are imitation of others (Méndez, L., 2002, p.123). The practices observed in different groups of this bodily habitus show particular forms of consciousness.

The body in the practice of care is the material underpinning of the necessary communication of the nurse-person relationship. Five are the trends that are affecting communication and the body of care: the exponential growth of information, the increasing diversity of humanity, trends in health care, trends in health-disease and enlightened activism (Salazar Maya, A. M., 2011, p.296).

With respect to the exponential growth of information, the confidentiality of information, privacy and security are constantly being compromised. What is public and what is private has lost its boundaries.

With regard to the growing diversity of humanity, we live in a world of demographic changes, economic orientations, political and social differences and different health-disease profiles; moreover, there are cultural differences that make it impossible to ignore existing and emerging minorities.

When it comes to health care, cost and expenditure have played a preponderant role in decision-making and in the orientation of public policies. There is an economic contradiction between the needs of the majority and investment in health. Universal coverage and health for all are becoming increasingly distant.

The trend of the health-disease process recognizes the emergence of new diseases and the pre-existence of old diseases; as well as the growing importance of chronic diseases. With the aging of the population the care of chronic and degenerative diseases; as well as the demand for patient care at the end of life.

Enlightened activism refers to the growing involvement of ordinary citizens in their health and care. It is a growing defence of people's right to actively participate in their care by making full use of their empowerment with regard to health problems and their care.

4. METHODOLOGY

The research process began with the statement of the problem, culminating with the question "why", which gives meaning to the research activity (Salas Roca, 2014).

The research question allowed the formulation of objectives, constituting the guiding axis of the research, the discussion of results and the conclusions with which the perspectives on the question posed are answered (Ortega and Segovia 2017).

The systemic analysis of the object of study facilitated the generation of proposals for its integral development within the scope of the sustainability of the problem.

The theoretical support, based on documentation provides clarity during the research process through the method of systemic analysis of the object of study, with explanatory arguments of the problem, assumptions axis of study called hypotheses.

It is necessary to emphasize that the documentary investigation, implies search, analysis and selection of the information (Tancara,1993), that by its documentary character, is the proposal of Baudrillard (2000), about the spectral communication and the arguments around the nursing care in the frame of the sanitary contingency due to the pandemic.

In such a way, the reading of documents from the WEB - especially Google Scholar - was carried out, which are one more way of the reality that surrounds us.

5. CONCLUSION

Reflecting on the risks of virtual communication strategies assumed in the care of nursing professionals due to the COVID-19 pandemic, it can be seen that the task of providing care has become difficult not only because of social and cultural changes linked to an equally unstable reality that tends to disappear, but also because of the

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unstable nature of realities and their communication. The being and doing of nursing is subject to the random and emergent reality by the pandemic of COVID-19 that forces it to remake itself every day, every hour in its true nature of change. The dangers of virtuality derive from its similarity to dreams of order and universalization to the detriment of a different reality for each person. The body in virtuality tends to be non-human since at every moment it reinvents itself and incorporates bodily characteristics that do not belong to it, but at the same time it recognizes them as part of its self. The virtual body adapts and duplicates itself simultaneously in time, but with a certain social memory.

Care is a communicative act that requires scientific and technological knowledge and the cultural context where the subjects of care live, work, recreate and get sick. The use of spectral communication optimizes these processes, within the framework of nursing knowledge management, its importance in health is unquestionable, especially in times of social isolation by the Covid-19 Pandemic being an essential tool in the delivery of care that involves considering the risks that these have in the spectral part. (Vialart Vidal, N., 2016).

The concept of spectral communication is particularly revealing about the risks of virtuality and is even more so if one considers how little literature refers to it despite its importance for the identity of the subject of care as a substantive motive for being and doing care.

In virtuality there is a distorted image of the subject, the scenario of care and the role of health service providers -such as nurses-; being necessary the recovery of the truth of care.

The reflective, critical task must scrutinize the apparent and stop listening, in the manner of Odysseus, to the song of the sirens of science outside the history of men and their societies.

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