SCIENTIFIC CONSTRUCTION OF NURSES' WORK DURING PANDEMICS: INTEGRATIVE REVIEW

CONSTRUÇÃO CIENTÍFICA DA ATUAÇÃO DAS ENFERMEIRAS EM PANDEMIAS: REVISÃO INTEGRATIVA

CONSTRUCCIÓN CIENTÍFICA DEL TRABAJO DE LAS ENFERMERAS EN PANDEMIAS: REVISIÓN INTEGRATIVA

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Objective: to analyze the theme of publications related to nurses' work during pandemics. Method: integrative literature review at the Virtual Health Library database, from May to June 2020. The thematic content analysis technique was used for data analysis. Results: the final sample consisted of 15 articles for evaluation. The findings were categorized into the themes: occupational risks, management, working conditions and health education. The macro category work is dissociated from recognition, social valorization, unawareness of the profession and the work process. Conclusion: the analyzed publications do not bring innovative aspects in the field of human care and health conception, much less a conception of health other than the absence of disease, beyond a physical body, being nurses' role in the pandemics related to the work centralization.

Descriptors: Nursing. Nurses. Pandemics.

Objetivo: analisar a temática das publicações referentes à atuação das enfermeiras em pandemias. Método: revisão integrativa da literatura em base de dados da Biblioteca Virtual em Saúde, no período de maio a junho de 2020. Utilizou-se a técnica de análise temática de conteúdo para a análise dos dados. Resultados: a amostra final foi composta de 15 artigos para avaliação. Os achados foram categorizados nos temas: riscos ocupacionais, gestão, condições de trabalho e educação em saúde. Percebeu-se que a macro categoria trabalho está dissociada do reconhecimento, da valorização social, do desconhecimento da profissão e do processo de trabalho. Conclusão: as publicações analisadas não trazem aspectos inovadores no campo do cuidado humano e da concepção de saúde, muito menos de uma concepção de saúde que não seja a ausência de doença, além de um corpo físico, e a atuação das enfermeiras nas pandemias está relacionada à centralização do trabalho.

Descritores: Enfermagem. Enfermeiras. Pandemias.

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Objetivo: analizar el tema de las publicaciones relacionadas con el trabajo de las enfermeras en pandemias. Método: revisión integradora de la literatura en la base de datos de la Biblioteca Virtual de Salud, de mayo a junio de 2020. La técnica de análisis de contenido temático se utilizó para el análisis de datos. Resultados: la muestra final consistió en 15 artículos para su evaluación. Los ballazgos se clasificaron en los temas: riesgos laborales, gestión, condiciones de trabajo y educación sanitaria. Se observó que la categoría macro trabajo está desvinculada del reconocimiento, la valorización social, el desconocimiento de la profesión y del proceso de trabajo. Conclusión: las publicaciones analizadas no aportan aspectos innovadores en el campo de la atención bumana y la concepción de la salud, y mucho menos una concepción de la salud distinta de la ausencia de enfermedad, además de un cuerpo físico, y el papel de las enfermeras en las pandemias está relacionado con la centralización del trabajo.

Descriptores: Enfermería. Enfermeras. Pandemias.

Introduction

Nursing is an action or activity carried out predominantly by women who need it to reproduce their own existence, use knowledge from other sciences and a synthesis produced by themselves, to apprehend their work object in what interests the field of care in the profession, aiming to meet the social and health needs of the Brazilian population, thus keeping an intrinsic relationship with the political dimension and its social processes⁽¹⁾.

The nurse bases her performance on the essence and specificity of care to the individual, family or community. Her scope of the own attributions is marked by the indissociability of care and management and exercised in the dimensions of health promotion, disease prevention, health recovery and rehabilitation. Thus, nurses have as their object of work the care of the person, through a nursing process that must be constructed through specific theories, aiming at the comfort, embracement and wellbeing of the person⁽²⁾.

More specifically, the dimensions of nursing knowledge are: empirical, ethical, personal, aesthetic and emancipatory knowledge. The empirical is based on popular knowledge. Ethical refers to social and behavioral values that may be linked to the professional code. Personal means self-knowledge and self-accomplishment, which are horizontally related. Aesthetic is related to health education issues, teaching and learning. Emancipatory knowledge is contextualized through the critical analysis of the situation and the environment where the teaching and learning experience occurs⁽³⁾.

As for the nurse's fields of activity and her work process, the following are identified: managing, assisting, teaching, researching and participating politically. These are dynamic and present constant opportunities, are contained in each other, presenting their elements and the interrelationship between them, demonstrating their complexity and that nursing work is multifaceted, requires a set of knowledge, skills and attitudes properly articulated in the daily life of services and in health systems; this work process had to adapt to the new pandemic reality⁽⁴⁾.

In this scenario, Brazil recorded the first confirmed case of COVID-19 on February 26, 2020, imported from Italy⁽⁵⁾, and by April 20, 2020, 40,581 confirmed cases and 2,845 deaths had already been recorded in the country⁽⁶⁾, triggering the need for a series of strategic actions to contain the spread and number of hospitalizations. From this perspective, health professionals, especially nurses and physicians, have been appointed as the actors of the pandemic front, as they have played an important role in the dimensions of management, research and care, being repeatedly present in discussions and news related to COVID-19⁽⁷⁾.

Thus, in the context of health teams, nursing constitutes more than half of the workforce in Brazil and the need to reinvent and value the profession emerges through the qualification and development of professionals aligned with the Unified Health System (UHS). Strengthening nursing leadership is the main goal, which, even with a marked role in coping with the pandemic, lacks political and management protagonism for decision-making and rights achievement⁽⁸⁾.

Parallel to these notes, when thinking about the centrality of the nurse's work, especially in crisis, epidemic and pandemic situations, and at the same time, when we analyze the social problem of this field, marked by a social and technical division of work, this article questions: how is the work of nurses in pandemic times constructed in the scientific field? This research aims to analyze the theme of Brazilian publications related to the performance of nurses in pandemic time.

Method

This research used two study methods, one to obtain and the other to analyze the data. In the first stage, to obtain the data, an integrative literature review was carried out, whose purpose was to synthesize results obtained by studies on a theme or question, in a comprehensive, orderly and systematic way⁽⁹⁻¹⁰⁾. It was based on the constitution of a broader analysis of the literature, a fact that contributes to reflections related to research methods and results and allows discussions about future investigations⁽¹¹⁾. Subsequently, thematic content analysis was performed, which is characterized as a technique for analyzing information about human behavior, enabling a very varied application, and has two functions: verification of hypotheses and/ or questions and discovery of manifested contents⁽¹²⁾.

For the literature review, the steps recommended in a study⁽⁹⁾ were followed, which indicates as an initial stage the identification of the theme and the selection of the hypothesis or question, which, for this study, was as follows: "How is the work of nurses in pandemic times constructed in the Brazilian scientific field?" Next, progress was made to the other stages, in the following order: definition of inclusion and exclusion criteria, selection of the sample, determination of the information to be collected and categorization of the selected studies, analysis and discussion of the findings until reaching the synthesis of knowledge.

To fulfill this stage, the bibliographic survey was carried out through consultation with the database of the Virtual Health Library (VHL), from May to June 2020. The search strategy used was composed of the following combined descriptors: (enfermagem OR nursing OR enfermería) AND (enfermeira OR enfermeiras OR nurse OR nurses OR enfermera) AND (enfermeiro OR enfermeiros) AND (pandemias OR pandemic OR pandemia). The inclusion criteria adopted were: original articles or experience reports in Portuguese, English and Spanish related to the theme, of any year and with availability of free access. The exclusion criteria used were incomplete articles or articles that did not address the proposed theme. After using the search strategy, 49 articles were found, and after applying the criteria, only 15 remained for analysis.

After selecting the articles, there was the determination of the relevant information for the research, categorization, analysis and summarization of the results. To achieve an efficient organization, the findings were categorized into a synthesis-chart, on the themes occupational risks, management, working conditions and health education⁽¹⁰⁻¹¹⁾, and later evaluated using the thematic content analysis technique.

It is noteworthy that there was no need to submit this research to the Research Ethics Committee because this study uses secondary data from other studies⁽¹³⁾.

Results

The results of this search are presented in the following two charts. Chart 1 describes the title, type of study, objectives and categories of the articles.

Chart 1 – Characterization of the studies included in the integrative review according to the title of the article, type of study, objective and categories. Brazil, May-Jun. 2020 (continued)

Title of the article	Type of study	Objective(s)	Category
Expanding nursing's role in responding to global pandemics 5/14/2018 ⁽¹⁴⁾ .	Qualitative	To analyze and recognize the main symptoms of the disease, aiming to alert the population and preventive services to prevent and/or reduce the spread of the virus.	Health education
Moral Distress in the Midst of the COVID-19 Pandemic ⁽¹⁵⁾ .	Qualitative	To analyze the moral distress of nurses during the COVID-19 pandemic.	Occupational risk
COVID-19 in the Year of the Nurse ⁽¹⁶⁾ .	Qualitative	To analyze the increasing illness of nurses before this pandemic.	Occupational risk
A qualitative study on the psychological experience of caregivers of COVID-19 patients ⁽¹⁷⁾ .	Qualitative	To explore the psychology of nurses who care for patients with COVID-19.	Occupational risk
Psychological stress of ICU nurses in the time of COVID-19 ⁽¹⁸⁾ .	Qualitative	To evaluate the psychological impacts that newly graduated nurses suffer during COVID-19 infection.	Occupational risk
The professional values of Chilean nurses in times of sanitary crisis by Covid-19 ⁽¹⁹⁾ .	Qualitative	To analyze the values and behavior of a person and nurses before the Covid-19 pandemic.	Occupational risk
Management of the coronavirus pandemic in a hospital: professional experience report ⁽²⁰⁾ .	Qualitative	To describe the management experience for the care of confirmed or suspected Coronavirus patients in a hospital in the metropolitan region of Porto Alegre.	Management
Management and leadership of nursing services in the emergency plan for the pandemic COVID-19: the experience of the clinic hospital of Barcelona ⁽²¹⁾ .	Qualitative	To analyze the demands of nurses to manage the COVID-19 pandemic, in addition to challenging both the provision of personnel and supplies and sanitary material.	Management
What the COVID-19 pandemic tells us about the need to develop resilience in the nursing workforce ⁽²²⁾ .	Qualitative	To analyze briefly previous pandemics and disasters that have affected health systems, as well as the 2020 COVID-19 pandemic, and consider how leading nurses can support staff and show organizational resilience during this emergency.	Management

Title of the article	Type of study	Objective(s)	Category
Estimating Weekly Call Volume to a National Nurse Telephone Triage Line in an Influenza Pandemic ⁽²³⁾ .	Quantitative	To analyze Nursing screening lines and call rates for hospitalization based on experience with the nursing screening line.	Management
Influenza infection control practices in labor and delivery units during the 2009 H1N1 influenza pandemic ⁽²⁴⁾ .	Qualitative	To assess the presence and usefulness of written policies and practices on infection control, consistent with the guidelines of the Center for Disease Control and Prevention (CDC) in the hospital's labor and delivery units (L&D) during the 2009 H1N1 influenza pandemic.	Management
Nurses: Courageous, Committed, and Fed Up ⁽²⁵⁾ .	Qualitative	To recognize the critical role that nurses and midwives play in ensuring the health of the world population.	Working conditions
Legal aspects of COVID-19 pandemic management for community nurses ⁽²⁶⁾ .	Qualitative	To analyze how working conditions can develop in relation to the law on professional responsibility and briefly analyze the likely increase in voluntary workers, as well as an important aspect of patient confidentiality.	Working conditions
100 years on: the Spanish Flu, pandemics and keeping nurses safe ⁽²⁷⁾ .	Qualitative	To analyze the context in which nurses are during the past 100 years, bringing information on the proportion of deaths between the general population and health professionals.	Working conditions
Nurses and practitioners during the flu epidemic of 1918: Analysis through the Spanish press ⁽²⁸⁾ .	Qualitative	To address the events related to the epidemic in the relationship with nursing professionals from the periodic perspective.	Working conditions

Chart 1 – Characterization of the studies included in the integrative review according to the title of the article, type of study, objective and categories. Brazil, May-Jun. 2020 (conclusion)

Source: Created by the authors.

Chart 2 describes the main results of the articles analyzed according to the title of the

article and the results found.

Article	Results
Psychological stress of ICU nurses in the time of COVID-19 ^{(18).}	Due to the increased number of cases of the COVID-19 pandemic, health systems overload and generate psychological distress to nurses. When researching 85 ICU nurses, the main manifestations were: decreased appetite or indigestion (59%), fatigue (55%), difficulty to sleep (45%), nervousness (28%), frequent crying (26%), and even suicidal thoughts (2%). Nurses without professional experience face a major psychological crisis. Therefore, these psychological impacts must be evaluated and resolved, so that they do not become a risk factor for COVID-19 infection, since this factor influences immunity and self-protection, as well as the quality and safety of the health system.
Moral Distress in the Midst of the COVID-19 Pandemic ⁽¹⁵⁾ .	Nurses on the front line of treatment of patients with COVID-19 are at risk at various levels of developing moral distress. The community can help support nurses by staying at home, to flatten the curve, and by maintaining social distance when they need to leave to get essential supplies. Moreover, we can do random acts of kindness for nurses in our lives.
COVID-19 in the Year of the Nurse ⁽¹⁶⁾ .	Nurses are becoming patient due to the new pandemic that plagues the world, COVID-19. This is happening because of a lack of knowledge about this new pandemic or the scarcity of resources needed to combat it safely. In addition, it informs about the signs and symptoms of COVID-19, which starts quickly, causing an increase in hospitalizations and in the capacity of health systems, because if they are not adequately addressed, they compromise the patients and the staff of the hospital that provides the care.
A qualitative study on the psychological experience of caregivers of COVID-19 patients ⁽¹⁷⁾ .	The psychological experience of nurses caring for patients with COVID-19 can be summarized in four themes. First, the negative emotions present in the initial stage, which consist of fatigue, discomfort and helplessness, were caused by high intensity work, fear, anxiety and concern for patients and family members. Second, self-control styles included psychological and life adjustment, altruistic acts, team support, and rational cognition. Third, growth under pressure, which included greater affection and gratitude, development of professional responsibility and self-reflection. Finally, positive emotions occurred simultaneously with negative emotions.

Chart 2 – Description of the main results of the articles selected according to the title of the manuscript and its results. Brazil, May-Jun. 2020 (continued)

Article	Results
The professional values of Chilean nurses in times of sanitary crisis by Covid-19 ⁽¹⁹⁾ .	Nurses in Chile face new unknown medical situations that can threaten their lives. Students and colleagues observe how professional values, so closely linked to the professional, strengthen them, promoting their professional identities and appropriate work behaviors, how to prioritize the needs and demands of care for individuals, families and communities, take care of them, protect their moral and legal rights, provide dedicated, human and high technical care, maintaining their privacy and confidentiality, making quality 24-hour shifts and isolating themselves from their families to "take care of them".
What the COVID-19 pandemic tells us about the need to develop resilience in the nursing workforce ⁽²²⁾ .	Most studies on resilience in health systems, such as the National Health System, are based on organizational crises, such as lack of nurses, aging of the workforce and financial constraints. However, Nursing can learn lessons from the past to become more resilient, especially considering the 2020 COVID-19 pandemic. This article briefly analyzes the previous pandemics and disasters that have affected health systems, as well as the 2020 COVID-19 pandemic, and considers how leading nurses can support the team and show organizational resilience during these emergencies. The article also discusses how leading nurses can develop their own resilience.
Management of the coronavirus pandemic in a hospital: professional experience report ⁽²⁰⁾ .	For nurses, nursing technicians and physicians, the pandemic represents a challenge for mental health. Due to the great pressure, these health professionals tend not to take care of their own mental health in the constant and tireless coping with COVID-19, a fact that provides the appearance of suffering related to anxiety and stress.
Management and leadership of nursing services in the emergency plan for the pandemic COVID-19: the experience of the clinic hospital of Barcelona ⁽²¹⁾ .	The recent onset of COVID-19 requires an understanding of the experience of the disease, its analysis of transmission, severity, isolation and management of the care performed. The COVID-19 pandemic has put the health system, attitude and collaboration to the test of the citizen, but above all, the great professionalism of all enables daily patient care. Nursing departments play a key role in providing essential care to communities during these types of disasters, which can rapidly increase services and burden the functional capacity and safety of hospitals and the health system in general. The ability to work as a team, emotional management and respect for the organizational decisions made allow facing the challenges of the pandemic.

Chart 2 – Description of the main results of the articles selected according to the title of the manuscript and its results. Brazil, May-Jun. 2020 (continued)

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and its results. Brazil, May-Jun. 2020	(continued)

Article	Results
Estimating Weekly Call Volume to a National Nurse Telephone Triage Line in an Influenza Pandemic ⁽²³⁾ .	Nurses' screening telephone lines, such as Flu on Call® of the Centers for Disease Control and Prevention (CDC), a national nurse screening line, can help reduce the increased demand for health care during an influenza pandemic by screening patients, providing advice on clinical treatments, pandemic care and information and access to prescribed antiviral drugs.
Influenza infection control practices in labor and delivery units during the 2009 H1N1 influenza pandemic ⁽²⁴⁾ .	Respondents (73.8%) reported that CDC guidance was very helpful for infection control at research and development sites during the pandemic. The presence of written infection control policies was evaluated, consistent with CDC guidelines in hospital research and development units, during the 2009 H1N1 influenza pandemic and its implementation rate, in most cases, questioning women on arrival about recent flu-like symptoms (89.4%, 89.9%), immediately initiating antiviral drugs in cases of suspected or confirmed influenza (65.2%, 49%), immediately isolating sick women from healthy women (90.7%, 84.7%), requesting that sick women wear masks during research and development (67%, 57.7%), immediately separating healthy newborns from sick mothers (50.9% 42.4%) and bathing healthy babies when stable (58.4%, 56.9%). The written policies reported for five of the six practices increased during the pandemic. Five of the six written policies remained above the baseline after the pandemic.
Nurses: Courageous, Committed, and Fed Up ⁽²⁵⁾ .	The nurses are moving away and manifesting. The New York State Nurses Association has filed a lawsuit against the State and several hospitals for failing to protect workers. Hospitals are fighting a provision in the COVID-19 combat project that would set standards to ensure the protection of nurses. Several other unions are joining these efforts, noting in a joint statement that nurses are unnecessarily willing to lose their lives by leaving their patients and family members behind, just because employers and the government do not invest in the highest level of protection.
Legal aspects of COVID-19 pandemic management for community nurses ⁽²⁶⁾ .	Among the major concerns regarding patient care, there stands out the care provided by professionals who contracted the virus, since there have been reports of cases in which professionals were the means of transmission. Physicians are prominent in these cases, and thus far, there are few reports of the effect of this situation on nurses. However, the probability is that it will begin to exist.

Article	Results
100 years on: the Spanish Flu, pandemics and keeping nurses safe ⁽²⁷⁾ .	Investments in the health workforce are needed to fulfill the commitment to Universal Health Coverage and the growing demand for qualified care for people with complex conditions and health needs. Nurses should be at the center of the stage to meet those needs and be adequately equipped and supported. The Lancet study also concluded that substantial investments in health systems – and specifically in the health workforce – are urgently necessary, not only to improve preparedness for future epidemics and meet basic needs, but also to limit the health effects of the Ebola epidemic.
Nurses and practitioners during the flu epidemic of 1918: Analysis through the Spanish press ⁽²⁸⁾ .	There is a scarcity of information in quantitative terms about nursing professionals, the care they offered and the tasks they performed, characterizing a situation that could be labeled as invisibility and subordination that lasted throughout the twentieth century and that is still current, which influenced socially the low recognition of the profession.
Expanding nursing's role in responding to global pandemics 5/14/2018 ⁽²⁹⁾ .	A threat to possible pandemics is the delay in early identification of infections. To reduce this fact, the health professional needs to provide efficient communication with the infected person, so that he/she can start the identification of the pathogen, appropriate treatment and prevention of increased viral circulation. Moreover, the recognition of the main symptoms, aiming to alert the population and preventive services to prevent and/or reduce the spread of the virus.

Chart 2 – Description of the main results of the articles selected according to the title of the manuscript and its results. Brazil, May-Jun. 2020 (conclusion)

Source: Created by the authors.

Discussion

The review carried out in this study showed that only 1 article selected for evaluation dealt with quantitative research, while 14 articles were written from a qualitative perspective. Regarding the category of these studies, of the 15 selected, 5 were occupational risk, 5 were management, 4 were working conditions and only 1 discussed aspects of health education. Thus, the nurse's covers several fields, highlighting: work management of health services and systems, direct care to individuals and collectivities (healthy or not), health promotion and prevention, popular health education, health and nursing teaching and training, as well as research and extension activities⁽²⁹⁾.

The categorized studies mostly address occupational risks and are related to working conditions in Nursing and Health, especially in pandemics, representing the majority of the identified studies. Among the occupational risks, moral suffering is observed, and the feelings and experiences of anger, anxiety, frustration, insomnia, and even suicidal thoughts stand out, which are increased by the feeling of inability to take action to deal with suffering, since this state can be predisposed by internal and individual situations, external and/or due to institutional postures⁽¹⁵⁻¹⁷⁾.

Contextualizing occupational risks, nurses are increasingly becoming sick before pandemic contexts. This fact shows the importance of health safety in services, through access to adequate working conditions, as well as specific structural issues, linked to models of care and management, organizational culture, the availability of care technologies and personal protective equipment (PPE), personnel dimensioning appropriate to legal, ethical and technical prerogatives, services to nurses' families, training and interpersonal interaction to facilitate the adaptation and support of nurses in coping with pandemics⁽¹⁸⁾.

From this perspective, other studies highlight that nurses identify that coping with pandemics increases the incidence of occupational risks, which generates apprehension, such as: higher probability of infection, work overload, concern for family members who may become infected by having contact with them and increased level of stress at work. It is essential to consider these aspects in the plan and practice of local-regional contingency of the pandemic⁽¹⁹⁾.

Subsequently, there was concentration of studies on the management theme in relation to care, health services and staff. The nurse's work has as scope of action the management of health services and systems. This expresses its centrality, because when one thinks about the existence of other health practices, nurses usually articulate the care of all other professionals, whether in primary health care, in the hospital and outpatient component and in rehabilitation⁽²⁰⁻²¹⁾.

Furthermore, the nurse's management of the service deals with issues related to infrastructure, material resource management, solid waste management, dimensioning, forecasting, staff provision and distribution, nursing team management and indissociability with direct care to critical patients⁽²²⁾. Moreover, when talking about pandemics in the management aspect, one also talks about the ability to manage a multidisciplinary team, highlighting the scope of the nurse's attributions and the provision of care to people, families and communities⁽²³⁻²⁴⁾.

The third category identified in the data analysis was working conditions, which are intertwined with occupational risks; more specifically, it was identified that the historical, economic, gender and religious issues of Nursing influence the value of its workforce, as well as the professional recognition and visibility⁽²⁵⁾. On the other hand, studies indicate that health and Nursing professionals are identified as high risk and vulnerability in situations of coping with a pandemic⁽²⁶⁾. When working conditions are already precarious, they become more expressed in a crisis situation, such as the pandemic.

The highlights are widely discussed in the literature when it comes to the nurse's work, including extensive working hours, low salaries, submission, fragility of professional identity, intense work rhythm, professional devaluation, interpersonal conflicts, among other factors triggering physical and psychic exhaustion. During a pandemic, these conditions are worsened by the crisis that health services and systems go through.

The value of nurses' lives and their civil responsibility conflict, which can bring consequences for their health and safety in the performance of their work activities, since, under greater pressure, these professionals tend to neglect their own mental health in the tireless and constant fight against the pandemics, which can lead to the emergence of disorders related to stress and anxiety⁽²⁷⁾.

Nurses are subjected to work intensity, poor working conditions and work process management models that expand exploration and exposure to unhealthy issues. The dimensions of the precariousness analyzed affect the workers and also the clinical and managerial practice, and prevent or limit the care provided to the user, because there is a deep distancing from the recommended in the working conditions in the daily routine of health services, although ensured in the legal and ethical field⁽²⁸⁾. In addition, the intensity of work produced by the accumulation of employments, organizational and worker weaknesses, enhanced by the crisis situation, predispose nurses to physical, mental and psychological fatigue, which can contribute to the occurrence of errors in care.

It is worth mentioning that, on the other hand, the instances of professional representation and supervision express the political fragility of the category and still need greater strengthening in the field of social disputes, both in the macro space and in the micro space of relationships⁽²⁸⁾. In the fourth category, there is a study on the theme of health education, which, in turn, has importance in the construction of a health consciousness, essential in pandemic times, having imbrication with all health dimensions linked to informative and formative practices directed to the population: promotion, prevention, cure and rehabilitation⁽¹⁴⁾.

Finally, there stands out the lack of studies addressing the specific aspects of nursing care, the invisibility of Nursing theories and process, which negatively affects the population and the health field in general. The care of the nurse is linked exclusively to medical scientific discoveries, as if she were a mere doctor's prescription fulfiller and did not have an autonomous field for professional practice.

Therefore, the studies, in their entirety, are linked to the macro category work, with the work defined as a social praxis, with repercussion in the individual and collective field, of social, complex, dynamic, mutant character and that is distinguished from any other type of animal practice by its reflective, dialectical, conscious, propositional, strategic, instrumental and moral nature⁽³⁰⁾.

In practical terms, the nurse's work is an important field of studies, especially in pandemic times, as it will have repercussions on the destruction more evidently of the process of loss of social rights that Brazilians live in, with 1,990,202 nursing workers affected by the restructuring of work, which promoted the precariousness of working relationships and conditions, resulting in the multiplicity of employments, low wages, commitment of labor rights, subjection to undignified working conditions, consequently affecting the work process, living with insecurity related to job loss and lack of social security, which contributes to the acceptance of exploitation and submission to undignified working conditions⁽³¹⁾.

Conclusion

The analysis of the selected articles revealed the concentration of studies on the theme of

occupational risk and management, which demonstrates that, during pandemics, the expression of the nurse's work focuses on the field of management, and the problem of daily services is intensified with the worsening of occupational risks. Moreover, they also express the unawareness of nurses' work, the Nursing process and theories, and no study addressed proposals for direct care to the patient linked to their specific knowledge.

The findings show the macro category of work, bringing the dilemmas of health services, social disputes of power and social valorization, as well as the precariousness of the services and working conditions to which nurses and their staff are exposed. Despite the centrality of the nurse's work and the diverse field of action, the studies do not bring innovative aspects of the field of human care, much less a conception of health other than the absence of the disease, beyond a physical body. Thus, they reflect practices focused on biological and/or managerial issues.

Finally, it is important to recognize the political fragility of the professional field, the structuring of associations, unions and council to face the disputes at stake when it comes to work, who sells and who buys the workforce, its representation and recognition, and this involves professional and technical training, as well as the recognition of social class.

Collaborations:

1 – conception, design, analysis and interpretation of data: Deybson Borba de Almeida, Laiane da Silva Santana, Maria Talita Cruz Silva Oliveira, Nívia Vanessa Carneiro dos Santos, Igor Ferreira Borba de Almeida and Caio Moura dos Santos;

2 – writing of the article and relevant critical review of the intellectual content: Deybson Borba de Almeida, Laiane da Silva Santana, Maria Talita Cruz Silva Oliveira, Nívia Vanessa Carneiro dos Santos, Igor Ferreira Borba de Almeida and Caio Moura dos Santos;

3 – final approval of the version to be published: Deybson Borba de Almeida, Laiane da Silva Santana, Maria Talita Cruz Silva Oliveira, Nívia Vanessa Carneiro dos Santos, Igor Ferreira Borba de Almeida and Caio Moura dos Santos.

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