

ANO INTERNACIONAL DA ENFERMAGEM: DOS 200 ANOS DE FLORENCE NIGHTINGALE À PANDEMIA POR COVID-19

INTERNATIONAL YEAR OF NURSING: FROM FLORENCE NIGHTINGALE'S 200TH BIRTHDAY TO THE COVID-19 PANDEMIC

AÑO INTERNACIONAL DE ENFERMERÍA: DESDE EL 200 ANIVERSARIO DE FLORENCE NIGHTINGALE HASTA LA PANDEMIA COVID-19

Olga Maria Pimenta Lopes Ribeiro¹, Cintia Silva Fassarella², Letícia de Lima Trindade³, Aline Affonso Luna⁴, João Miguel Almeida Ventura da Silva⁵

RESUMO

Objetivo: refletir sobre o 200º aniversário do nascimento de Florence Nightingale e a pandemia pela COVID-19, no Ano Internacional da Enfermagem. **Método:** estudo teórico-reflexivo, elaborado, em abril de 2020, a partir da literatura e experiência dos autores. **Resultados:** naquele que foi instituído como o Ano Internacional da Enfermagem, a Humanidade depara-se com a pandemia relacionada à infecção por coronavírus, cuja prevenção e tratamento impõem o resgate aos principais pressupostos de Florence Nightingale. O ano 2020 é, sem dúvida, o ano dos profissionais de enfermagem que, na linha da frente, têm dado uma contribuição vital para combater a COVID-19. E a verdade é que, perante essa calamidade, os profissionais de enfermagem têm mostrado ao mundo o que fazem, dando evidência aos governos de que as suas repetidas reivindicações eram e são, mais que justas. **Considerações finais:** o ano de homenagem a Florence Nightingale mostrou ao mundo que, além do desenvolvimento tecnológico e técnico-científico, é crucial investir nas condições de trabalho dos profissionais de saúde, em especial dos profissionais de enfermagem, que no dia a dia, bem como frente às pandemias, de que é exemplo atual a COVID-19, priorizam seu exercício profissional em prol da recuperação dos doentes e da promoção da saúde global.

Descritores: Enfermagem; História da Enfermagem; Cuidados de Enfermagem; Enfermeiras e Enfermeiros; Pandemias.

ABSTRACT

Objective: to reflect on the 200th anniversary of Florence Nightingale's birth and the COVID-19 pandemic in the International Year of Nursing. **Method:** theoretical-reflective study developed in April 2020, based on the literature and the authors' experience. **Results:** in the year established as the International Year of Nursing, Humanity faces the pandemic caused by coronavirus infection, whose prevention and treatment impose the rescue of Florence Nightingale's main assumptions. The year 2020 is undoubtedly the year of nursing professionals, who have made a vital contribution in the front line to combat COVID-19. And the truth is that, before this calamity, nursing professionals have shown the world what they do, giving evidence to governments that their repeated claims were and are more than just. **Final considerations:** the year of homage to Florence Nightingale showed the world that besides technological and technical-scientific development, it is crucial to invest in the working conditions of health professionals, especially of nursing professionals, who in their daily routine and in the face of pandemics such as current COVID-19 prioritize their professional practice in favor of the recovery of patients and the promotion of global health.

Descriptors: Nursing; History of Nursing; Nursing Care; Nurses; Pandemics.

RESUMEN

Objetivo: reflexionar sobre el bicentenario del nacimiento de Florence Nightingale y la pandemia de COVID-19, en el Año Internacional de Enfermería. **Método:** estudio teórico-reflexivo, desarrollado en abril de 2020, basado en la literatura y la experiencia de los autores. **Resultados:** en lo que se estableció como el Año Internacional de Enfermería, la Humanidad se enfrenta a la pandemia relacionada con la infección por coronavirus, cuya prevención y tratamiento imponen el rescate de los principales supuestos de Florence Nightingale. El año 2020 es, sin duda, el año de los profesionales de enfermería, que en primera línea han hecho una contribución vital para combatir la COVID-19. Y la verdad es que, ante esta calamidad, profesionales de enfermería han mostrado al mundo lo que hacen, dando evidencia a los gobiernos de que sus reiteradas afirmaciones fueron y son más que justas. **Consideraciones finales:** el año del homenaje a Florence Nightingale mostró al mundo que, además del desarrollo tecnológico y técnico-científico, es crucial invertir en las condiciones laborales de los profesionales de la salud, especialmente de profesionales de enfermería, que en su día a día, además de enfrentar pandemias, de las cuales COVID-19 es un ejemplo actual, priorizan su práctica profesional a favor de la recuperación de pacientes y la promoción de la salud global.

Descriptores: Enfermería; Historia de la Enfermería; Atención de Enfermería; Enfermeras y Enfermeros; Pandemias.

¹Doutora em Ciências de Enfermagem, Professora Adjunta da Escola Superior de Enfermagem do Porto - Portugal. ²Doutora, Professora da Universidade do Estado do Rio de Janeiro e Universidade do Grande Rio – Prof. José de Souza Herdy - Brasil. ³Doutora, Professora da Universidade do Estado do Rio de Enfermagem - Brasil. ⁴Doutora, Professora da Universidade Federal do Estado do Rio de Janeiro, Escola de Enfermagem Alfredo Pinto - Brasil. ⁵Mestre em Ciências de Enfermagem. Enfermagem - Portugal.

Como citar este artigo:

Ribeiro OMPL, Fassarella CS, Trindade LL, et al. International year of nursing: from florence nightingale's 200th birthday to the covid-19 pandemic. Revista de Enfermagem do Centro Oeste Mineiro 2020;10:e3725. [Access___]. Available in:____. DOI: http/doi.org/recom.v10i0.3725

INTRODUCTION

The year 2020 will be marked in the history of Humanity and, certainly, in the history of Nursing. This year also marks the 200th anniversary of the woman who professionalized Nursing in the world, Florence Nightingale. For that reason a series of activities had been planned in many countries for the valorization of Nursing, with the development of the Nursing Now campaign, supported by the International Council of Nurses (ICN), nursing associations and schools worldwide, in addition to authorities and artists, with the collaboration of the World Health Organization (WHO)⁽¹⁾.

However, the year was abruptly interrupted by the COVID-19 pandemic. WHO declared, in March, that the outbreak caused by the new coronavirus constitutes a pandemic, a Public Health Emergency of International Concern, as provided for in International Health Regulations⁽²⁻³⁾. In the context of the global fight against COVID-19, key components are: epidemiological surveillance, sanitary and public health measures, and strategies for the prevention and control of the infection, which, in the view of nursing professionals, recalls the legacy of Florence Nightingale⁽³⁻⁵⁾.

The truth is that the pandemic has changed everyone's way of life. In the attempt to reduce its impacts, home confinement was advised and, imposed on all except in many countries, workers who provide essential services. In this context, health professionals continue to fulfill their professional responsibility, doing the best they know and can at the limit of their strength, even though they are subject to the same restraining measures in their personal lives, with fears and uncertainties similar to rest of population. Yes, it is true, they do what they have always done, but with a very different workload and physical and psychological repercussions. Worldwide, the number of people sick with COVID-19 is significantly high⁽³⁾, and it is in contexts, with numerous adversities, that nursing professionals struggle to fulfill the social mandate of their profession.

The response to the challenges that arise in the health area and, especially, in the context of a pandemic requires effective teamwork, in which everyone is essential. In this context, nursing professionals are no more or less important than any other health professionals and now, in a pandemic context, have the opportunity to show the world the uniqueness of their practices and expose the conditions in which they have been operating in recent decades, making clear the reasons why they feel undervalued. Nursing is the largest professional group and the largest component of the health workforce⁽⁶⁾, and regardless of work contexts, nursing professionals are the ones who spend more time with people, namely those who experience health/disease transitions, situational transitions, but also development transitions, throughout all phases of the life cycle.

Given the high number of autonomous and interdependent interventions, nursing professionals are, without any comparison, elements of health teams whose professional practice requires greater proximity to people, whether they are patients, families or caregivers, ensuring 24-hour continuous assistance. In view of their contribution in the health area and the requirements of their professional practice, nurses have endeavored, especially in the last two decades, to sustain their professional practice in the best scientific evidence.

Due to the desire to make a difference in people's lives, nurses get involved and engage in initiatives that promote health, prevent diseases, and if such initiatives already exist, these professionals tirelessly try to enhance people's capacities, helping them to absorb new knowledge and skills, in order to make them as autonomous as possible⁽⁷⁾.

It is true that, as citizens, we live in a unique moment in which responsibility and solidarity has been requested from all. However, as nursing professionals, we are plagued with the idea that the purposes inherent to WHO's definition of 2020 as the International Year of Nursing may be forgotten⁽⁸⁾. Thus, based on the trajectory of Florence Nightingale and her contributions, as well as the value of Nursing and nursing professionals for global health and wellbeing, this article aimed to reflect on the Florence Nightingale's 200th anniversary and the COVID-19 pandemic, in the International Year of Nursing.

The text calls attention to the fact that, even after two centuries of the birth of the founder of Modern Nursing, it is relevant to rescue aspects that are easily transposed to the current reality and that further enhance the legacy of Florence Nightingale.

METHODS

This is a theoretical-reflective study prepared in April 2020, based on the literature and the experience of the authors.

With regard to Florence Nightingale and her contributions, in addition to the use of primary sources, the analyses carried out by several authors on her writings, which are published in books and scientific articles, were considered. Regarding the acclaim of 2020 as the International Year of Nursing, the study focused on WHO's statement and on documents published by the ICN. With regard to the COVID-19 pandemic, scientific articles were consulted as well as documents published by WHO and ICN, which also clarify the conditions in which nursing professionals worldwide currently work.

It is important to mention that, in relation to the pandemic caused by COVID-19, there will not be an in-depth approach to the disease caused by the new coronavirus, nor to the pandemic status itself, since as established in the objective, only aspects that enable the reflection on the contributions of nursing professionals to the problem that the world faces will be rescued, simultaneously highlighting the legacy of Florence Nightingale in the moment experienced.

RESULTS AND DISCUSSION

To organize the reflection and to facilitate the reader's understanding, we divided this section of the article into three topics: on the 200th anniversary of the birth of Florence Nightingale and her contributions to Nursing and Health; on the COVID- 19 pandemic and the International Year of Nursing; and, finally, from Florence Nightingale's principles to the contributions of nursing professionals to the COVID-19 pandemic.

On the 200th anniversary of the birth of Florence Nightingale and her contributions to Nursing and Health

Florence Nightingale was born on May 12, 1820, in Florence, Italy. Nightingale's affluent family belonged to elite social circles and lived in London. Contrarily, to the future that supposedly awaited her, and even against the will of her parents and sister, she understood that her vocation was to treat patients in hospitals and, therefore, attended nursing programs. She believed that being a nurse was a call from God, and the truth is that, with her remarkable determination and persistence, Nightingale changed the course of Nursing^(5,9).

During the Crimean War, at the request of Sidney Herbert, secretary of war in Great Britain and responsible for the treatment of the war wounded and sick patients, Nightingale and a group of 38 nurses went to Scutari, Turkey, with the aim of providing nursing care for soldiers in a hospital facility set up in the army camp. Despite the presence of several professionals, Nightingale distinguished herself for having implemented a care system, which at that time, reduced the number of deaths by about 40%⁽⁹⁻¹¹⁾.

Based on her experience and observations she was noting, she soon realized that many soldiers were dying because of the conditions of the facilities, and not because of their wounds. Upon discovering that poor hygiene, lack of clean water, lack of clean air and adequate food were frequent causes of death, Nightingale made some changes in order to minimize the risks inherent in these problems. Among her achievements, the considerable improvement of the sanitary situation of the place where the soldiers were treated was noteworthy⁽⁹⁻¹¹⁾.

Despite the resistance of other professionals to the changes suggested by a nurse, the truth is that Nightingale's work was recognized and still while she was in Crimea, she was appointed sole supervisor of the nursing staff. Due to her nightly "excursions" through the wards, attending soldiers, Nightingale became known as the "Lady with the Lamp", which is still portrayed in many of her images⁽¹⁰⁾.

In order to prove the value of the work nurses did, Nightingale instituted records and developed statistical reports to analyze the collected data. Using statistics, she showed, graphically, the immediate need for health reforms that would have significant repercussions on disease prevention and control⁽¹¹⁾. Even in this respect, she was a pioneer, leaving an important legacy for health surveillance⁽¹²⁾.

Despite her return to London, she faced a high number of deaths in military hospitals, and because of this started a struggle for the reorganization of military health services. With the support of Sidney Herbert and, under the auspices of Queen Victoria, the Roval Commission on Health of the Army was created. This commission had the responsibility to inspect the army's health services, and thus she prepared a report, in which the mortality of civilian and military hospitals was compared, with the support of tables and graphs. The use of statistics to compare hospital results and improve hospital practice led Florence Nightingale to become, in 1858, the first female member of the Royal Statistical Society^(9,11).

Along with the reform of military health services, Florence began to endeavor to reform civilian hospitals and to invest in the Nightingale Fund to set up a nurses' training school. She changed the patterns of distribution and care for patients in hospitals, including in field hospitals⁽¹²⁾, saving lives and influencing health policies. In this context, she stressed the importance of screening patients, separating them according to their needs through the division of wards or isolated areas, thus avoiding cross-infections and increased hospital mortality⁽¹¹⁾.

Florence believed that the environment was essential and could contribute to health or illness, as well as to the recovery and healing process⁽¹³⁾. In her view, regardless of the contexts, there were several fundamental elements for maintaining a healthy environment: clean air and pure water; efficient sanitation; lighting and, if possible, sunlight; silence; adequate food; appropriate beds and bedding; and adequate hygiene conditions⁽⁵⁾.

Although the nursing metaparadigm was instituted long after Nightingale's time, it is important to highlight that the concepts of Human Being, Health, Nursing and Environment were explained by the theory⁽¹⁴⁻¹⁶⁾. In this perspective, the environment refers to the place where the patient, family and/or caregivers are, and thus comprising health institutions homes^(5,16). Likewise the proposed for hospitals, she believed that five points were essential to maintain a healthy home: clean air and water, efficient sewage, cleaning and lighting^(5,10).

As a result of the value attributed to the environment, many scholars share the idea that Nightingale's writings support, the one they entitled as the environmental theory⁽¹⁶⁾. In addition to the physical environment, Florence also highlighted the psychological and social environment^(13,16). In the context of nursing care, she considered that nurses should interact with patients, changing the care environment to the point of promoting and/or restoring their health in a comprehensive way, to the detriment of a fragmented approach⁽¹⁴⁾.

In addition to her contributions to the practice and counseling for the construction and repair of hospitals, both in England and in other European countries⁽⁹⁾, Florence Nightingale also

had a significant influence on nursing education ⁽¹⁶⁾. She defended, since the beginning of her dedication to Nursing, that nurses should receive specific education and training. In this context, we highlight the fact that she was the founder of the Nightingale Training School for Nurses, which opened on July 9, 1860, in St. Thomas Hospital in London⁽⁹⁾. Although Nightingale showed special interest in St. Thomas Hospital during her life, the nursing programs she developed served as a basis for teaching Nursing in England and in many other hospitals in the United States of America (USA), as well as in others countries⁽¹⁰⁾.

Her representativeness and contributions were so relevant that, May 12 is not only the day of her birth but also the International Day of the Nurse, and the year of commemoration of the 200th anniversary of her birth was also selected to be the International Year of Nursing.

To this day, people who are not nurses use Florence Nightingale's contributions to the environment, epidemiology, sanitation, as well as infection prevention and control as the basis of their work. As a nurse in times of epidemics such as cholera and typhus, Nightingale also launched practical and objective recommendations that continue to be valid, namely, to face dangerous infection conditions^(11,15), as for example the COVID-19 pandemic.

On the COVID-19 pandemic and the International Year of Nursing

The scientific community has known coronavirus infections since the 1960s; the six main types of Human Coronavirus now have a new type: SARS-CoV-2⁽¹⁷⁾. The first case of infection with the new coronavirus occurred in December 2019 in Wuhan, the seventh most populous city in China. Coronaviruses are common among humans, other mammals and birds, and cause respiratory, enteric, liver and neurological diseases⁽¹⁸⁾.

To date, there have been reports of cases of pneumonia of unknown etiology after crowding of ill individuals, and evidence that pulmonary secretions are the main means of transmission of the virus, very similar to the common colds and flu. After analyzing the culture of human airway epithelial cells, sets of standard operating procedures - electron microscopy and genome sequencing - were shared with WHO in order to promote surveillance and detect infection by the new coronavirus in China and, as then, around the world⁽¹⁸⁾.

In the last days of January 2020, WHO declared a Public Health Emergency of International Concern. After a month and a half, on March 11, the so-called COVID-19 was declared a pandemic. Since that date, WHO has been providing global support and has asked the Heads of State for help in decreeing quarantine and compliance of the population. It is a fact that the world faces an enemy, a virus that threatens everyone, regardless of nationality, social class, profession, ethnicity, religion or politics. The effects of quarantine have already been identified not only in the economy, but also in people, with a growing negative psychological impact, characterized, for example, with posttraumatic symptoms, anger and fear⁽¹⁹⁾.

At the moment, the challenge is to reduce transmissibility and contain the spread of the virus through assertive strategies, as astounding steeply increasing numbers of confirmed cases and deaths worldwide are reported every day. Some strategies considered fundamental have already been discussed and adopted as measures to cope with the treatment of suspected or confirmed cases in order to control the pandemic.

International experience has demonstrated the need to identify positive cases as early as possible, which implies a larger number of tests for SARS-CoV-2 infection diagnosis; actions in the health sector aimed at protection of health professionals through the use of personal protective equipment (PPE) in adequate quantity and quality; organization of health services to care for critically ill patients while maintaining essential health care; and slowing down virus transmission rate. In fact, in view of the impossibility of immediate control of the pandemic through vaccination, the experiences of different countries point to controlling the speed of progression of the epidemic curve⁽¹⁷⁾. Thus, in order to reduce the transmission of the new coronavirus and, consequently, the spread of the infection, public, individual and community health measures have been adopted, and at these two levels, distancing and social isolation are essential, as well as hygiene measures, with special emphasis on frequent hand washing. Additionally to these strategies, use of PPE, specifically facial masks, by the population is also necessary⁽⁴⁾.

These measures tend to decrease the number of patients who may need to be admitted to intensive care units and require ventilatory support, in a short period of time, contributing to balance the demand for care and the capacity of any health system⁽¹⁷⁾ which are known to be always limited in resources. Moreover, the decrease in the speed of progression of the epidemic curve gives time for health institutions to be reorganized in the sense of adopting internal strategies to ensure the prevention of infections.

When the topic of prevention of infections is addressed and a historical overview of the moment when this concern emerged, Florence Nightingale emerges as a reference. In a prebacteriological period, Nightingale emphasized the importance of hygiene, cleanliness and isolation as measures capable of preventing cross-contamination⁽¹¹⁾. In addition to her concern with infectious diseases through the application of statistics and epidemiology, she managed to control infections and, consequently, reduce the morbidity and mortality frequently associated to them using simple measures ⁽¹¹⁾. After 150 years, the population of several countries today faces a scenario in which similar results are desired.

Since 2019, the year Florence Nightingale's bicentenary is celebrated was decided to be the International Year of Nursing, and the truth is that the best way to honor the theory that marked the beginning of Modern Nursing is to show the world the work nursing professionals have done and will continue to do.

Within the scope of the International Year of Nursing, when launching the Nursing Now worldwide campaign in collaboration with WHO, the ICN did not anticipate the challenges that would be imposed on Nursing in the face of a pandemic. However, the pandemic will certainly give voice to healthcare professionals and to the ideals of the campaign of strengthening the profile and status of Nursing at a global scale. The campaign aims to empower nursing professionals in the face of multiple health challenges today, as well as to maximize the contributions of the category in reaching Universal Health Coverage⁽¹⁾. The pandemic gives global emphasis to this item and shows the world the numerous investments necessary to achieve this aspect, placing the qualification of nursing professionals and adequate numbers of these professionals at the center of the needs.

From Florence Nightingale's principles to the contributions of nursing professionals to the COVID-19 pandemic

In recent decades, the increase in technology and the progress of medicine have significantly increased the complexity inherent in health care, which has posed numerous challenges to professionals⁽¹⁵⁾. With regard to nurses, in addition to the scientific and technical have skills they developed, which are indispensable for their professional practice in highly complex contexts, it is worth highlighting their concern in using knowledge of the disciplinary area of nursing to base their professional practice. Although at the time Florence Nightingale considered Nursing as an art, today there is no doubt that the course taken over 150 years has consolidated Nursing as a science⁽¹⁶⁾.

It is agreed that alongside nurses' efforts in different care contexts for over more than a century the present position of Nursing has been greatly influenced by the contributions of different personalities. Florence Nightingale, considered by many as the first nursing theorist, was absolutely decisive in the beginning of a new direction for the profession. Part of her observation, research and experience practices today⁽²⁰⁾. nursing professionals influence Although in a "pre-pasteurian" era, her ways of recording and her causal analysis of soldiers' illnesses and deaths were predictors of advances surveillance⁽¹²⁾ the field health and in epidemiology, which are extremely important instruments times of pandemics. Florence's struggle to reduce deaths is reflected in the current dynamics of fighting against COVID-19; observations of patients' behaviors and the course of the disease recall the methods nurses used for over 150 years, markedly improved by technological innovations from the 21st century.

Florence Nightingale's focus on the environment and, particularly, on aspects related to hygiene and prevention of infections are assumptions of fundamental importance in the current context⁽¹⁵⁾. One of the greatest worldwide threats on record is taking place now, and the truth is that issues of hygiene and prevention of infections are addressed every day and in all media, emphatically recommended by health authorities, emerging as one of the few possible strategies to mediate the problem, despite advances in the pharmaceutical industry. Among nursing professionals, it is inevitable not to

remember that home and hospital hygiene and prevention of infections are two of the most relevant Nightingale's assumptions. Coincidentally or not, the need to remember these assumptions, rescue them and put them into practice on a daily basis became essential in what was established by WHO as the International Year of Nursing.

Knowing the development of the nursing profession and discipline, we perceive the fragility of many of the concepts presented by Florence Nightingale, had they not arisen 150 years ago. However, the current problem of COVID-19 comes, once again, to prove that the relevance of the key aspects addressed by Nightingale⁽¹⁵⁾ goes beyond the barriers of health institutions and are decisive for global health and well-being.

Although counting on the contributions of other theoretical references, nurses have always recognized the relevance of the assumptions of Florence Nightingale's environmental theory in their professional practice; the difference today is that the COVID-19 pandemic requires a collective effort by all citizens to curb the proliferation of coronavirus. It is as if Florence Nightingale's legacy is no longer just relevant for nurses, but has become a global aid to face the difficult moment that Humanity is going through.

Thus, in the bicentenary of her birth, Nightingale's principles become vital in our contemporary life⁽¹³⁾, especially in the face of the pandemic problem that plagues the entire world community. Isolation and hand washing were two of the measures instituted by Nightingale as essential for the control of infections^(11,15). Despite the relevance of these recommendations in the context of health care, particularly in the context of prevention of health-care associated infections, the benefits of these procedures are also known by a large number of citizens. Furthermore, today, in the context of the COVID-19 pandemic, these are two of the most important preventive measures.

Environmental conditions inside homes and health institutions, particularly hospitals, and their impact on the health/disease process are another aspect highlighted by Nightingale. It is based on the "return to basics" that nursing professionals strive to actively participate today in creating conditions to separate, as clearly and rigorously as possible, patients infected with COVID-19 from the other patients in the institutions where they work.

In cases of people with COVID-19 who remain on treatment at home, besides the importance of maintaining isolation, nursing professionals teach strategies not only for their recovery but also to prevent the transmission to other residents of the same household. In order to minimize the impact of social isolation and rescue aspects related to the psychological and social environment, already mentioned by Florence, nursing professionals guide sick people and the people interacting with them in a meaningful way to adopt behaviors that optimize the recovery process. As Florence advocated, "diversifying thoughts" promotes mental health⁽⁵⁾, and, at the present moment, it can help not to focus attention exclusively on the pandemic and its present and future consequences on each one's life. As for the cleaning and airing of houses and care with clothes and personal hygiene, the current recommendations also correspond to many of the principles already developed by Nightingale⁽⁵⁾.

International organizations have publicly made clear the enormous contribution of nursing professionals at the forefront of the fight against COVID-19⁽⁶⁾, giving their best to care for countless patients regardless of the personal risks they are exposed to. The media has shown the immense difficulties faced by health professionals in different countries. In addition to the lack of resources to maintain ventilatory support in a high number of patients at the same time, there is a lack of PPE for professionals.

Considering that nursing professionals are members of the health team responsible for the greatest number of interventions and which maintains greater contact with patients during their implementation, there is no doubt that they are also the professionals most exposed to risk. With the additional problem of lack of adequate PPE, the concern shown by the Organization that represents the profession becomes evident⁽²¹⁾. And, unfortunately, in all countries many nursing professionals have already been infected with coronavirus or died while working in the pandemic. Nursing professionals have been working in inadequate conditions, in settings with insufficient number of professionals, an witnessing the clinical worsening and death of countless patients, which has repercussions on their interpersonal relationships and development of illnesses from physical and mental exhaustion⁽²²⁾.

The problem is that, in addition to the personal consequences of this pandemic, there is a decrease in the number of professionals available to take care of the alarming number of people currently infected with COVID-19. While in different countries the population has been asked to stay home, health professionals and, particularly, nursing professionals continue to fight the coronavirus. Recognizing the risk of infecting their family members, they move away from them, and as it has been witnessed by many people, they start living alone in the proximity of their institutions. When it is not possible to keep family members away, they live in the anguish of infecting them, and yet, they do not give up!

On a daily basis, in their work context, with unusually higher workloads and often working in consecutive shifts, nursing professionals face unprecedented challenges, showing what best characterizes them: competence, responsibility, courage and empathy. From primary care to hospital care, and in hospitals, from inpatient units to semi-intensive and intensive care units, they hold fast to their goal: to do everything in the power of their hands to promote the recovery of sick people. However, it is important to remember the physical and psychological effort that health professionals have made. In addition to the complexity inherent in the contexts of their practice and the profile of patients to whom they usually provided care, there is now the complexity of the clinical situation of several patients with COVID-19 with compromised functions, starting with the respiratory function, often difficult to resolve with medical and nursing care.

In all countries and, practically, in all their cities, the need to organize field hospitals using structures of the army and emergency institutes and use large spaces for the creation of hospital extensions in record time constitutes a scenario that is no so different from that caused by a war. And it has been in these contexts that, similar to Nightingale's commitment and persistence, nursing professionals collaborate in the firm belief that together they will be able to make an invaluable contribution to a common good.

WHO recalls that nursing professionals represent more than half of all health professionals in the world and provide vital services in all health systems. Historically, since their precursor, nursing professionals have been at the forefront of the fight against epidemics and pandemics that threaten health around the world. The truth is that today, in all contexts, their courage in combating the COVID-19 pandemic has been noticeable, and it is already certain that never before has their value been so clearly demonstrated⁽⁶⁾.

Despite the chaos in place, COVID-19 came to further spotlight the work of nursing professionals in all contexts. As caregivers, as leaders or as educators, nursing professionals are fundamental in ensuring safe and equally accessible care, with an incredible potential to improve global health⁽²³⁾.

For years, nursing professionals have shown high levels of professional dissatisfaction, lack of motivation for work, and high levels of burnout, situations often triggered by unfavorable practice environments and lack of appreciation and recognition for the complexity of their work. As a matter of fact, the feeling of being undervalued for a long time has been influencing the involvement and commitment with the health institutions where they work.

Today, the priorities of nursing professionals are different. Before the state of Public Health Emergency, with no place or time for claims, they have responded to calls to reinforce all health contexts, adapting to reorganize institutions and services, as well as to optimize and provide human and material resources to the emerging needs. Nursing professionals are where they have always been: in the first line of contact with all those who seek health services. Thus, it is believed that, in the future, it will not be necessary to persistently continue to prove to governments that it is necessary to invest in the nursing profession and in nursing professionals. It will be proven that these professionals make a difference, because as stated by Annette Kennedy, president of ICN, only now many of the politicians recognize the true value of Nursing and nursing professionals⁽⁶⁾.

In line with the Nursing Now campaign, the pandemic reveals the need to ensure that nursing professionals have a more prominent voice in the creation of public health policies and better conditions for their professional practice, and receive larger investments to their workforce, opportunities more to occupy leadership further positions, qualification for their practices⁽¹⁾.

Corroborating Annette Kennedy, the money invested in Nursing will increase the wellbeing of people and families in tangible ways, as the world can see in the context of the current pandemic. In this sense, and given that investment in Nursing is a benefit and not a cost to society, WHO, ICN and those responsible for the Nursing Now campaign ask governments of different countries to do the right thing: to invest in this irreplaceable profession, so as to later observe their populations to benefit from the incredible work that only nursing professionals can do⁽⁶⁾.

In short, the time has come when it will be difficult to understand the arguments for not valuing and not investing in a profession that, despite everything it has done, is unable to see its work appreciated or its value acknowledged.

FINAL CONSIDERATIONS

When reflecting on the ideas presented throughout this article, it is evident that 2020 is indeed the year of Nursing and nursing professionals. As mentioned by many, we are facing a "war" in which the enemy is invisible; the few "weapons" that we now have available to prevent the rapid proliferation of the virus remind us of Nightingale's assumptions.

One hundred and fifty years ago, Florence Nightingale practiced a form of nursing in which she believed, and in adverse conditions, this made a difference. For decades, nursing professionals have claimed better working conditions, as well as fair recognition of the role they play in health teams, without seeing, though, significant changes in practice. Although the pandemic caused by COVID-19 required an increase in human and material resources, these additions have not been sufficient, aggravating the risk to which nursing professionals are exposed. Nevertheless, nursing professionals persevere in the fight, in what is the first and only front of combat.

In the year 2020, when the International Year of Nursing is celebrated, the importance of this professional category has stood out in the confrontation of the pandemic, and this reinforces the need to invest in the development of the working conditions of these professionals so as to favor the recovery of patients and the promotion of global health and well-being.

Far from exhausting the debate about the multiple contributions of Nursing to the health field that, historically, date back to Florence Nightingale, it is hoped that the present text will raise awareness regarding the claims made public by nursing professionals in recent years, as these claims are clearly small compared to the good nursing professionals do to humanity.

REFERENCES

1- Kennedy A. Wherever in the world you find nurses, you will find leaders. Rev Latino-Am Enfermagem 2019;27:e3181. DOI: 10.1590/1518-8345.0000.3181

2- Organização Panamericana de Saúde (OPAS). Folha informativa – COVID-19 doença causada pelo novo coronavírus. Brasília: OPAS; 2020 [citado em 04 abr 2020]. Available in: https://www.paho.org/bra/index.php?option=co m_content&view=article&id=6101:covid19&Itemi d=875

3- WorldHealthOrganization(WHO).Coronavirusdisease2019(COVID-19)SituationReport – 75.Genebra:WHO; 2020[citado em 04abr2020].Availablein:https://www.who.int/docs/default-

source/coronaviruse/situation-

reports/20200404-sitrep-75-covid-

19.pdf?sfvrsn=99251b2b_2&ua=1

4- Correia AM, Rodrigues AP, Dias C, Antunes D, Simões DG, Maltez F, et al. Plano nacional de preparação a resposta à doença por novo coronavírus (COVID-19). Lisboa: Direção-Geral da Saúde; 2020.

5- Nightingale F. Notas sobre enfermagem. Loures: Lusociência; 2005.

6- World Health Organization (WHO). Folha informativa - WHO and partners call for urgent investment in nurses. Geneva: 2020 [citado em 06 abr 2020]. Available in: https://www.icn.ch/news/who-and-partners-callurgent-investment-

nurses?fbclid=IwAR2gRxgs6OMnMoqHZAF7lkrT6 xZOsfsd5HPgpgOwbK3wFksYZBzY 7PFRjeo

7- Ribeiro OMPL, Martins MMFPS, Sousa PAF, Trindade LL, Forte ECN, Silva JMAV. Quality of nursing care: Contributions from expert nurses in medical-surgical nursing. Rev RENE 2020;21:e43167. DOI: 10.15253/2175-6783.20202143167

8- World Health Organizations (WHO). Year of the Nurse and the Midwife 2020. Geneva: WHO; 2020. [citado em 03 abr 2020]. Available in: https://www.who.int/news-

room/campaigns/year-of-the-nurse-and-themidwife-2020

9- Abecasis L. Notas sobre Florence Nightingale. Loures: Lusociência; 2005.

10- Wills EM. Grandes teorias da enfermagem baseadas nas necessidades humanas. In: McEwen

M, Wills EM (Eds). Bases teóricas de enfermagem. 4a ed. Porto Alegre: Artmed; 2016.

11- Martins DF, Benito LAO. Florence Nightingale and its contributions to the control of hospital acquired infections. Universitas 2016;14(2):1-14. DOI: 10.5102/ucs.v14i2.3810

12- Guimarães RM, Meira KC, Paz EPA, Dutra VGP, Campos CEA. Challenges for the formulation, implantation and implementation of a National Health Surveillance Policy in Brazil. Cienc Saude Colet. 2017;22(5):1407-16. DOI: 10.1590/1413-81232017225.33202016

13- Camponogara S. Health and environment in contemporaneity: The essential review of Florence Nightingale's legacy. Esc Anna Nery. 2012;16(1):178-84. DOI: 10.1590/S1414-81452012000100024

14- Bezerra CMB, Silva BCO, Silva RAR, Martino MMF, Monteiro AI, Enders BC. Descriptive analysis of the environmentalist nursing theory. Enferm Foco 2018 [citado em 03 abr 2020];9(2):79-83. Available in: http://revista.cofen.gov.br/index.php/enfermage m/article/view/1105

15- Aragão JHA. Nightingalean assumptions in hospital practices: Grants for nursing. Rev Enferm UFPE 2017;11(supl 4):1625-33. DOI: 10.5205/1981-8963-v11i4a15258p1625-1633-2017

16- Medeiros ABA, Enders BC, Lira ALBC. The Florence Nightingale's environmental theory: A critical analysis. Esc Anna Nery 2015;19(3):518-24. DOI: 10.5935/1414-8145.20150069

17- Rafael RDMR, Mercedes Neto, Carvalho MMB, David HMSL, Acioli S, Faria MGA. Epidemiology, public policies and Covid-19 pandemics in Brazil: What can we expect? Rev Enferm UERJ 2020;28:e49570. DOI: 10.12957/reuerj.2020.49570

18- Zhu N, Zhang D, Wang W, Xingwang Li, Yang B, Song J, et al. A novel Coronavirus from patients with pneumonia in China, 2019. N Engl J Med. 2020;382:727-33. DOI: 10.1056/NEJMoa2001017

19- Brooks SK, Webster RK, Smith LE, Woodland L, Wessely S, Greenberg N, et al. The psychological impact of quarantine and how to reduce it: Rapid review of the evidence. J Lancet 2020;395:912-20. DOI: 10.1016/S0140-6736(20)30460-8

20- Watson J. Florence Nightingale and the enduring legacy of transpersonal human caring-healing. J Holist Nurs. 2010;28(1):107. DOI: 10.1177/0898010110361779

21- International Council of Nurses (ICN). Folha informativa - Rising rate in COVID-19 infection amongst health workers requires urgent action. Geneva: ICN; 2020 [citado em 06 abr 2020]. Available in: https://www.icn.ch/news/icn-tellsbbc-world-news-viewers-rising-rate-covid-19infection-amongst-health-workers

22- Portugal. Conselho Nacional de Ética para as Ciências da Vida (PT). Situação de emergência de saúde pública pela pandemia COVID-19 – aspetos relevantes. Lisboa: Conselho Nacional de Ética para as Ciências da Vida; 2020.

23- International Council of Nurses (ICN). Folha informativa - Nurses' vital contribution to tackling COVID-19 highlights the profession is ready to take giant step change. Geneva: ICN; 2020 [citado em 06 abr 2020]. Available in: https://www.icn.ch/news/nurses-vitalcontribution-tackling-covid-19-highlightsprofession-ready-take-giant-step-change

Note: Without funding.

Received in: 09/04/2020 **Approved in:** 01/06/2020

Mailing address:

Olga Maria Pimenta Lopes Ribeiro Rua Dr. António Bernardino de Almeida, número 830 4200-072 Porto – Portugal E-mail: olgaribeiro@esenf.pt