

## Nursing in the Context of the Covid-19 Pandemic in Brazil: An Editorial

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COVID-19 is a disease whose clinical presentation varies from asymptomatic infections to severe respiratory conditions, and according to the World Health Organization, those infected can be pre-symptomatic or symptomatic. Its main mode of transmission occurs between infected people who expel droplets with the virus in aerosols from sneezes and coughs [1].

Nursing is considered a social practice, whose understanding is given by its insertion in a given socio-historical and political context, in which it interferes and suffers interference from it. Since the implementation of the Unified Health System in Brazil, nursing has been hegemonically inserting itself in the public sector and assuming a strategic position in the organization of the health system, as it is considered a science of integral and integrative care, capable of assisting and managing health care practices and, above all, promoting the health of individuals, families and communities [2].

Therefore, nurses' plural training and leadership role place nursing professionals as protagonists on the front line in the fight against COVID-19. Nursing presents itself today as fundamental in the detection and evaluation of suspected cases, not only because of its technical capacity, but also because it is the largest health professional category that is next to the patients 24 hours a day [3].

In the country, there are more than two million registered professionals of secondary and post-secondary education levels, and, in the pandemic, social media have been a vehicle for appealing and complaining about the risks and precarious working conditions. Workers deal with situations of contamination vulnerability on a daily basis, such as long working hours, lack of supplies to exercise the profession safely, reduced availability of Personal Protective Equipment, little or no psychological support, insecurity and fear when dealing with the disease [4].

In the context of this pandemic, nursing professionals have stayed away from their home and family, spending more time inside hospitals, working, than taking care of their own relatives. Some of the factors related to psychological distress identified were: Family distancing; loss of social interaction due to working with patients infected with COVID-19; physical isolation; loss of autonomy and spontaneity; constant alertness and hypervigilance; difficulty or lack of energy to maintain self-care; increase in work demand; increase in the number of patients and hours in service; need for constant updating regarding best practices in the treatment of the disease; mourning for the loss of co-workers and acquaintances; and finally the fear of horizontal transmission to family members as a result of the work performed.

Another factor observed due to COVID-19 that influences the health of the nursing team and can generate a negative response is Burnout Syndrome, which is very common in people who stay in their work place for long hours, accompanied by a large workload. This condition is characterized as an emotional disorder with symptoms such as extreme exhaustion, stress, and physical exhaustion experienced by the professional involved [5].

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In order to fight COVID-19, it is necessary to mitigate the problems faced by nurses in the different work contexts. The lack of protection of Brazilian nurses is notorious when compared to the amount and level of protection health professionals have in more developed countries in Europe and Asia.

Fortunately, much can be learned from the COVID-19 pandemic in Brazil, and nursing professionals, who are traditionally affected by low wages and unfavorable working conditions, have come to be more valued and respected due to the long and intense working hours, which have become challenging and more widely commented by the media.

In addition, the quality of the care provided by nurses is a contributing factor to generating favorable outcomes with excellent results in the recovery of critically ill patients with COVID-19. However, most of nurses' hiring is made on an emergency basis for critical sectors such as Intensive Care Units, Emergency Room and Emergency Care Units, in the form of gratuities or indemnities while the emergency period lasts, while the category has been fighting for the approval of the bill to establish a salary floor for nursing professionals based on the 30-hour working load.

Finally, there is the question of what the post-pandemic scenario for nursing professionals will be like. When this ends, will the nursing category, applauded as "heroes", be valued, respected and have all its rights guaranteed? Will nurses be forgotten again or will they have the conditions of the work process improved?

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