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Role of nurses in a field hospital aimed at patients with Covid-19

Atuação de enfermeiros em hospital de campanha voltada a pacientes com Covid-19

Actuación de enfermeras en un hospital de campaña para pacientes con Covid-19

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ABSTRACT

Objective: To understand the role of nurses in field hospitals aimed at patients with Covid-19.

Methods: Qualitative research based on Alfred Schütz's social phenomenology. Twenty nurses working in São Paulo were interviewed between May and June 2020. The testimonies were organized and analyzed based on the theoretical-methodological and thematic framework

Results: The following categories emerged: "Nurses' challenges in field hospital care", "Visibility of nursing in the Covid–19 pandemic scenario" and "Covid–19 post–pandemic professional valorization".

Final considerations: The reflection on the results that emerged in this study may contribute to support improvements in training, working conditions and valuing nurses, considering the importance of this professional category in the scope of health services. New investigations may increase knowledge in the area, providing subsidies for professional role in this and other health situations that require nursing intensity and excellence.

Keywords: Professional practice. Nurses. Coronavirus infections. Mobile Health Units. Qualitative research.

RESUMO

Objetivo: Compreender a atuação do enfermeiro em hospitais de campanha voltada a pacientes com Covid-19.

Métodos: Pesquisa qualitativa fundamentada pela fenomenologia social de Alfred Schütz. Entrevistaram-se 20 enfermeiros atuantes em São Paulo, Brasil, entre maio e junho de 2020. Os depoimentos foram organizados e analisados com base no referencial teóricometodológico e temático.

Resultados: Emergiram as categorias: "Desafios do enfermeiro no atendimento em hospital de campanha", "Visibilidade da enfermaqem no cenário da pandemia da Covid-19" e "Valorização profissional pós-pandemia da Covid-19".

Considerações finais: A reflexão sobre os resultados que emergiram neste estudo poderá contribuir para subsidiar melhorias na formação, nas condições de trabalho e valorização do enfermeiro, considerando a importância dessa categoria profissional no âmbito dos serviços de saúde. Novas investigações poderão incrementar o conhecimento na área, fornecendo subsídios para a atuação profissional nessa e em outras situações de saúde que exijam intensidade e excelência da enfermagem.

Palavras-chave: Prática profissional. Enfermeiras e enfermeiros. Infecções por Coronavírus. Unidades móveis de saúde. Pesquisa qualitativa.

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RESUMEN

Objetivo: Comprender la actuación de las enfermeras en los hospitales de campaña enfocados en pacientes con Covid-19.

Métodos: Investigación cualitativa basada en la fenomenología social de Alfred Schütz. Se entrevistó a veinte enfermeros de São Paulo entre mayo y junio de 2020. Los testimonios fueron organizados y analizados con base en el marco teórico-metodológico y temático.

Resultados: surgieron las siguientes categorías: "Desafíos para las enfermeras en la atención hospitalaria de campaña", "Visibilidad de la enfermería en el escenario pandémico Covid-19" y "Mejora profesional postpandemia Covid-19".

Consideraciones finales: La reflexión sobre los resultados surgidos en este estudio puede contribuir a apoyar mejoras en la formación, las condiciones laborales y la valoración del enfermero, considerando la importancia de esta categoría profesional en el ámbito de los servicios de salud. Las nuevas investigaciones pueden incrementar el conocimiento en el área, otorgando subsidios para el desempeño profesional en esta y otras situaciones de salud que requieren intensidad y excelencia de enfermería.

Palabras clave: Practica profesional. Enfermeras y enfermeros. Infecciones por Coronavirus. Unidades móviles de salud. Investigación cualitativa.

■ INTRODUCTION

At the end of January 2020, the World Health Organization (WHO) declared in Geneva, Switzerland, that the outbreak of the new coronavirus (Covid-19) constitutes a Public Health Emergency of International Importance. By the beginning of September of that year, more than 27 million cases and 881,464 deaths had been confirmed worldwide. Brazil showed rapid progress in contagion and, in this same period, is the third country with the highest number of infections in the world, with 4,123,000 confirmed cases and 126,203 deaths from covid-19, behind only the United States of America (USA) and India⁽¹⁾.

Although the majority of those infected have mild symptoms, contamination by the new coronavirus can lead to severe respiratory symptoms, sepsis, acute renal insufficiency and thromboembolic events, significantly increasing the mortality rate⁽²⁾. The increasing number of infected people has caused many countries to face problems with the overload of health services and the lack of facilities to care for patients with Covid-19⁽³⁾.

This scenario led to the creation of field hospitals in several countries, such as China, USA, United Kingdom, France and Brazil. Such institutions represent mobile units structured on an exceptional and temporary basis to stabilize patients, the term being mostly used in military situations as well as in times of disasters. It is mainly characterized by a large shelter easily installed in strategic locations, equipped with human and material resources to care for victims/patients. A study that described the experience of implementing field hospitals in Wuhan, China during the Covid-19 pandemic, showed that they played an important role in controlling the spread of the virus, since they centralized care to patients, preventing transmission to those who demanded treatment for other conditions in general hospitals⁽⁴⁾.

In the scope of these institutions, nurses perform managerial and assistance activities, which are fundamental for the maintenance of care, including the prevision and provision of materials, dimensioning of human resources, development of protocols, screening, and direct assistance to patients. A reflection study emphasized that coping with the Covid-19 has required these professionals' skills and knowledge to create care strategies in a reality that has never been experienced before. It also showed that nurses play an important role in the frontline of prevention, control and treatment of infections by the new coronavirus, maintaining direct contact with patients in order to fully meet their needs⁽⁵⁾.

These nurses have experienced high work intensity and feelings such as fear, worry and anxiety, leading to fatigue, discomfort, and helplessness. Such aspects are related to the lack of knowledge about the disease, intense work, in addition to the risk of infection for themselves and their families⁽⁶⁾. Based on the above, the following question guided the research: what is it like for nurses to work in field hospitals with patients with Covid-19? The objective was to understand the role of nurses in field hospitals aimed at patients with Covid-19.

The intensity of nurses' daily activities during the pandemic requires research to address their experience, given the complexity surrounding the situation. Especially in the Brazilian context, investigations about the role of these professionals in the care of patients with Covid-19 in field hospitals were not identified in the scientific health databases.

The understanding of nurses' perception of their work with patients with Covid-19 in field hospitals reveals the subjective dimension of this role, in addition to broadening the look at the experiences and expectations of this group of professionals. Thus, the results of this study, based on the theoretical-methodological framework of social phenomenology, can subsidize institutions and public health authorities to implement actions that encompass the complex universe of the role of these professionals, considering their importance in the context of this pandemic.

METHOD

Qualitative research anchored in the theoretical-methodological framework of social phenomenology, which used as a guiding thread the following concepts professed by the sociologist and phenomenologist Alfred Schutz: intersubjectivity, biographical situation, collection of knowledge and human motivation for action (reasons why and reasons for)⁽⁷⁾.

The intersubjectivity considered in this investigation is characterized not only by the interaction that occurs in the physical environment, where everyday situations are present, but also by the sociocultural, moral and ideological aspects that constitute the biographical situation of nurses – a position they occupy in the social sphere. Past and present experiences (reasons why) and expectations (reasons for) occur from the collection of knowledge that constitute the basis of the nurse's action in this work environment. From the set of "reasons why" and "reasons for" result the characteristics of the nurse's experience in the field hospital in the context of the Covid-19 pandemic.

The research was carried out in three field hospitals located in the city of São Paulo, Brazil, whose total capacity was 2,240 beds for the treatment of Covid-19, these being intended for observation and stabilization. Two started operating in April and ended their activities between June and July 2020. The third started its activities in May and in September it was still working. All fulfilling the objective of providing clinical care and serving as a backup for hospital units. In this scenario, the patients who arrived there received the necessary care and, in case of worsening of the condition, they were transferred to the stabilization rooms and intensive care units of the reference hospitals in order to receive the most complex care.

The sample was intentional, and nurses who worked with patients with Covid-19 were included in the research, regardless of the work shift, length of professional experience, gender and marital status. Nurses who worked only in the management of health services were excluded and, therefore, did not directly assist patients with Covid-19.

Data collection took place between the months of May and June 2020, using the individual open interview, based on the following guiding questions: what is it like for you to act on the frontline in the field hospital, in the Covid-19 pandemic scenario? What are your personal and professional expectations beyond the Covid-19 pandemic? Aside from these questions, sociodemographic, professional and academic background data about the participants were collected. In order to approach the possible participants, telephone contacts were made in order to invite them to be part of the study. With those who agreed to give their testimonies, the date and time of their preference were scheduled to conduct the interview online or in person.

Half of the interviews were carried out through video calls via smartphone, using the WhatsApp application. A second device was used to record the audios that were later stored in digital files with restricted access and in a safe environment, with exclusive access by the researcher. Some professionals chose to give the testimony in person and, in these cases, precautions to avoid transmission of the new coronavirus were respected, such as maintaining a minimum safety distance and using protective masks. The face-to-face meetings took place in the external area of the participants' homes, taking care to maintain privacy and avoid interruptions.

The consent to participate in the research was given by signing the Free and Informed Consent Form (ICF) by all

the interviewees, who were informed about the objectives of the investigation. When participating in video calls, the informed consent form was digitally sent to the participant, as well as the form signed by the researcher. Both the interviews conducted in person and those that took place at a distance were recorded on audio after the authorization of the participants and using the smartphone, which made it possible to fully record the testimonies, with subsequent transcription and analysis.

The interviews were conducted by one of the authors, with a doctorate degree in health, and lasted an average of 30 minutes. The study comprised 20 nurses, ending the interviews when the content obtained was able to respond in depth, comprehensiveness and diversity to the proposed objective and to the investigations questions⁽⁸⁾. There was no refusal or withdrawal from participating in the research, and all the testimonies obtained were included.

For the organization, categorization and data analysis, the following steps proposed in a theoretical study performed by researchers of Alfred Schütz's social phenomenology⁽⁹⁾ were adopted: access to past, present experiences and projections in the social world through the individual phenomenological interview; careful reading, categorization and critical analysis of the content of the speeches to identify, categorize, describe the meanings of human action expressed in the set of "reasons why and reasons for" and thus, understand the investigated phenomenon.

In this way, full readings were carried out of the transcribed testimonies to apprehend the lived experience of the nurses interviewed; afterwards, excerpts from each interview were selected that presented common aspects of the professional role of nurses in a field hospital aimed at patients infected by Covid-19, grouping them into categories called concrete because they emerged from experiences in the social world. From the set of these categories, it was proceeded to a comprehensive analysis and discussion of the results, in the light of the concepts of social phenomenology and literature on the theme studied.

The testimonies were identified with the letter P (Participant), followed by Arabic numerals referring to their order of participation in order to ensure the anonymity of the participants. All ethical principles of research involving human beings were respected, obtaining approval from the Research Ethics Committee of the public university linked to the investigation, with favorable opinion No.4,163,589 and CAAE 34470620.7.0000.5392.

RESULTS AND DISCUSSION

From the total of 20 nurses, 15 were women and five men, aged between 25 and 59 years old. The time elapsed since the date of the academic formation was variable (between six months and 15 years), as well as the time of professional activity (between two months and 11 years). Most nurses received prior training on Covid-19 and all worked on 12-hour shifts (day or night) at the field hospital.

The role of nurses with patients with Covid-19, in the field hospital, was unveiled through the following categories: "Nurses' challenges in field hospital care", "Visibility of nursing in the Covid-19 pandemic scenario" and "Covid-19 post-pandemic professional valorization".

Nurses' challenges in field hospital care (reasons why)

Being recently graduated represented a challenge in patient care with Covid-19 for many of the participants, generating insecurity. Despite this, nurses reported satisfaction with the opportunity for their first job:

- [...] it was a wonderful opportunity because I had just graduated and what I wanted was to have experience. [...] only with the experience of the internships I felt insecure. (P2)
- [...] because I was recently graduated, although it was a big challenge, it gave me the opportunity to be learning and developing a job, so it was very rewarding. (P5)

Research carried out in the United Kingdom corroborated these findings, showing that recently graduated nurses reported feelings of anxiety and fear related to the nature of the care they should perform with patients with the new coronavirus, especially due to the likelihood of working with critically ill and terminally ill patients. On the other hand, they pointed out the satisfaction of being able to contribute with nursing care during the Covid-19 pandemic and for the valorization of the profession⁽¹⁰⁾.

The transition from the training stage to professional practice can represent a challenge for recent graduates, who must assume responsibilities and deal with unknown situations in the work scenario. These new professionals may feel exposed or insecure about their ability to correctly perform tasks and, in addition, they need to deal with their own expectations and those of the health team in relation to them⁽¹¹⁾.

Nurses at field hospitals encountered difficulties in dealing with unknown aspects of caring for the person with the new coronavirus:

- [...] working at the field hospital was very complicated because we didn't have a protocol, not much was known about the disease. (P13)
- [...] it is a challenge because it is a new virus, little is known about it and I am working, and we are discovering new things about care for patients. (P15)

The aspects mentioned by the nurses are related to the doubts that permeate the care of the patient with Covid-19, such as the forms of treatment, clinical manifestations, transmission, and severity of the clinical condition. Uncertainties regarding the structure of the virus, as well as its replication, impact the development of effective measures against Covid-19 worldwide, which present themselves as a global need⁽¹²⁾.

The high transmissibility of the microorganism generated fear of contamination by the new coronavirus and transmission to family members, distancing them from their loved ones:

- [...] I never imagined working in a field hospital. I was afraid and I am still today, because, as much as I clothe, I know that I can contaminate myself. (P3)
- [...] my biggest fear is to pass it on to someone. I was in isolation, without seeing my family. [...] This is very sad, I would like to be closer, to talk closely. (P18)

The nurses' fear of contracting Covid-19 is justified, since health professionals constitute themselves as a risk group for the new coronavirus, considering their close and prolonged contact with infected patients, which exposes them to a high viral load during the execution of care. Research carried out in the United Kingdom and the USA with 99,795 health professionals identified that those who acted on the front lines against Covid-19 had a three times greater risk of contracting the virus compared to the general community⁽¹³⁾.

The interviewees' concern in transmitting the virus intensifies due to the severity and complexity of the cases, leading them to distance from friends and family, especially the older ones, immunocompromised or with chronic diseases, which contributes to the professionals' psychological suffering during the pandemic.

As they were on the frontline of Covid-19, the participants reported suffering prejudice in their daily lives:

[...] I felt prejudice because I was inside the field hospital. Many walked away from me, they didn't want to talk to me anymore, hug me, they distanced themselves, they don't come close. [...] his is heavy for me, it hurts my emotional. (P1)

[...] some people do not want to see me at all because I am working in a field hospital, but I realize that it is due to a lack of information. (P9)

Nurses who are at the frontline of caring for patients with Covid-19 may experience discrimination and stigmatization by people in the community, assuming that these professionals are a potential source of infection. This reality has also been experienced in other countries with reports of verbal and physical aggression, the impossibility of using public transportation and distancing from social life⁽¹⁴⁾. It is noteworthy that discrimination against those who care in the context of the pandemic can impact the ability to work at a time when there is a great demand on professionals working on the frontline.

The deponents mentioned the opportunity to be part of the history of the Covid-19 pandemic in Brazil, which contributed to personal and professional growth:

- [...] it is a new story that I am helping to build. [...] it was an opportunity for my personal and professional growth, one day I will be able to say that I was part of it all [...] resignified my life. (P4)
- [...] this experience greatly improved my knowledge. [...] I worked at the field hospital, I took Covid-19 and I am alive to tell and be part of this story. (P17)

The interviewees mentioned that the experience they had in a field hospital, on the frontline of care at Covid-19, was gratifying, especially because it was a unique moment lived by the profession and for adding knowledge. A similar situation was observed in a study with nurses who worked at a hospital in Henan, China. Participants reported that working with patients with Covid-19 enabled growth in the moment of tension, which includes increased affection and gratitude, greater responsibility and professional identity, self-reflection and psychological growth⁽⁶⁾.

Visibility of nursing in the Covid-19 pandemic scenario (reasons why)

According to nurses, the Covid-19 pandemic period provided greater social visibility for nursing:

[...] this pandemic situation has given a new vision for nursing. [...] it valued the profession a little more in the sense of recognizing society. Because without nursing, health is not going. (P6) There was not so much talk about nurses and, with this pandemic, there was a greater demand and they realized the importance that we have in caring for people. (P10) When I see the applause that society is clapping at all of us who have been in this context, I feel proud. (P12)

Nursing has stood out during the pandemic for its important role in preventive, curative and rehabilitation actions aimed at patients with Covid-19, whose number of cases is increasing. Consequently, there was social recognition and a change in the public image of professionals, who came to be seen as those who have determination, courage, competence and humanity. Popular demonstrations of respect and gratitude were observed, such as murals with nurses represented as heroes placed in buildings, clapping for health professionals and publications on social networks.

In this context, expressions of recognition through social networks were also observed, an important tool for the dissemination of information today. A Brazilian investigation that evaluated publications focused on the theme of Nursing in a social network, during the period of the pandemic due to the new coronavirus, found that most of the posts presented in their content the appreciation of the profession, as well as support for the claims of professionals, especially the labor rights. There was also a large participation of individuals/ordinary people who, in total, were able to reach 7 million profiles⁽¹⁵⁾.

For nurses, the moment of the pandemic also provided greater autonomy and notoriety for the profession in the context of the health service:

- [...] we have the capacity and theoretical foundation for any type of situation, and we prove this in this pandemic, which brought notoriety to our area. (P11)
- I believe that, in this new pandemic situation, nurses are being valued more and I feel respected. [...] within the work environment, I have felt greater respect. [...] I feel valued, I have never felt so important. (P8)
- [...] at the field hospital, I noticed greater autonomy for the nurse, even because we did our duty well done in the pandemic. (P19)

The pandemic of the new coronavirus explained the relevance of nurses in the context of health services, as they represent professionals who are at the frontline of the fight against Covid-19, assisting patients directly, as well as acting in health promotion and prevention actions. Eleven nurse managers participating in a qualitative research carried out in

Santa Catarina, Brazil highlighted that, despite the structural and organizational difficulties of health services, the moment of the pandemic enabled the identification of strategies for qualifying nursing practices and potential for strengthening the profession, given the competence demonstrated by nurses in the referred scenario⁽¹⁶⁾.

In addition to social recognition, the need to valorization of nurses has gained worldwide visibility, causing many countries to turn to the establishment of a commitment to support the development of the profession. This is because universal access to health cannot be achieved without the adequate strengthening of this professional category since nurses are at the center of most teams, directly influencing the health of individuals and communities. Strengthening nursing has the potential to generate a triple impact of improving global health, promoting gender equality and supporting economic growth⁽¹⁷⁾.

In this scenario, it stands out the Nursing Now Campaign and the establishment of 2020 as the International Year of Nurses and Obstetricians by the World Health Organization, in celebration of the bicentenary of Florence Nightingale. Initiatives that, among other issues, aim at the recognition of nurses by members of the health team and by the community in general⁽¹⁷⁾.

Covid-19 post-pandemic professional valorization (reasons for)

Nurses aim for better working conditions and professional valorization, especially in relation to the approval of the 30-hour work week, the wage floor for nursing and the autonomy to work:

[...] I hope that a fair wage floor and 30 hours will be approved, which is a fair workload. And that institutions improve structures to provide comfort for nursing professionals. (P8)

I hope to be recognized, valued. [...] improve the hospital environment so that professionals feel safer to work. (P7)

[...] here is an urgent need to improve the salary because we are very little recognized. (P16)

Since they feel devalued in the daily routine of health services, nurses hope to maintain the social and professional visibility achieved during the pandemic period and to conquer old challenges in the profession. Professional devaluation is mentioned by nurses in a study carried out with 30 professionals in Buenos Aires, Argentina. In this, the participants mention challenges they faced, such as long hours and precarious working conditions. They also

mentioned wages incompatible with the intensity of care, which leads many nurses to have more than one job(18).

The interviewees also mentioned the expectation that nursing professionals receive support for mental health:

[...] I would like us to have psychological and mental support because, in the beginning, many professionals fell ill and had depression. [...] that recognize the work of professionals, how much they fight for lives. (P14) [...] I ended up overloading myself, getting tired physically and psychologically [...]. I expect that there is a strategy for the care of the nursing professional [...]. Because we are the largest health category, we are the ones who have the most contact and we spend the longest time

This expectation presented by the participants is corroborated by a study carried out in Wuhan, China, with 180 nurses who took care of patients infected with Covid-19. It was found that 39.91% and 32.19% of the participants had stress and anxiety respectively. The two conditions were closely related and the long workday was identified as one of the main factors influencing anxiety⁽¹⁹⁾.

with the patient. (P20)

For nursing to achieve professional recognition, taking its place at the center of facing the health challenges of the 21st century, the Nursing Now Campaign points out five main areas of investment: stimulating greater investment in the workforce; ensuring greater participation in the formulation of health policies; investment in leadership; conducting research that shows where nurses can have the greatest impact and dissemination of best nursing practices⁽¹⁷⁾.

Theoretical study on the Nursing Now Campaign in the context of the Covid-19 pandemic corroborates the call for the valorization of nursing professionals working on the frontline of the fight against the coronavirus. It emphasizes that, even though they present weak working conditions leading them to exposure and illness, nursing professionals maintain their role of caring. Points out that, despite the aforementioned valorization campaign, nursing still needs to justify its existence as a necessary professional area for society⁽²⁰⁾.

The challenges faced in the field hospital and the satisfaction of experiencing greater visibility of the profession during the Covid-19 pandemic led the participants to wish to conquer old challenges, such as the valorization of nursing. The experiences and expectations expressed by them reflect the role of nurses in field hospitals involved in intersubjective aspects marked by the coronavirus pandemic. These are made explicit by the interaction of this professional in the work reality that portrays the exercise of nursing being influenced by the biographical situation and the nurses' collection of knowledge.

The collection of knowledge is constituted primarily through the parents who insert man in the social world. In addition, the knowledge added by educators is aggregated to that acquired through concrete, personal and professional experiences that continuously structure this collection and subsidize human action in the social world⁽⁹⁾.

Past and present experiences lived in nursing allow nurses to intentionally develop perspectives for the future that meet the desire for better working and health conditions, as well as professional valorization. This is in line with what is recommended by Alfred Schütz's social phenomenology, when he emphasizes human action as endowed with intentionality and related to a project in which man finds meaning⁽⁷⁾.

■ FINAL CONSIDERATIONS

The group of nurses who worked in field hospitals with patients with Covid-19 experienced several challenges in serving this clientele. Such challenges are related to the fact that many of these professionals are recent graduates, have to deal with unknown aspects of the disease and with the fear of their own contamination and of family members, in addition to suffering prejudice on the part of the community. However, these nurses perceived themselves privileged by the opportunity to participate in the history of the pandemic in Brazil and by the increased visibility of nursing on that occasion. The participants outlined the expectation that the visibility and recognition of the profession will be maintained and reflected in better working conditions, professional valorization, and support for the nurses' mental health.

The limitation of this study refers to the fact that it presents the experience of a specific group of nurses with unique characteristics, belonging to a differentiated reality from others, which prevents the generalization of the results.

The theoretical-methodological framework of Alfred Schütz's social phenomenology made it possible to unveil nurses' experiences with patients in a field hospital during the Covid-19 pandemic, providing important elements to be considered in the preparation of professionals and managers in order to face situations that involve emergency, with positive results for patients and health professionals. The reflection on the results that emerged in this study may contribute to subsidize improvements in training, working conditions and nurses' valorization, considering the importance of this professional category in the scope of health services.

New investigations that may collaborate to increase knowledge about the role of nurses in the context of the Covid-19 pandemic may provide subsidies for professional practice in this and other health situations that require nursing intensity and excellence.

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