ABSTRACT
Objective: To reflect on the working conditions of the nursing professionals when facing the new coronavirus and to point out the impact on the lives of these professionals in the midst of the pandemic.
Development: The weaknesses found in the daily work of the nursing professionals are described by the national and international literature, which include poor working conditions, physical, and mental overload, low pay, and lack of adequate Personal Protective Equipment to cope with this condition.
Final considerations: This reflection can contribute to rethink the health and safety of the nursing professionals with a view to providing quality and safe care to the patients in the context of this disease.

DESCRIPTORS: Coronavirus; Nursing; Worker’s health; Psychosocial impact; Working conditions; Occupational risks.

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CONDIÇÕES DE TRABALHO E O IMPACTO NA SAÚDE DOS PROFISSIONAIS DE ENFERMAGEM FREnte a COVID-19

RESUMO
Objetivo: refletir sobre as condições de trabalho dos profissionais de enfermagem no enfrentamento ao novo coronavírus e apontar o impacto na vida desses profissionais em meio à pandemia.

Desenvolvimento: as fragilidades encontradas no cotidiano laboral dos profissionais de enfermagem são descritas pela literatura nacional e internacional, nas quais estão incluídas as más condições de trabalho, sobrecarga física e mental, baixa remuneração e ausência de Equipamentos de Proteção Individual adequados para o enfrentamento desse agravo.

Considerações finais: esta reflexão pode contribuir para repensar a saúde e segurança dos profissionais de enfermagem visando uma assistência com qualidade e segurança aos pacientes frente a esta doença.

DESCRITORES: Coronavírus; Enfermagem; Saúde do Trabalhador; Impacto Psicossocial; Condições de Trabalho; Riscos Ocupacionais.
INTRODUCTION

The pandemic of Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-Cov2), better known as the new coronavirus 2019 (COVID-19) emerges as a challenge for the global health system, due to the number of infected people and to the demand for resources needed to face it. Several countries have expressive numbers of infected people demanding hospitalization and intensive care in hospitals\(^1\).

Within health institutions, coping with COVID-19 requires professional diversity that includes health workers and support services: servants, kitchen assistants, and security guards, among others. These are professional categories with differentiated employment contracts, workloads, and working hours\(^2\). Among the health professionals, the Nursing Professionals (NPs), protagonists of this study, represent approximately 2.2 million in Brazil, who work in different regions and in non-equal proportions\(^3\). They are professionals who are at the forefront of the care provided, regardless of the type of care and the health situation, pandemic or not.

The essence of the NP profession is the care process. This process is not restricted to the development of technical activities; it also involves scientific knowledge, feelings, and emotions. In a pandemic situation, physical and mental exhaustion is common among these workers. It becomes conflicting to act ethically and responsibly in the midst of work overload. The constant situations of death and stress, experienced in environments often overloaded with patients with a high viral transmissibility power, require accurate and cautious nursing care, both in the technical procedures and as regards rigorous protocols for putting on and taking off specific attires and equipment, as scientifically recommended\(^4\).

In this context, Nursing is at the heart of the health systems worldwide\(^4\). However, long working hours and differentiated working conditions, due to regional and contractual diversities, expose these professionals to the risk of physical and mental illness, and may take them away from their work activities\(^2,3\).

In this scenario, many feelings emerge, such as fear, anguish, worry, anger, and helplessness, among others. Such feelings are generated both by the uncertainty of what is to come, and by the social isolation imposed on the family members\(^5\), who, in the midst of a risky situation, experience the conflict of keeping away from daily functions, although often family, financial, and social conditions do not allow this option.

In order to maintain the safety of their family members, NPs need to carry out different hygiene procedures at their homes\(^6\) and to make or purchase their own Personal Protective Equipment (PPE), due to the fear that they might not find it in their workplaces. In view of these challenges, the objective of this study is to reflect on the working conditions in the fight against the new coronavirus and on the impact on the health of the NPs.

DEVELOPMENT

The working conditions of the Nursing professionals in combating COVID-19

Generally, the working conditions of the NPs include long hours, intense pace, professional devaluation, and interpersonal conflicts, among other factors that trigger physical and psychological wear and tear\(^2\). In times of a pandemic, these conditions are enhanced by the number of people infected and by the scarcity of adequate PPE, situations that increase wear and tear due to the fear of becoming infected or of transmitting the virus to loved ones\(^7\). Work for health teams suddenly became frightening due to personal insecurity\(^8\).
NPs experience an ethical and moral dilemma: by assisting patients without using the appropriate PPE, they put their lives at risk, the life of the patients, of the health team, and of their loved ones. However, when denying assistance to patients in a state of urgency/emergency, they can be held criminally responsible, according to Art. 135 of the Brazilian Penal Code(9), although supported by class councils.

According to the Code of Ethics of the nursing professionals, in its Art. 13, it is the right of NPs:

[...] to suspend activities, individual or collective, when the workplace does not offer safe conditions for the professional practice and/or when it does not observe the current legislation, except for urgent and emergency situations, and must immediately formalize their decision in writing and/or by means of electronic mail to the institution and to the Regional Nursing Council(10:26).

Art. 76, in which prohibitions are addressed, ensures the NPs the possibility of “denying nursing care in an urgent, emergency, epidemic, disaster, and catastrophe situation(10:32)” if the exercise of the function presents a risk to their physical integrity(10). These articles ensure that NPs have the right to deny care to patients with COVID-19 without having adequate PPE or in unsafe working conditions. However, this is the ethical and moral dilemma faced by these professionals in their daily work, who risk their lives for their patients.

In this scenario, the life value of the NPs and their civil liability are in conflict, which may have consequences for their health and safety in the performance of their work activities. It is necessary and urgent that the NPs have adequate PPE and are trained in service for its correct use(11).

Likewise, it is necessary to exercise caution when defining emergency actions, so that the health worker is not penalized and even more exposed to risk. Like the publication of Provisional Measure (PM) No. 927/2020, which flexibilizes labor laws to deal with this emergency in Public Health. Among the provisions of this PM, there is the permission to extend the working hours of the health professionals hired under the regime of CLT members/employees Article 26 allows the employer to extend the workday; and to adopt overtime schedules that vary from the 13th to the 24th hour of the inter-day interval; it also provides for the compensation of the additional hours through an hour bank or overtime, with a period of up to 18 months to be carried out(12).

It is prudent to rethink the work schedules of the NPs in order to reduce physical and emotional stress. It is necessary to consider that rigorous and adequate attires and equipment, as well as the need to save PPE, makes it difficult to carry out physiological functions such as eating, hydrating or going to the bathroom, due to the time spent for putting them on and taking them off between procedures(12).

The literature reinforces that increasing awareness about personal protection, providing adequate PPE in sufficient numbers and with training in accordance with national and international protocols, can contribute to reduce the risk of infection in health professionals(13). Despite intense training and correct technical procedures, there is still a risk of biological exposure during professional activity, often culminating in worker contamination. Due to the characteristics of the technical activities, overload and tiredness, such exposure can occur and cause temporary leave(11) or even lead to the death of the professional.

The impact on the health of the Nursing worker

Several studies(14-16) demonstrate that health professionals, including NPs, are being affected by COVID-19. In Spain, 13% of the cases were confirmed in health professionals, with reports of deaths among nurses(14). In Italy, 13% of the health professionals got infected, with 100 deaths among physicians, and 26 among nurses(15). In China, 3,000 professionals got infected and 22 died(16), and in Iran and Indonesia there are also reports of deaths...
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Among nurses(17).

In Brazil, there is still no official data on the number of health professionals affected by COVID-19. As an initiative of the Federal Nursing Council, an observatory was developed in which NPs can report their illness. Until April 13th, 2020, 1,203 cases of the disease and 18 deaths were recorded(18). This number is believed to be underestimated, as it is a voluntary notification. These data demonstrate the need for protective actions that allow for a comprehensive health care for the NPs, with the implementation of protocols that can reduce the risks of contamination during work activities.

The standardization is recommended of the PPE suggested by national and international bodies such as the Centers for Disease Control and Prevention, the Occupational Safety and Health Administration, the National Institute for Occupational Safety and Health, the World Health Organization (WHO), and the Ministry of Health.

The guidelines on the use of the PPE can have different interpretations and diverge in the indication, such as in relation to the use of waterproof overalls or coats to assist infected patients. These actions are justified by the diversity of information and by the distancing from protocols, guidelines, and international experiences(16). Thus, the support of managers in facing the challenges must be daily. The provision of guidance on prevention measures is essential for managing the stress caused by the work activities(11), and by the excess of information from the media.

Another problem resulting from the lack of PPE refers to the reuse of the N95 mask. In a Technical Note published by the National Health Surveillance Agency(19) on March 21st, 2020, it was recommended that, exceptionally, health professionals could use it, provided it was in good condition, several times during the same shift of up to 12 hours. However, this information was suppressed in the publication of March 31st, 2020, allowing reuse for a longer period or for a number of times greater than the one indicated by the manufacturer(20). It is evident that protocols are often created to meet the needs of the services, sometimes without scientific evidence or support from international organizations, putting workers’ health at risk.

Although preventive measures are taken, health professionals experience unprecedented situations, having to make difficult decisions that can cause psychological harms in the long term, caused by moral harms(21). Thus, it is vital that government officials and managers recognize the value of these professionals and treat them with humanity, guaranteeing their safety and health(22).

In an attempt to minimize the consequences of this health harm on the physical and mental health of the professionals, the social media and the official channels show the solidarity of mental health specialists in offering emotional support and guidance on healthy habits, aiming at maintaining the health of these professionals.

Even in the midst of adversity, Nursing demonstrates its role and, in the year dedicated to the profession by the World Health Assembly with the call for “Nurses and Midwives clean care is in your hands”(23) and by means of the “Nursing Now”(24) campaign, with its motto of: “where there is life there is nursing”, amidst the challenges and the cost of many sacrifices, sees a social recognition about its importance in global health systems.

In the face of this pandemic, the role of Nursing in the actions of surveillance, prevention, control of virus transmission, patient care, research on COVID-19, and guidance to the community stands out. The attentive eye of the profession is strengthened to care for human beings, the environment, the family, and the community, with empathy and welcoming.
It is understood that Nursing experiences a unique moment resulting from the COVID-19 pandemic, due to work overload, to the specificity of the high transmission of the virus, and to the handling of specific protective equipment. An experience lived by both the public and private networks in the country, and even worldwide.

Nursing is believed to be a link in the multi-professional health chain in coping with COVID-19, with a focus on human life, paying attention to worker health and patient safety. These times considered a moment to reinvent and relearn in the face of a challenging scenario for workers and institutions, the presence and positioning of councils and class associations are indispensable.

It is emphasized that this article does not intend to give conclusiveness to the theme, but to encourage reflections on how Nursing has been facing the COVID-19 pandemic.

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