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REVIEW

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REFLECTIONS OF THE PAST ON CURRENT BRAZILIAN NURSING: FIGHTS, ACHIEVEMENTS, CHALLENGES AND PERSPECTIVES

Os reflexos do passado sobre a enfermagem atual brasileira: lutas, conquistas, desafios e perspectivas Reflexiones del pasado sobre la enfermería brasileña actual: luchas, logros, desafíos y perspectivas

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ABSTRACT

Objectives: to study the history of nursing in Brazil and to establish a historical and social pattern of female participation in the profession. The study also looked at the current situation. **Method:** theoretical, reflective study, based on findings in the literature on the historical evolution of nursing. **Results:** current professional practice still echoes the circumstances experienced in the past by women's relationship with the progress of health care. In addition to the female role in the structuring of nursing, the intimate connection between the social construction of women and the stereotypes projected on this profession, still imposes greater difficulties in the fight for the recognition of nursing as a science. **Conclusion:** the way in which the profession was constituted contributed for nursing to be linked to sexualization and machismo. However, it has become a profession with a scientific and technical basis. Demeaning women and reducing them to their bodies is at odds with current female achievements.

DESCRIPTORS: Nursing; Nursing history; Gender stereotyping.

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RESUMO

Objetivo: realizar uma análise histórica dos fatos que transcorreram na enfermagem e estabelecer um padrão sóciohistórico da participação feminina na profissão e dos paradigmas enfrentados até a atualidade no Brasil. **Método:** estudo teórico, reflexivo, fundamentado nos achados da literatura sobre a evolução histórica da enfermagem. **Resultados:** a prática profissional atual ainda apresenta os ecos das conjunturas vivenciadas no passado pela relação da mulher com o progresso da assistência à saúde. Além do papel feminino na estruturação da enfermagem, a íntima conexão entre a construção social da mulher e os estereótipos projetados sobre essa profissão, ainda impõe maiores dificuldades na luta pelo reconhecimento da enfermagem como ciência. **Conclusão:** o modo de constituição da profissão contribuiu para que a enfermagem fosse vinculada à sexualização e ao machismo. Entretanto, a mesma tornou-se uma profissão com base científica e técnica. Rebaixar mulheres e reduzi-las ao seu corpo é discrepante das conquistas femininas atuais.

DESCRITORES: Enfermagem; História da enfermagem; Estereotipagem de gênero.

RESUMEN

Objetivos: realizar un análisis histórico de los hechos que transcurrieron en la enfermeria y establecer un padron socio-histórico de la participación feminina en la profesión y de los paradigmas encarados hasta la actualidad en Brasil. **Método:** estudio teórico, reflexivo, basado en los hallazgos de la literatura sobre la evolución histórica de la enfermería. **Resultados:** la práctica profesional actual todavía se hace eco de las circunstancias vividas en el pasado por la relación de las mujeres con el progreso de la atención a la salud. Además del papel femenino en la estructuración de la enfermería, la íntima conexión entre la construcción social de la mujer y los estereotipos proyectados sobre esta profesión, aún impone mayores dificultades en la lucha por el reconocimiento de la enfermería como ciencia. **Conclusión:** la forma en que se constituyó la profesión contribuyó a que la enfermería se vincule a la sexualización y al machismo. Sin embargo, se ha convertido en una profesión con una base científica y técnica. Degradar a las mujeres y reducirlas a sus cuerpos está reñido con los logros femeninos actuales.

PALABRAS CLAVE: Enfermería; Historia de la enfermeria; Estereotipo de género.

INTRODUCTION

The health care practice has always been present in human history, originating from the need to care for others. Its development is evidenced among the first eastern and western civilizations. In this sense, over the centuries, health practices have differed according to the historical and local context, being directly influenced by the various existing religions. Thus, as new knowledge was added, the perception of health and disease changed, radically transforming the provision of care to individuals. However, despite the constant changes in this field, the mentality of care as an attribution of the female role has persisted. ^{1,2}

Nursing is a science, but also an art.³ This professional is responsible for caring for others, aiming at the relief of suffering through the promotion, prevention, protection, and recovery of health, attending without distinction of any kind, be it of color, religion, gender, social class, age, and others.⁴

Currently, it is a regulated profession consisting of nursing assistants, nursing technicians, nurses, and obstetricians. In Brazil, it has been regulated for more than 30 years and follows the norms of the law for the professional practice of nursing, No. 7.498/86, and can be exercised by duly qualified professionals, registered in the competent body of the profession, the Regional Council of Nursing (COREN) of the jurisdiction where they wish to work. Moreover, it is a profession entrusted with responsibilities, provided for in the legislation and in the profession's code of ethics. To reach this point, nursing was constituted with much struggle, however, there are still battles being waged against job insecurity, for respect, better pay, and recognition.

Throughout the history of nursing, the profession has always been linked to women, socially placed in the role of caring as if it were inherent to the female gender. In the early days, the profession was developed by widows, charitable women, women with aptitude and knowledge in herbs, and prostitutes eager to pay for their sins. The female majority in nursing is still reflected today. In Brazil, there are more than two and a half million workers in the area, consisting of an average of 85% women.⁷ It is in this scenario that nurses coexist with stereotypes carried by the profession, based on machismo, misogyny, sexualization, and eroticization.^{8,9}

The choice of this theme is due to the fact that the authors are part of the scenario composed of female nurses who deal daily with the mishaps of the profession, supported by taboos structured throughout history. Furthermore, it is understood that nursing was built through battles, and these battles still need to be discussed and analyzed in order to strengthen and expand the respect achieved by the profession.

The objective of this study is to perform a historical analysis of the facts that have occurred in the nursing field, in order to establish a socio-historical pattern of female participation in the profession and the paradigms faced until today in Brazil.

METHOD

A theoretical reflective study based on the findings of the literature concerning the historical evolution of nursing. For a better understanding of the contemporary reality within the profession, current news concerning this class were also consulted.

Thus, a search was made for bibliographic materials related to the theme in databases and health libraries - Medical Literature Monteiro et al. 3

Analysis and Retrieval System Online (PubMed/Medline), Latin American and Caribbean Literature on Health Sciences (LILACS), Scientific Electronic Library Online (SciELO), and Virtual Health Library (VHL) - in addition to the use of gray literature through Google Scholar and sites of official Brazilian educational institutions and official nursing representations, such as the pages of the Federal Council of Nursing (COFEN) and the CORENs. Furthermore, the Descriptors in Health Sciences (DeCS) and Medical Subject Headings (MeSH) were consulted, alternating the descriptors used with the Boolean operators or and, which were: "nursing", "nursing history" and "gender stereotyping".

The search considered materials published in Portuguese, English, and Spanish, in the interval between the years 2017 and 2021, and the materials found were read in full, with the selection of those that met the objective of this reflection.

However, in the process of preparing the article, considering the scarcity of the materials found, the relevance of substantiating the issues discussed beyond the materials chosen was identified, so a new search was conducted, when the gray literature and the documents produced outside the pre-established period were included, expanding the range of references used. The points to be explained were established, including the construction process of nursing, its consolidation as a profession and science, the female role in this movement, the influence of this history for the reality found today regarding the sexualization of the profession, and some achievements of the category.

Due to the theoretical nature of the work, there was no participation of human beings in the study, and it was not submitted to the Ethics and Research Committee.

RESULTS AND DISCUSSION

In ancient times, the primitive nomadic groups presented their actions in this field based on instinct, aiming to maintain survival. In this context, men performed patriarchal functions, while women's functions were centered on caring, both for their families and for the sick. As the centuries went by, the health field became closer to the religious area and the concepts of health and disease came to be understood as the will of the gods, considered to have the power to remove the body's ills. From this perspective, the priests were responsible for mediating the relationship between the gods and human beings, who were seen as holders of the power to cure and preserve life.^{1,2}

At the end of the 5th century and beginning of the 4th century BC, there is a great moral and religious transformation. With the rise of wars and human suffering, the population began to ponder doubts about the power of the gods. The progress of science and philosophy became remarkable and gave a new direction to the beliefs of the supernatural in the health-disease process. Thus, health practices began to be based on experiences grounded in knowledge of nature, logical reasoning, and cause and effect relationships.^{1,2}

Hippocrates proposes the first concept of health that dissociates the understanding of disease as something mystical. Through the inductive method of inspection and observation, he established the need to elaborate diagnoses and prognoses and the therapeutic plan as an inherent part of the process of caring for an individual. In this phase, caring for the sick was an activity performed by witchdoctors, priests, and women with disposition, gifted with phytotherapeutic knowledge. It was necessary for the caregiver to obtain qualities such as cleanliness, skill, intelligence, purity, and dedication.^{1,2}

Moving forward in history, due to the scenario marked by wars, famines, and epidemics, the Christian period - from the 5th century A.D. to the 13th century A.D. - was marked by the mobilization of a large number of lay people in charitable practice. Thus, devotees of the Church took the lead in assisting the poor and the sick, leading the development of hospitals. From this, the practice of nursing emerges, fundamentally constituted by the activity of women driven by religious motivation and disassociated from scientific knowledge. From the end of the 13th century to the beginning of the 16th century, Catholic movements, such as the Inquisition, resulted in the closing of religious hospitals and the substitution of religious women by prostitutes in the care of the sick.\(^{1,2}\)

In the modern era, with the assertiveness of science, the precursor of Nursing Florence Nightingale appeared. A woman far ahead of her time, she refused the socially imposed destiny of getting married, having children and being a housewife, studied hard and dedicated herself to the desire of following her vocation in hospitals. In 1854 she was drafted into the Crimean war. With an uncommon intelligence and dexterity in dealing with the soldiers, she became known. Her protocols of hygiene, management of techniques and of the wounded revolutionized the precarious and undignified environment, thus reducing from 40% the deaths of the hospitalized to 2%.^{1,2}

Florence passed away, leaving a great legacy and making possible the emergence of the first Nursing schools. With her activity, the profession became salaried and legalized. Florence was not the only woman working in nursing in this period. Other women took charge of the profession, such as Mary Jane Grant Seacole, a free black Jamaican who worked in the Crimean War on the battle front, away from hospitals. In Brazil, the pioneer of nursing was Anna Nery, a volunteer in hospitals and in the Paraguayan War, who also worked with positive results, inspiring the growth of the profession on the national scene and making possible the emergence of the first Brazilian nursing school. 12

In view of the intrinsic relationship of women in the progress of health care, it is inevitable that the current professional practice still presents the echoes of the distinct conjunctures experienced in the past. However, the circumstances linked to the constitution of nursing as a profession and, above all, the panorama experienced during the Middle Ages with the execution of care motivated by charity, and the introduction of prostitutes into health services, resulted in the devaluation and sexualization of this professional class.¹¹

That said, the charitable history and the romanticization attached to it concerning the work "for love", reflect in the low remuneration of the professionals and in the subsequent overload of work. In addition, the past insertion of prostitutes in the healthcare environment and the objectification of women in general, contribute to the eroticized image of the professionals that make up the nursing team, which is reaffirmed by the constant media coverage of the "sexy nurse", cul-

minating in low professional credibility before the clients, in addition to the frequent harassment suffered in the daily work.¹¹

Moreover, it is necessary to emphasize, in addition to the female role in the structuring of nursing, the intimate connection between the social construction of women and the stereotypes projected on this profession, which impose even greater difficulties in the struggle for the recognition of nursing as a science.¹¹

In this logic, the macho mentality of submission of women to men, still present in contemporary society, represents one of the obstacles to the reaffirmation of nursing autonomy, since this is a predominantly female profession. Moreover, the collective mentality of care practice as a born female ability builds the idea that there is no need for theoretical knowledge to support nursing care, which further inferiorizes nursing work and minimizes the necessary competence for training in the area.¹¹

From the literature, it was noticeable that the professionals, especially the female ones, constantly report sexual and moral harassment, as well as the discreditability manifested in the work environment regarding their intellectual and technical capacity, when they are frequently inferiorized in relation to the medical class. ^{12,13,14}

With regard to the creation of nursing as a college-level course, it resulted from the primordiality of the practice for the stability of health environments, which raised reflections about the need for training and hierarchization of professionals in this area. In this sense, from Nightingale's great contributions and dissemination of her conceptions emerged the movement of schooling of knowledge in nursing, which spread all over the world and added several knowledge to nursing practice and education.¹⁵

From this perspective, guided by the North American educational matrix, based on the nightingalean model, the first nursing school was established in Brazil in 1923, the Anna Nery School of Nursing. In the following decades, the number of nursing schools grew, this educational process was improved, and the changes caused by reforms in the university context fostered the development of stricto sensu postgraduate programs and lato sensu specializations in this field of study. These developments have transformed the status and qualification of professionals in the field.¹⁵

Having said this, it is necessary to recognize the greatness of nursing as a profession and its constant growth in terms of education, specialization, and labor market. In Brazil, according to COFEN, there are more than 60 regulated specialties in which a professional of the area can act.¹⁶

Thus, the year 2020 was considered the International Year of Nursing, and to kick off the celebrations, the Nursing Now movement was launched by the World Health Organization (WHO), having Duchess Kate Middleton as its patron. The intention was to highlight the relevance of the professional category for the functioning of health services all over the world, and to emphasize professional valorization. In Brazil, the movement was instated by COFEN and the controlling center of the Pan-American Health Organization/WHO.¹⁷

However, in the year 2020, with the advent of the coronavirus pandemic, nursing professionals were deeply affected, because they were on the front line in fighting the disease. These presented themselves physically and psychologically exhausted, away from their families,

sickened by the situation in which they were exposed, susceptible to becoming contaminated and died on the job, with inadequate access to Personal Protection Equipment and with low remuneration, highlighting the need to value this professional category.¹⁸

In this perspective, the struggle for the establishment of the profession's wage floor took place with greatPLer power in view of the problems generated by the pandemic and the focus given to the class. In Brazil, after years of struggle, the bill 2564/2020, which provides for the institution of the nursing national salary floor, was sanctioned in August 2022. However, shortly after, this law was suspended and is still under analysis by the Federal Supreme Court in response to a questioning by hospital institutions due to the alleged lack of resources to fund the wage gap, once again showing the obstacles of society to the practical application of the valorization of nursing professionals.^{19,20}

Moreover, it must be emphasized that this study presented limitations regarding the availability of material on the subject. Few publications were made aiming at the explicitness of the subject, which, therefore, made it necessary to use gray literature and without temporal range restriction.

CONCLUDING REMARKS

It is notable that the way nursing was built contributed to the profession being linked to eroticism, sexualization, and machismo. However, it is necessary to point out that such archaic concepts cannot accompany a work group for centuries, especially when considering the radical transformations undertaken over the years in this sphere of action.

Nursing has evolved, from being recognized as a domestic activity to become a profession with a scientific and technical base. The world has also evolved. To demean women, their intellectuality, and reduce them to their bodies is discrepant with the feminine conquests of the last decades. Centuries ago, even if imperceptible and ignored by society, such treatment was already disrespectful to the female being, and nowadays even more so, as well as such degrading acts have become crimes.

The innumerous conquests of nursing stand out in the last years as promising advancements to the professional class, which are significant for the future of the professionals that will come and merit of those who have been part of this history, building new paths and re-signifying the profession as a great class able to fight for even more.

However, nursing, mostly composed of women, demands respect, recognition and appreciation, as a scientifically and technically grounded profession, supported by a strong history of hundreds of years facing great obstacles, which support its arrival to the current point, promising great employment, social and political advances.

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