

Future Perspectives and Advances in Nursing Education and Research

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Biography

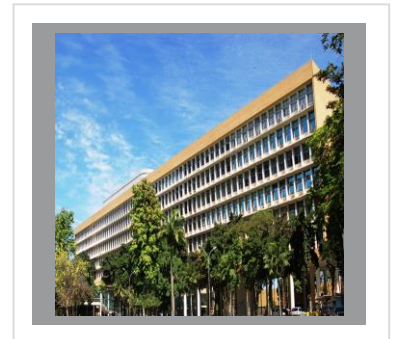
Graduated in Nursing and specialization in Nephrology Hospital Administration and Oncology. She is currently nursing coordinator at the Cancer Institute of the State of São Paulo – Brazil; has experience in the field of Nursing, with emphasis on Clinical Oncology, Palliative Care, Hemotherapy and Management. Member of the Ethics Committee in Nursing at the Cancer Institute of the State of São Paulo, Member of the Latin American Delirium Special Interest Group (LADIG).

Abstract

This proposal deals with a theme that in the world is political, social and ethical concern in the qualification of nurses in undergraduate, graduate and professional training, and is in line with the proposal of the Objectives for Sustainable Development (UN, ODS, 2014) and the Agenda do Brasil 2020-2030, which seek to realize human rights and fundamental freedoms for all, where women and girls enjoy full gender equality and in which a fair, equitable, tolerant, open and socially inclusive world is preserved. the needs of the most vulnerable people.

Taking this statement as an assumption, we can defend that the legacy of Florence Nightingale, precursor of modern nursing in the world, provided us with the path that has lasted for two centuries, to focus our profession on citizen care for life in birth and death, regardless of location or place, from a perspective of health promotion with integrality of actions and humanization of people, family and community. This is how we care, in a contradictory context that is not new, when we provide nursing care, which marks two dimensions of reflection.

On the one hand, the devaluation of nursing professionals, with treatment of subsidiary professionals who are poorly trained in Universities (undergraduate level lasting 4 to 5 years and more than 5 thousand hours of workload), many of them with postgraduate qualifications. graduation (improvement, specialization, master's and doctorate and post-doctorate); working in public and private hospital units without public tender, only contracted; work process in predominantly hospital units at the expense of primary care units mostly scrapped and deprived of infrastructure and inputs adequate to the quality required by the population as a Constitutional right (Article 196-200 of the CFB) and duty of the State with social and public policies economic to secure this right; with arduous working hours, stressful situations, and unworthy wages for the survival of those who care and those who are cared for. On the other hand, the government and state disrespect that refuses to establish safety and protection policies for nursing professionals as Health Workers as required by WHO and PAHO and is more in a context of citizenship, which implies in being considered social subjects of law (political, social and civil rights).



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