
EDITORIAL

Challenges for Collective Health in Caring for Socially Vulnerable Individuals, Families, and Communities amidst the Pandemic

Desafíos para la salud colectiva en el cuidado con personas, familias y comunidades vulnerables socialmente frente a la pandemia

Desafios para a saúde coletiva no cuidado de pessoas, famílias e comunidades vulneráveis socialmente durante a pandemia

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COVID-19 pandemic is one of the most devastating events humanity has experienced globally, nationally, and locally. On the one hand, it has revealed the fragility of life and human suffering and, on the other, uncertainty and paradoxes. For health care, the collapse of services, the precarious conditions of workers, and the reproduction of social inequities and inequalities have exacerbated issues such as poverty, hunger, domestic violence, mental health problems, complications due to chronic diseases, and disability, adversely affecting socially vulnerable people, families, and communities.

At present, care is on the political, social, and economic agenda. It has moved from individuality and invisibility to collective solidarity and public practices that must be maintained over time to achieve essential healthy processes for human life and survival in diverse, complex, and uncertain sociocultural contexts. In attempting to raise awareness of care, this reflection aims to outline the challenges for nursing in collective health based on the legacy of care in a pandemic, care as a creative and transformative action, and the advocacy of law for essential health care.

Historical challenge of nursing care to alleviate human suffering

As a knowledge and practice domain, collective health conceives the health-disease process—determined by historical, social, and cultural processes—as opposed to the primacy of individual biology and the fragmentation of the human being subordinated to the clinic and pathology of organs and systems, depending on the medical model (1). Nursing as a discipline has developed its practice close to individuals, families, and communities, and its work is invaluable in relieving suffering, preventing complications, and reducing mortality.

Accordingly, the WHO (2) has reiterated the importance of nursing staff in the health care system. From 38 experiences, it has stressed best practices in primary care (3, 4) and health education, leadership in policy formulation, and the development of social and community empowerment in vulnerable populations. Considering the pandemic, this input to achieving universal health coverage and equitable access inspires us to replicate and implement care strategies for COVID-19 mitigation and the post-pandemic world, reappraising community nursing work and not only the clinical and biomedical perspectives.

Political challenge: Care as a creative and transformative action

In one of the most important political events in nursing in recent years, the WHO designated 2020 (5) as the International Year of the Nurse and the Midwife for their contribution to the population's health. However, with the COVID-19, nursing initiatives in the public and political sphere have not aroused interest. The focus has been on the epidemiological and institutional public health views, leaving aside collective health proposals and ongoing nursing work in territories with social and community participation. This concealment exposes the paradox of nurses' value and work, a lack of staff to meet the urgent demands for care, and the burden of both professional and informal care.

The political challenge is to vindicate and recognize care as a creative and transformative action taken in territories for health promotion, disease prevention, and care. It includes not only the pandemic but also daily health actions and efforts made for the survival of individuals, families, and communities within a proper pedagogy for life care.

Ethical challenge: Advocacy of the right to essential health care

Given the COVID-19, the society's ethical project is the lifeline to reach universal consensus for justice and equity, respect for the other, and the defense of their dignity. The advocacy of the right to health requires knowledge that transcends and contributes to solving critical problems through research, information, and innovation. This advocacy will promote the transformation of realities and help us dodge a bullet (6), as expressed by Callista Roy, in overcoming the theory-practice dichotomy, detours, and dead ends that we face as a planet.

The ethical challenge is to achieve continuous care as a guarantee to clearly understand safe, supportive, and sustainable actions that mitigate social inequalities and strengthen equity and *ethos of caring* as a project oriented towards welfare, compassion, and the defense of the right to health.

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