

Academic-professional trajectory of black nurses in a teaching hospital

Trajectoria acadêmico-profissional de enfermeiras negras de um hospital de ensino
Trayectoria académico-profesional de enfermeras negras de un hospital universitario

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Abstract

Objective: To know the academic-professional trajectory of black nurses in a teaching hospital. **Methods:** Qualitative, exploratory and descriptive study carried out at the Teaching Hospital of the Federal University of Pelotas, Rio Grande do Sul, Brazil. The participants were five self-declared black nurses, aged between 35 and 47 years, graduated nine to twenty years ago, working in the aforementioned teaching hospital for five to six years. The interviews were conducted virtually from May to June 2022. The content produced was transcribed in full and treated through content analysis. The research followed all ethical principles. **Results:** Black nurses reported difficulties, mainly financial, which impacted the access and the possibility to continue in university education during training. In addition, they revealed situations of racism experienced in daily life, whether in structural, institutional forms or in the form of microaggressions. Despite this, they understand the importance of their protagonism in the anti-racist struggle. **Conclusion:** There is a need for more studies involving black women and nursing, the impact of racism on the mental health of black professionals, in addition to greater efforts to combat racism.

Descriptors: Teaching Hospitals; Nurses; Racism; Women; Universities.

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Whats is already known on this?

Although there are studies on the reflection of racism in the presence/absence of black women at work, there are still few or almost no productions on the experiences of black nurses in Brazil.

What this study adds?

This article wants to give more visibility to these professionals and their difficulties both in training and in the work environment, mainly caused by racism present in their daily lives.



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Resumo

Objetivo: Conhecer a trajetória acadêmico-profissional de enfermeiras negras de um hospital de ensino. **Métodos:** Estudo qualitativo, exploratório e descritivo, realizado no Hospital Escola da Universidade Federal de Pelotas, Rio Grande do Sul, Brasil. Participaram do estudo cinco enfermeiras autodeclaradas negras com idade entre 35 e 47 anos, com tempo de formação de nove a vinte anos, com trabalho no referido hospital de ensino de cinco a seis anos. As entrevistas foram realizadas virtualmente de maio a junho de 2022. O conteúdo produzido foi transcrito na íntegra e tratado através da análise de conteúdo. A pesquisa seguiu todos os princípios éticos. **Resultados:** As enfermeiras negras relataram dificuldades, principalmente, financeiras, que impactaram no acesso e na permanência no ensino superior durante a formação. Além disso, revelaram situações de racismo experienciadas no cotidiano, seja na forma estrutural, institucional e na forma de microagressões. Apesar disso, compreendem a importância de seu protagonismo para a luta antirracista. **Conclusão:** Constata-se a necessidade de mais estudos envolvendo a mulher negra e a enfermagem, o impacto do racismo na saúde mental dos profissionais negros, além de maiores esforços no combate ao racismo.

Descritores: Hospitais de Ensino; Enfermeiras; Racismo; Mulheres; Universidades.

Resumen

Objetivo: Comprender la trayectoria académico-profesional de enfermeras negras en un hospital universitario. **Métodos:** Estudio cualitativo, exploratorio y descriptivo realizado en el Hospital Universitario de la Universidad Federal de Pelotas, Rio Grande do Sul, Brasil. En el estudio participaron cinco enfermeras autodeclaradas de raza negra, con edades comprendidas entre 35 y 47 años, con un tiempo de formación de nueve a veinte años, y trabajando en el mencionado hospital universitario durante cinco a seis años. Las entrevistas se realizaron de forma virtual de mayo a junio de 2022. El contenido producido fue transcrito íntegramente y procesado mediante análisis de contenido. La investigación siguió todos los principios éticos. **Resultados:** Las enfermeras negras informaron dificultades, principalmente financieras, que impactaron su acceso y permanencia en la educación superior durante su formación. Además, revelaron situaciones de racismo vividas en la vida cotidiana, ya sea en forma estructural, institucional o en forma de pequeñas agresiones. Pese a ello, entienden la importancia de su papel en la lucha antirracista. **Conclusión:** Es necesario realizar más estudios que involucren a las mujeres negras y la enfermería, el impacto del racismo en la salud mental de los profesionales negros, así como mayores esfuerzos para combatir el racismo.

Descritores: Hospitales Universitarios; Enfermeras; Racismo; Mujeres; Universidades.

INTRODUCTION

In Brazil, former slaves and their descendants were marginalized and excluded from society, denied basic rights in an institutionalized and systematic way. Even in a non-explicit way in formal legislation, the state power structures maintained the logic of vetoing black people in educational environments. Thus, the cycle of inequalities was perpetuated, especially for black women, who occupy the base of the social pyramid, have the lowest salaries, least chance of accessing and completing university.⁽¹⁻²⁾

Education is the main tool against racism, the black movement, through arduous struggles, claimed access to public universities in order to reduce educational disparities between the black and white population. Since then, Law 12,711 was sanctioned in 2012, known as the Quota Law, which provides for admission to federal universities and institutes. The law reserves 50% of the places for students from public schools, low-income families, people with disabilities and self-declared blacks and indigenous people. The entry of people into university education who have historically been treated unequally as a result of whiteness, racism, class division and ableism contributes to unveiling knowledge and experiences that until then were invisible. In the university environment, black people promote debates and scientific production about their individual and community experiences, artistic and cultural experiences, ancestral stories and how to survive in the face of violence promoted by racism.⁽³⁾

Racism is a systematic process of discrimination by race that, through conscious and unconscious practices, causes disadvantage or advantages to individuals of certain groups.⁽⁴⁾ The reproduction of racism is present in political, historical, social and economic power relations, revealed through inequalities in the distribution and access to resources such as housing, health, education, political representation, media, employment and others.⁽⁵⁾ Racism remains in society associated with whiteness, a phenomenon that seeks to maintain the hierarchy of relations of domination in favor of the white racial group. Whiteness is responsible for standardizing values and processes, as well as defining who may or may not belong to certain spaces.⁽⁶⁾

Racism is everyday, explicit in vocabulary, speeches, gestures, actions and images that place black people as the Others. These are experiences that are repeated throughout the lives of black people, whether walking on the street, in the supermarket, on the bus, in the family, at school, in the work environment and other spaces.⁽⁷⁾ In addition, racism interacts with other structures of domination, such as classism and

sexism. These oppressions intersect with black women, causing different forms of violence experienced by this group. Black feminism puts its lens on these particularities, proposing the reflection of the simultaneous oppression of race, gender and class suffered by black women, seeking to understand the specific conditions for these discriminatory processes to occur in a crisscrossed way.^(4,8-9) Black feminist thought arises through ideas produced by black women and especially for black women, sharing their unique and group experiences.⁽¹⁰⁾

Modern Nursing in Brazil, directly influenced by racism, used exclusion modes to train the first professionals in the country. At the beginning of the twentieth century, nursing schools had a series of requirements for admission to the institution, such as: being a woman, white, preferably Christian, middle and upper classes.⁽¹¹⁾ Access by black students was prohibited because they did not fit the ideal image of the standard model nurse.⁽¹¹⁾ It was only in the 1960s that black women were able to enter nursing schools, based on a less restrictive entry policy that aimed to increase the number of professionals to meet the demand of the labor market.⁽¹²⁾

Even after the opening of nursing schools, structural racism still restricts black people's access to universities, as a consequence, even though most nursing professionals, when university education is observed, black women are a minority among nurses.⁽¹³⁾ In several social spaces, black women occupied the social place of outsider within, a form of marginality that originated a specific perspective of black women in several themes.⁽¹⁰⁾ By being a minority among nurses, black women enter a hostile environment, remaining outsiders within. Despite being inside, they deal with institutional racism by having less representation in positions of prominence and power, and greater daily exposure to everyday racism.⁽¹¹⁻¹²⁾

Even with the greater insertion of black people in the academy in recent years, the production of studies that deal with the admission, permanence and university education in nursing of black women is still timid. Searches for a narrative literature review took place from August 2021 to March 2022 and were carried out by the main researcher on Google Scholar, on the Scientific Electronic Library Online (SCIELO), Latin American and Caribbean Literature in Health Science (LILACS) and Virtual Health Library (VHL) platform. The keywords used were: Black Nurses; Invisibility of Black Nurses; Health of Black Women; Access and Permanence of Black Students to College; Working Women. During these searches, few scientific productions were found, proving the need for further studies on the subject. So, to contribute to the debate, the present study aims to know the academic-professional trajectory of black nurses in a teaching hospital.

METHODS

This is a descriptive and exploratory qualitative study being conducted and structured based on the Consolidated Criteria for Reporting Qualitative Research (COREQ) to meet the scientific requirements for qualitative studies.⁽¹⁴⁾ The research followed the ethical precepts postulated in the Code of Ethics of nursing professionals, as well as Resolution number 466/2012, which establishes the guidelines and regulatory standards for research involving human beings and Circular Letter number 1/2021 of the National Health Council/Ministry of Health, which guides procedures in research with any stage in a virtual environment. It also complied with the General Data Protection Law, Law 13.709/2018, which establishes rules on the collection, storage, processing and sharing of personal data, including in digital media. To ensure anonymity, participants were identified as "NUR" of nurse, followed by the interview number such as: NUR 1, NUR 2. The study was submitted to Plataforma Brasil and approved by the Research Ethics Committee of the College of Medicine of the Federal University of Pelotas with opinion number 5,405,917.

The research was developed in the municipality of Pelotas, State of Rio Grande do Sul (RS), at the Teaching Hospital of the Federal University of Pelotas - Brazilian Hospital Services Company (HE-UFPel/EBSERH). The Institution arose from the need for the University to have a place for the development of the practical learning of academics, also becoming a service provider through the Unified Health System (SUS) for 28 municipalities in the southern region of RS. It is a general hospital, with 175 beds distributed among the following units: Medical Clinic, three Urgency and Emergency Networks (RUE I, II and III), Surgical Clinic, Obstetric Clinic, Gynecological Clinic, Pediatric Clinic, two Intensive Care Units (Neonatal ICU and General ICU) and Day Hospital.

Five self-declared black women nurses and workers from HE-UFPel/EBSERH participated in the study. Nurses from the Teaching Hospital-UFPel/EBSERH, who declared themselves black, were included. For the selection of the participants, the technique known as snowball was used, with the key

informant being a black nurse who had supervised the final stage of the main researcher's nursing course. After the interview with the key informant, she indicated a black nurse who fit the inclusion criteria of the research and the contact was made via telephone. This procedure was repeated until there was a case of participant refusal. Thus, contact was resumed with the previous interviewee for a second indication of the potential participant; however there were no other black nurses for indication, which led to the closure of the selection of participants. The exclusion criteria were self-declared black nurses who were on vacation, time off or on leave of some kind during the data collection period.

The data were collected by the main researcher through audio-recorded interviews, in the period of May and June 2022, online using the Google Meet meeting platform, with individualized access, sent to the interviewees through prior contact. The calls were made in a private environment of the main researcher's house, in order to ensure anonymity, privacy and a safe environment for the informant to express herself. During the interview, only the audios were recorded through the Audacity application for full transcription and subsequent analysis. The interviews lasted a mean of one hour, first the semi-structured questions were asked, which dealt with the academic construction as a nurse, until the beginning of the professional career; professional experiences as a black nurse and; meaning of being a black nurse; later a space was opened for the interviewees to speak freely on the subject. The interviews took place after signing the Informed Consent Form that was signed in person or via Google Forms.

After the interviews, the content was transcribed verbatim, literally, and the data were treated through the operational proposal of content analysis, being developed in three stages: pre-analysis, exploration of the material or coding and treatment of the results obtained/interpretation.⁽¹⁵⁾ The thematic analysis of the contents of the interviews resulted in the production of three categories, presented below. The categorization added previously identified themes, due to its relationship with the object of study, and others derived from the analysis of the empirical material. Academic trajectory of black nurses: access and permanence in the University; Color, gender and class: intersections that produce discrimination against black nurses and, Representativeness, resistance, pride and suffering experienced in the professional trajectories of black nurses.

RESULTS

The research participants were five self-declared black nurses aged between 35 and 47 years, graduated nine to 20 years ago, working at HE-UFPel/EBSERH for five to six years. One participant had a specialization, two a master's degree and two a PhD as the highest academic degree, four nurses graduated from federal institutions and one from a private institution. The following are three thematic categories of analysis.

Category 1: Academic trajectory of black nurses: access and permanence in the University

In this category, participants report on issues related to access to the university environment. At the time, to win a place at the University, the participants resorted to private education during high school and/or preparatory courses for selection. This fact leads to the need for financial investment and even the abandonment of other training to focus on studies and be able to strengthen oneself for entry into university education.

[...] a part of my studies I did in public school and a part in private school to be able to enter university. [...] it was a very difficult entrance exam, because it was a course with few places. (Nur 1)

[...] I took the entrance exam in 2002, and was taking a technical course, which I did not get to graduate; I left to study for the entrance exam. (Nur 2)

When I arrived in Pelotas, I took a pre-university course [...]. (Nur 3)

Financial issues were the main challenge for the participants to stay at the University. The participants depended exclusively on the families' few resources, or needed to divide themselves between studies and work to stay at the University.

[...] My family didn't have many conditions, we were poor, we didn't have many conditions to come and live in Pelotas, so there was a total effort. I came here [Pelotas] and

started going to college, I shared an apartment with another girl [...], at first it was very difficult to maintain. (Nur 4)

It was very difficult, going to university, I joined [...] I was 25 years old, and always working, I was on duty on weekends attending college, then to the end of college [...] I passed a public exam as a nursing technician at the city hall, and it was very difficult to go to college. At least one job I needed to have to support myself. (Nur 5)

Category 2: Color, gender and class: intersections that produce discrimination against black nurses

The study participants reported the lack of black representation in the institution's college. In addition to the absence of teachers, there were few black students, with only one representative being common or there being abandonment of studies by black people who could not maintain themselves during training.

No, I never had [black professor in college]. No, in my class I was the only [black student]. (Nur 1)

[...] I was the only black woman in my class. My cousin graduated before, a nurse too and was the only black woman in the class. (Nur 2)

I had four black colleagues, from the same class; our class was the only one that had a majority. It was me and four, five other students. One failed; [...] we followed, me and three others. [...] we noticed that there was little presence of black people in the classes, much less, at the end it was me and two more, we were three nurses in a class of 12. (Nur 3)

No, black professor, I didn't have any both in the technical course and in college and black colleagues, yes, I did. I think most of them got in the way. From a class of 20 people there were about five blacks, and only me and someone else graduated. (Nur 5)

During professional life, the lack of black representation in the spaces remains. Participants report that they are often the only black nurses in the sector, that most black people occupy less educated positions. They also expose the absence of black people in the institution's leadership positions.

[...] do you see any blacks in the direction of the hospital? There is not. Do you see any blacks inside the nursing department? There is not. We don't exist? We exist, but the opportunity is not enough. (Nur 1)

[...] there is no black nurse in my sector, there is a technician. We cannot find ourselves in these spaces yet, unfortunately and we see the black majority with a lower level of education. [...] the higher the schooling, the less we meet. [...] in the leadership we do not see black people, in EBSERH the representation is very low, few blacks. Unfortunately we are the minority. (Nur 2)

There at the Teaching Hospital we do not have blacks in charge, if there is one or two, in those heads of low visibility. You better give a leadership position like that to the black man because no one sees. (Nur 4)

Participants report situations in which they were exposed to everyday racism in the workplace, in the form of microaggressions. Situations that put them in a defensive position, feeling the need to constantly prove qualification, generating physical and mental exhaustion.

[...] People keep looking at your work, watching you, to see if you are competent, due to your skin, because with others you do not see it. [...] And in the middle of all this there is still the issue of you being black, of being recognized as a nurse, you have to have several titles to prove it, just because of your color. (Nur 1)

[...] a child took it and made a comment: funny she has black, dark skin and white hands, but she is a good-hearted person [silence] [...]. [...] in some units I remember people saying

"she who is my nurse", People look and say "is she your nurse?" Everyone is like, "but she's black!" They don't verbalize, but looking in their face you see. (Nur 3)

And yes, I have already suffered racism inside the hospital [...]. For example, here in the south we use blue, the nurses, and a fellow physician has already entered and I was there in blue [laugh], and asking who the nurse was. And many times, if I do not impose myself, I am not the nurse of the unit, I see a colleague of mine who is white, she is the nurse of the unit. You don't even have to ask, they are enough for her, you are the nurse of the unit. This difference in treatment I see, and I think for black nurses and as a black woman, [...] we have to talk twice, three times to be heard. [...] it's very exhausting. I have to be very firm in the answers I am going to give, or the procedure I am doing, impose myself on that, because if I am going to fail at some point in that answer, I am undervalued [...]. (Nur 5)

Category 3: Representativeness, resistance, pride and suffering experienced in the professional trajectories of black nurses

In this category, the interviewees report what it means for them to be a black nurse. The speeches show pride in the path taken, but there is also the wear and tear of being a nurse and black, the redoubled responsibility, the emotional and physical wear and tear of having to constantly prove her competence.

What does this mean for me? I never thought about it [laughs], I think I feel proud to cross these barriers. But I feel good, I think I want to represent a space for other black women to understand that they can also be in these spaces, we make it more common, that we feel represented. (Nur 2)

[...] it's not easy, we look, I'm always laughing, always joking, but it's something that is not easy, something that we build day by day; they demand from us 10 but we have to be 30, so that we are minimally compared to that professional who is white, so that we have a minimum of recognition equal to what the other professionals have. (Nur 4)

[...] So being a black nurse is that, running two, three times more, proving that we have technical - scientific knowledge, imposing two three times more. (Nur 5)

DISCUSSION

The participants of the study rescued, from the researcher's questions, memories of their academic-professional trajectories that were and are still directly affected by racism in its various forms. Being a black woman in a racist, classist and sexist society is a challenge, especially when seeking social mobility through education. The difficulty in accessing university education by the black population occurs since schooling, especially in attending, remaining and completing high school.⁽¹⁶⁾

To understand the inequalities still observed in university education, it is necessary to take into account the rugged path taken by young black women to reach university. Young people from needy families have greater difficulties in completing basic education, having to opt for daily work and night study, when this is possible. Often, black women need to enter the labor market earlier to meet basic needs such as food, clothing and housing, as the family structure cannot always provide the basics for this young woman to be able to only study.⁽¹⁶⁻¹⁷⁾

For black families, education is one of the main mechanisms of social ascension; they project on young people the realization of dreams that they did not have the opportunity to realize. Most of the black nurses interviewed had family support for admission and during training. But when there is no family, or other support network that offers the material and symbolic supports necessary to follow the studies, it is much more difficult to overcome adversity. The attempt to reconcile work and study generates fatigue and demotivation, thus increasing the chances of dropout.⁽¹⁸⁻²⁰⁾

The study participants entered the university before the Quota Law, but after more than a decade of implementation it is already possible to observe, even if in a timid way, the reduction of racial inequalities within university education. However, even if quotas are an important stage towards the transformation of the academic scenario, dropouts show that ensuring access is essential, but it is also necessary to implement permanence policies for quota students at the university.⁽¹⁸⁻¹⁹⁻²⁰⁾

The university is a space historically occupied by whiteness, with its Eurocentric epistemologies and the protagonism of the white population in the college, administrative positions and students. When belonging to other population segments, this scenario can cause estrangement and a feeling of displacement.⁽¹⁾ The study participants were not reflected in that space, there were, according to them, no black representatives on the college during their academic lives. The lack of representation in these spaces can generate a mistaken perception of which environments can be occupied by black people.⁽²⁰⁾

To reduce inequalities, it is necessary to populate spaces for black women to identify themselves. By occupying places of knowledge production, which until then belonged to white people, black teachers become positive references, arousing the desire and motivation of their peers to also enter academic life. Black teachers start reflections on gender, sexuality and racial belonging with a focus on multiplying the debate on resistance and diversity inside and outside universities, discussions that until then were silenced.⁽²⁰⁻²¹⁾

Even with Law number 12.990/2014, which reserves to blacks 20% of the vacancies offered in public tenders to provide effective positions and public jobs within the scope of the federal public administration, institutional racism in the labor market still causes the invisibility of black women. They rarely occupy positions of leadership and direction, corroborating the reports of the black nurses interviewed. The law of quotas in public tenders is far from achieving its objective, racial equality, so it must be maintained and supervised.⁽²²⁾

The inequality representative of other racial segments is a strategy and consequence of whiteness for the maintenance of power and the status quo. The number of black nurses interviewed reflects the process of invisibility, isolating the black subject maintains the white consensus and preserves inequalities. Being outsider within and having to represent not only oneself, but a group, highlights racism and removes the right of black women to subjectivity. The black woman is not just her, she is a body, a group, a story, thus existing in triplicity. When being triple, it is necessary to be three times better than white people to become equal.⁽⁵⁾

As already mentioned, Brazilian nursing was born with a strong influence of the whitening culture and eugenic ideals. This evidence contributes to forging an identity and professional orientation in addition to nursing practice and social representations, directly influencing interpersonal relationships to the present day.⁽¹¹⁻¹²⁾ The interviewees' statements highlighted that racism is part of everyday work. The people cared for in the teaching hospital, contaminated by the identity stereotypes of the profession and the ingrained culture of whitening that for years determined which roles should be assumed by black women, rarely place them as occupants of leadership positions. The daily racism suffered by black nurses indicates the need to create tools that promote society's reflection on racism and the privileged positions of whiteness.⁽²³⁻²⁴⁾

The daily racism reproduced through microaggressions can affect the self-esteem of black women, because they have characteristics devalued by others, they tend to internalize negative opinions, presenting a lower self-esteem than the most valued groups. The constant coexistence with discriminatory experiences suffered in the workplace impacts physical and mental health, and correlations have been observed between experiences of discrimination, mental disorders, stress and depressive symptoms in general. So, racism is a determining risk factor for the development of psychological disorders and illness in the black population.⁽²⁵⁻²⁶⁾

When entering an exclusionary community, no matter how much black women seek the socially accepted standard, even against their will, realities and experiences, they remain outsiders within. This makes the experiences of black women increasingly tense and uncomfortable. Outsiders within need to disregard the tensions caused by their differences or turn tensions into perspectives of resistance and change. The entry and permanence of black women in a space that was not previously occupied by them can make these environments more plural, bringing black women closer through aesthetic processes, self-knowledge, building a network of affection and solidarity among outsiders within.⁽¹⁰⁾

The understanding of blackness is fundamental for black women to recognize their experiences as legitimate, assuming the protagonism of their stories. In this way, black women walk in the direction of a nonconformity that leads to concrete actions that subvert the logic of the oppressions experienced by most of their ancestors, thus, black women live in daily struggle not only in defense of themselves, but also of the entire community.⁽²⁶⁻²⁷⁾ Black resistance represents the struggle to reverse these effects, affirming black culture and ancestry and breaking with the whitening pattern of Brazilian society. Even if the situations

faced by black nurses in their daily lives do not become less painful, resistance and struggle against adversity contribute to dissolving stigmas and creating inspirations for future generations.⁽²⁷⁾

The low representation of black professionals within the institution reaffirms the need to maintain the quota policy both in training and in public tenders. The reduced number of black nurses in the field of study became a limiter to broaden the perception about the theme. Another limitation of the research was the difficulty of finding current references about black women regarding their education and work, especially in nursing. In the search carried out, only three articles published in the last five years were found that deal with the black presence in Brazilian nursing and in the public university.^(1,11-12)

The results of the study indicate the need for investment in research on black women and nursing, and also on the impact of racism on the mental health of black nurses. In addition, it is important to add epistemologies that were previously invisible by the Eurocentric formation of Brazilian universities, such as black and decolonial feminist thought. The more studies are published on the situation of these women in the academic and professional environment, the greater the mobilization and the search for changes that can come through quality and inclusive education and empowerment, representing more recognition and place of speech for black nurses.

CONCLUSION

From the results, it was possible to know the academic-professional trajectory of black nurses HE-UFPel/EBSERH. Trajectories that were and are perversely crossed by racism in its different forms, when they found it difficult to enter and remain at university, when they did not see themselves represented on the college or when they did not find black colleagues in higher positions of public administration. In addition to suffering from daily racism, present in the professional routine, when they need to constantly prove their competence and in the behavior of colleagues, users and companions of the health service. Even with the perverse presence of racism, black nurses resist and leave a legacy of belonging and identity so important for future black professionals.

CONTRIBUTIONS

Contributed to the conception or design of the study/research: Avila RV, Mota MS. Contributed to data collection: Avila RV. Contributed to the analysis and/or interpretation of data: Avila RV, Farias TA, Mota MS. Contributed to article writing or critical review: Oliveira IR, Mota MS, Porto AR, Ribeiro JP. Final approval of the version to be published: Mota MS, Porto AR, Ribeiro JP.

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