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Florence Nightingale's Environmental Theory: Reflections for Nursing Practice

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Abstract: In this article, we seek to discuss the theoretical and philosophical aspects emanating from Florence Nightingale's environmentalist theory, integrating her teachings with the practical aspects of health care and nursing. Currently, Florence's Environmental Model is described as a Nursing Theory, as its creator was a pioneer in systematizing the knowledge and moral characteristics of the profession, elevating it to a scientific level, unlike its beginnings, where empiricism and the lack of methodological rigor in the construction of knowledge in that discipline. The Environmental Nursing Theory is anchored in three important relationships, characterized by the interaction between the environment and the sick person, the nurse and the environment where care occurs and the nurse and the sick person.

INTRODUCTION

In the 19th century, through the rise of the Victorian Era, the advent of political and social medicine and with the important discussion of the social repositioning of the female figure, professions related to the health of the population gained prominence, especially nursing, which began to require new skills, beyond the mere selflessness and religiosity once necessary (BRUNO, 2019, GARCIA; NEVES; CAMARGO, 2017).

In the meantime, the figure of Florence Nightingale emerges, an English aristocrat, who became an important actress in the emancipation and systematization of the practice and formal teaching of nursing in modernity. She was born in Florence, on May 12, 1820, into an English family, rich and highly cultured. He had the opportunity to study several languages, with emphasis on mastering mathematics, an important characteristic for his recognized epidemiological and pragmatic work in cleaning up and organizing assistance during the Crimean War (GARCIA; NEVES; CAMARGO, 2017).

With a vocation recognized at a young age, Florence has always demonstrated an attachment to care and love for

human beings. During his travels throughout Europe, he was able to actually participate in the health care provided to the population at that time and, through his notes, he was able to bring together ideas regarding human care, which preceded his important writings on nursing and hospitals (GARCIA; NEVES; CAMARGO, 2017).

Desiring to fulfill herself as a nurse, she spent the winter of 1844 in Rome, studying the activities of the Catholic brotherhoods. In 1849 he made a trip to Egypt and made the decision to serve God. Given her perseverance, it was only at the age of 31 that she obtained her parents' permission to do internships, working in a Protestant institution in Kaiserswert, Germany, where she became a deaconess (LIMA, 2015).

After this period, decided to follow her vocation, she sought to complete her knowledge, which she considered still insufficient. He visited the Dublin hospital, run by the Sisters of Mercy, a Catholic order of nurses founded 20 years earlier. He met the Sisters of Charity of Saint Vincent de Paul in Paris. Little by little he prepared for his great mission: working in the Crimean war where soldiers were "cared for" in unsanitary field hospitals, with mortality rates around 40% (LIMA, 2015).

It is noteworthy that during the Crimean War, British field hospitals were out of date, with a high number of deaths related to the high incidence of infectious diseases, hospital disorganization and poor sanitary conditions in those places (RAMBAUSKE, 2019).

Although, in the popular imagination, Florence spent her life in the Crimean War, her career was marked by long working hours and dedication to studies and the practice of nursing. After returning from his duties in the combat field, despite being sick with Crimean fever, later called brucellosis, he wrote several writings that portrayed his focus on proposing important reforms for nursing. It is observed in her writings that the forerunner of modern nursing was not focusing on the disease, a discussion in accession in that period resulting from the studies of microbes, but on the phenomenon of illness and the position of the family in caring for the individual inserted in the environment (RAKOCZY, 2018).

During her career, Florence wrote several letters to friends and acquaintances and around 200 works in which her beliefs, observations and proposals for changes in health care from that period (and which continue to this day) are printed. Even after the age of eighty, she remained active, contributing to the Nursing discipline. Her death was dated August 13, 1910, in London, at the age of ninety, and her remains were deposited in the cemetery of St. Margaret's Church in East Wellow, Hampshire, after the family's refusal to bury her in Westminster Abbey (LOPES; SANTOS, 2010).

In 1859, Florence Nightingale inaugurated the Environmentalist Model through a book, initially aimed at home caregivers, but which, due to its empirical and theoretical magnitude, took on global proportions. This model describes the environment as the main focus to provide all external conditions and influences that affect life and human development with the capacity to prevent, mitigate or contribute to illness and death (MEDEIROS; ENDERS; LIRA, 2015).

The Environmentalist Model was presented by Florence Nightingale in 1859 and, although it was written more than 150 years ago, it continues to guide actions used today, such as hygiene to avoid morbidities and reducing the number of infections by cleaning the environment (MARINELLI, 2020).

Currently, Florence's Environmental Model is described as a Nursing Theory, as its creator was a pioneer in systematizing the knowledge and moral characteristics of the profession, elevating it to a scientific level, unlike its beginnings, where empiricism and the lack of methodological rigor in the construction of knowledge in that discipline. Thus, in this essay, Florence's Environmentalist Model called Environmental Nursing Theory is used, as it seeks to support the professional practice of human care through the paradigmatic construct necessary for Nursing Philosophy (RAMALHO NETO, 2016).

Florence does not explain in depth the relationship between the nurse and the patient - at the time using this term, but nowadays called subject, in the sense of promoting the autonomy and individual humanity of each person who becomes the social actor in their existence (GOMES, 2019), but clarifies that the caregiver is responsible for maintaining the lives of individuals suffering from illness through knowledge of the ideal dietary characteristics for these people, in addition to offering intellectual and physical leisure, when possible, and encouraging self-care and early independence in caring for these people (NIGHTINGALE, 2010).

THEORETICAL ASPECTS RELATED TO HEALTHCARE AND NURSING PRACTICE

Through Environmental Nursing Theory, human beings are central to nature, whose natural defenses are influenced by the environment in which they are inserted. Therefore, health professionals, especially nurses, must provide an adequate environment for the best recovery of patients. This makes it possible to approach the environmental conditions to which the individual is exposed, as the environment influences the process of illness and health recovery (VASCONCELOS et al., 2020).

From her Theory, Florence began to configure a scientific revolution in Nursing, by enabling the recording of what was practiced empirically. Despite everyone observing the same phenomena that existed at that time, she dedicated herself to going further, through the systematization of ideas and organization of concepts that would inaugurate Modern Nursing. Thus, in addition to including the environmental impact on the recovery of injured people and home comfort for health promotion, it also enabled reflection on the imperative need for scientific knowledge of nursing professionals who played a key role in providing health care to the population (KOFFI; FAWCETT, 2016).

The Environmental Nursing Theory is anchored in three important relationships, characterized by the interaction between the environment and the sick person, the nurse and the environment where care occurs and the nurse and the sick person. In this assumption, there is integration between the dimensions addressed in the Environmental Nursing Theory. The environment has a close relationship in the emergence and maintenance of the disease, and it is necessary to provide a good environment for the subject so that diseases can be prevented. Therefore, the nurse must manipulate the environment in order to control variables that may interfere with the patient's recovery, through strict hygiene, maintaining a ventilated environment and natural exposure to sunlight, in addition to reducing visual and noise pollution (NIGHTINGALE, 2010).

Nursing knowledge anchored in Nightingale's assumptions has several dimensions, as it emphasized the use of the empirical dimension, including valuing statistics, with strong importance for observation and recording of information. In addition to the rigor required by Florence, there was recognition of the need to increase the personal characteristics that should guide nurses, encompassing ethics, morals, artistic skill in professional practice and a socio-political concern about the context in which nursing was situated. Inserted (BRANDÃO; GALLUZZI, 2019).

In a theoretical and reflective study carried out by researchers from the Federal University of Rio Grande do Norte, which aimed to analyze Florence Nightingale's Environmental Theory based on the criteria: meaning, limits, language, concepts, formulation of propositions, variables and hypotheses, theoretical knowledge which helps to explain and predict the phenomenon and theoretical knowledge with influence on nursing practice, it was pointed out that the Theory presents clarity of meaning of ideas, clear limits, level of understanding above 90%, with the main concepts, and propositions formulated based on in these concepts, in addition to variables and hypotheses that help to understand and interpret propositions. This has an influence on nursing practice, serving as a parameter today, considering that this theory was a milestone in the history and modern practice of nursing (MEDEIROS; ENDERS; LIRA, 2015).

In this way, it is observed that with all the knowledge constructed and accumulated by Florence during her empirical trajectory, it resulted in the compilation of ideas that gave rise to the Environmentalist Theory proposed by this bastion of knowledge in nursing. However, just like their writings, the body of nursing knowledge seems to be little consulted and implemented, to the point of increasingly neglecting and even underestimating the training of nurses regarding the practical applicability of Nursing Theories (CARVALHO, 2009), for example Florence's Environmental Theory, discussed in this essay.

It is noteworthy that Florence Nightingale did not necessarily create a Nursing Theory through her writings, regarding the methodological rigor used for this type of knowledge construction, as at her time, there was no discussion of this paradigm yet. Currently, Nursing Theory is understood as a systematization of anthropophilosophical assumptions that permeate solidified knowledge in the area and that enables the phenomenological description of professional practice with scientific and social reflection (SANTOS et al., 2019).

However, when describing her empirical knowledge, systematized through her writings, she became the pioneer in proposing the environmental importance in the health status of the sick person, thus inaugurating the assumptions of the Environmental Nursing Theory through the development of the Environmental Model. This model is described as responsible for maintaining the patient's energy, based on the variables: ventilation, noise, air, home health, lighting, comfort and hygiene, in addition to adequate nutrition and intellectual activities to distract patients. In this scope, the nursing professional must provide an adequate environment capable of actively participating in the patient's recovery (ARAÚJO; SILVA, 2019).

On the bicentenary of Florence Nightingale's birth, the year 2020 was marked by a serious respiratory viral pandemic, which appears to also affect other human organs, such as neurological and renal damage: Covid-19 (MONTE *et al.*, 2020). The behavior of the spread of the pandemic gave rise to the Nightingale approach that contagion occurs in environments with poor hygiene, being a practice intensely encouraged in the initial months of the pandemic, when

there is still no vaccine or effective treatment to combat the virus. hands and environmental hygiene, especially in the home environment (TONIN *et al.*, 2020).

In this way, the teachings of Environmental Nursing Theory become evident, because, despite being centuries old, it continues to have an alarming sound in the current period. In her career, the "lady with the lamp" focused on mitigating infections, promoting good hygiene through clean water and sheets, exercising in outdoor, ventilated environments, and providing adequate food in addition to other factors to enable comfort. and well-being to human beings (JUTHAMANEE, 2020).

FINAL CONSIDERATIONS

Human beings have been developing interventions in History, seeking to explain the phenomena that occur in the world. As a result, the fight against diseases was no longer understood only in private and individual aspects, but began to give space to the understanding that the knowledge of different forms of knowledge would be refined for the improvement of the community, the collective, which has been happening with scientific advancement in recent centuries.

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