

Social Justice Is an Integral Part of the **Work Done by Public Health Nurses**



The final report of the Commission on Social Determinants of Health (SDOH) of the World Health Organization (WHO) linked social justice to health inequities. In many ways, critical caring theory in nursing attempts to address health inequities by supporting a practice that is caring and motivated by social justice. While the Canadian Nurses Association (CNA) Code of Ethics was revised in 2008 to include human rights and equity as a part of the "ethical endeavors" of nurses, social justice is not a part of nurses "core ethical responsibilities." In serving as a tool for nurses, rather than a core responsibility of practice, this implies that human rights and equity are optional. But how do public health nurses adopt critical care in their practice?

What did the researchers do?

The researchers completed individual interviews with 11 expert public health nurses (PHNs), who were women. These were PHNs that had a minimum of 10 years of work experience in Southern Ontario, Canada. While these interviews were done in 2005, the researcher held two focus groups in 2011. The first involved 6 nurses who practiced in 3 different provinces, while the second took place with 10 nurses in

What you need to know:

Many public health nurses already practice critical caring theory in their work. While they see social justice as vital to the work they do, human rights and equity are not yet a part of the CNA's core responsibilities for nurses.

a midsize city in Southern Ontario. Both the interviews and focus groups looked at the PHNs experience and how it may have reflected the 7 processes of caring and health. These were:

- 1. To prepare oneself.
- 2. To develop and maintain a helping-trusting relationship.
- 3. To use a systematic, reflexive approach.
- 4. To engage in transpersonal teaching-learning.
- 5. To provide, create and maintain a supportive and sustainable environment.
- 6. To meet needs and building capacity.
- 7. To be open and attend to spiritual-mysterious and existential dimensions.







What did the researchers find?

The researchers found that PHNs had the ideas about social justice and caring embedded in their work. Thus, this led them to take on social activist actions that contributed to a supportive and sustainable environment. In their accounts, the PHNs spoke on:

- Their moral imperative: Participants valued respect, self-determination, honesty and social justice. The urgency for social justice arose from seeing social inequities first hand. They felt that barriers arose when they did not find support for their actions in their workplace, professional organizations or administration.
- Their advocacy for health inequity: PHNs sought to address the social determinants of health. They sought change in public policy, through strategies like protests, letter-writing, and collaboration with the community, government or other work sectors. The equitable distribution of resources was important to PHNs.
- Their barriers to moral agency: PHNs found the necessary movement between meeting health needs and acting on health inequities was made more difficult by restructuring of public health, increased workload, and focus on a population approach to health (rather than a collective well-being).

How can you use this research?

This research may be useful for practitioners in the field of nursing or other social services. It sheds insight on ways to address issues on equity and practice in institutions for health care.

It also provides ideas on the type of support that front line workers need.

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