

CONCEPTS AND PRINCIPLES OF HUMAN RIGHTS FOR NURSING PROFESSIONALS IN EMERGENCY UNIT

CONCEITOS E FUNDAMENTOS DOS DIREITOS HUMANOS PARA PROFISSIONAIS DE ENFERMAGEM EM UNIDADE DE EMERGÊNCIA

CONCEPTOS Y FUNDAMENTOS DE LOS DERECHOS HUMANOS PARA LOS PROFESIONALES DE ENFERMERÍA EN LA UNIDAD DE EMERGENCIA

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Objective: to grasp concepts and principles about human rights in the understanding of nursing professionals in a hospital emergency unit. **Method:** phenomenological research conducted with 11 nursing professionals. The interviews were recorded and the interpretation of the data was given by the Humanistic Existential Personalist Triadic configuration, based on the Universal Declaration of Human Rights. **Results:** two categories emerged “Nursing professionals conceptualize rights taking as reference the Universal Declaration of Human Rights” and “Nursing professionals base their understanding of Human Rights on bioethical principles and values”. Health, housing, safety, medical and social care were expressed as human rights. Respect for the other and human rights was understood as independent of the condition of hospitalization. **Conclusion:** nursing professionals understand human rights based on the Universal Declaration of Human Rights. The bioethical aspects and values that emerged as principles for this understanding were autonomy, dignity, beneficence, otherness and privacy.

Descriptors: Human Rights. Nursing Care. Bioethics. Emergencies.

Objetivo: apreender conceitos e fundamentos sobre direitos humanos na compreensão de profissionais de enfermagem em unidade de emergência hospitalar. *Método:* pesquisa fenomenológica realizada com 11 profissionais de enfermagem. As entrevistas foram gravadas e a interpretação dos dados deu-se pela configuração Triádica Humanística Existencial Personalista, embasada na Declaração Universal dos Direitos Humanos. *Resultados:* emergiram duas categorias “Profissionais de Enfermagem conceituam os direitos tomando como referência a Declaração Universal dos Direitos Humanos” e “Profissionais de Enfermagem fundamentam a compreensão sobre Direitos Humanos em princípios bioéticos e valores”. *Saúde, habitação, segurança, cuidados médicos e sociais foram*

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expressos como direitos humanos. O respeito ao outro e aos Direitos Humanos foi compreendido como independente da condição de hospitalização. Conclusão: as profissionais de enfermagem compreendem os Direitos Humanos com base na Declaração Universal dos Direitos Humanos. Os aspectos bioéticos e valores que emergiram como fundamentos para essa compreensão foram autonomia, dignidade, beneficência, alteridade e privacidade.

Descritores: Direitos Humanos. Cuidados de Enfermagem. Bioética. Emergências.

Objetivo: aprehender conceptos y fundamentos sobre los derechos humanos en la comprensión de los profesionales de enfermería en una unidad de emergencias hospitalarias. Método: investigación fenomenológica realizada con 11 profesionales de enfermería. Las entrevistas fueron grabadas y la interpretación de los datos fue dada por la configuración Triádica Humanista Existencial Personalista, basada en la Declaración Universal de Derechos Humanos. Resultados: surgieron dos categorías “Los profesionales de enfermería conceptualizan los derechos tomando como referencia la Declaración Universal de Derechos Humanos” y “Los profesionales de enfermería basan su comprensión de los Derechos Humanos en principios y valores bioéticos”. La salud, la vivienda, la seguridad, la atención médica y social se expresaron como derechos humanos. El respeto por el otro y los derechos humanos se entendía como independiente de la condición de hospitalización. Conclusión: los profesionales de enfermería entienden los derechos humanos sobre la base de la Declaración Universal de Derechos Humanos. Los aspectos bioéticos y los valores que surgieron como fundamentos para este entendimiento fueron la autonomía, la dignidad, la beneficencia, la alteridad y la privacidad.

Descriptores: Derechos Humanos. Cuidado de Enfermería. Bioética. Emergencias.

Introduction

The Universal Declaration of Human Rights (UDHR), created and implemented by the United Nations (UN) in 1948, is based on civil, social, cultural, economic and political rights and covers all peoples of all nations, and regardless of any human condition, it is up to individuals and each body of society to promote respect for these rights and freedoms⁽¹⁾. This declaration consolidated the construction of numerous documents to ensure people's rights, including the Constitution of the Federative Republic of Brazil, promulgated in 1988⁽²⁾.

In 1953, the International Council of Nurses (ICN) approved the International Code of Ethics for Nurses, which presents four fundamental responsibilities in its preamble: promoting and restoring health, preventing the disease and alleviating suffering. The code aims to meet Nursing needs in the universal scope, with respect to human rights (HR) that are inherent to the profession. Therefore, care should be provided without distinction of any kind and provide quality services to the health of the person, family and community, in addition to coordinating their activities in an interdisciplinary way⁽³⁾.

In health care relations, especially in nursing, nurses need to have contact with international

(and national) human rights instruments that influence the implementation of health policies and health research⁽⁴⁾, which will contribute to the understanding of these rights, also contemplated in the International Code of Ethics for Nurses, ensuring respect for and protection of Human Rights.

The understanding of Human Rights by Nursing professionals is fundamental as a more humanized and problem-solving practice is sought. By understanding the theme, the possibilities of professionals to recognize the human singularities expressed in the social, political, economic and cultural context are expanded, and the diversity of human existence is part of a proposal for social transformation in health care⁽⁵⁾.

By accumulating knowledge, including concepts and principles of Human Rights, Nursing can conduct care practices based on humanist foundations in contexts of vulnerability and violation of Human Rights. Nursing, by broadening its perspectives on human existence, adopting an ethical posture compatible with the defense of rights and freedoms, in addition to non-discrimination, can overcome the challenges of its care, especially in situations of vulnerability⁽⁵⁾.

For the different contexts, the emergency sector is relevant, and it was the environment chosen for this work, because its coverage is universal to health and requires quality in the integration between pre-hospital systems and the resources available to meet the population in their needs, or in sufficient number of trained people, materials and essential medicines⁽⁶⁾. The emergency structure must be based on rights for non-discriminatory emergency care, in addition to adequate supervision and authority to enforce these laws in this type of environment.

The scarcity of Nursing productions on approaches that integrate Human Rights and health care may favor limited reflections on the practice of human and problem-solving care, especially in vulnerable conditions. A study suggests that further research is important to analyze nursing practices, in order to consolidate knowledge about Human Rights for Nursing⁽⁴⁾.

Thus, this study also seeks to show that the lack of understanding about dignity in Nursing care relationships generates confusion and ambiguity, which implies inconsistency in practice and incompatibility to elaborate or define concepts that can be operationalized, since there is a need on the part of Nursing to reformulate the study and the promotion of dignity⁽⁷⁾. Thus, it provokes the professional to deepen the knowledge and understanding of Human Rights.

From this perspective, the relevance of this study is due to the lack of investigations that demonstrate the understanding of nursing professionals about Human Rights, especially in the hospital context in emergency sectors. Thus, broadening the understanding of this theme enables the Nursing team to reflect on the importance of Human Rights when providing care to make care more humanized and ethical.

Based on understanding of people's rights, nursing professionals need to make decisions based on the UDHR and on the Health Users' Charter of Rights, in order to preserve human dignity.

Thus, the objective of this study was to grasp concepts and principles about Human Rights in

the understanding by Nursing professionals in a hospital emergency unit.

Method

Phenomenological research, carried out through the understanding of nurses and nursing technicians on the concept and principles of Human Rights, based on the reality they experience in a public hospital in Salvador, Bahia. Phenomenology was used because this technique is concerned with seeking, in people's consciousness and through their experiences, how knowledge is constructed, having as object the world lived by the subject⁽⁸⁻⁹⁾.

This study is an integral part of the master's dissertation entitled "Human Rights experienced by Nursing professionals in the care of the hospitalized person", which understood how Nursing professionals experience respect for Human Rights in the care of hospitalized people. Thus, the meanings of the expressions of such experiences are unveiled by evidencing the structure of the phenomenon.

The study locus was a large-sized hospital in the public network of the state of Bahia, located in the city of Salvador, with continuous 24-hour care to the population of the capital and the countryside, exclusively by the Unified Health System (UHS).

The participants were 11 Nursing professionals, three nurses, five female technicians and three male technicians, who work in the care of health users in the emergency unit of the hospital. All were personally approached, during working hours, and selected according to the daily scale and availability, with no relationship between the researcher and the participants before the beginning of the study. It is noteworthy that, even though there were three male participants, female nurses and nursing technicians were used, because the female gender was majority among professionals and for gender issues in nursing.

The inclusion criteria were: working in Nursing care in a public hospital in the UHS network, being graduated for at least two years and working during the day. Although the

emergency department was not an inclusion criterion, all participants worked there. The following were excluded from the study: nursing professionals who were on vacation, off days after data collection, leave because of health problems or training, or because they were not available for phenomenological interviews.

The phenomenological interview was made by bringing the researcher closer to the people who experience the phenomenon, because only they can provide the data necessary to understand the object under investigation. The interview was directed by a guide previously prepared by the researchers, composed of data on the characterization of the participants and guided by the question "What do you understand about human rights?". These participants, in turn, were questioned as Nursing professionals.

The researcher sought to enter the world of experiences lived by the respondents, leaving them free to answer the question, without interrupting them, and with the necessary time. The interviews were conducted by the main researcher, in a private place, without noise or interruptions from third parties, chosen by the participants who accepted the invitation and signed the Informed Consent Form (ICF).

To ensure the fidelity of the data in the transcription, the audio recorder was used, after authorization for its use. At the end of the recording, the researcher allowed the participants to listen to all the audio for confirmation, addition or exclusion of any reports.

After data collection, the answers provided by the research participants were fully transcribed, adding a number of services to the professional categories, Nurse (NUR) and Nursing Technicians (NT), to ensure anonymity. Subsequently, the order numbers were replaced by flower names, as pseudonyms, chosen through the association of their meanings with the essence of the participants' statements.

Data analysis was guided by the Humanistic-Existential-Personalist Triadic configuration, which allowed the apprehension of the essence

of the participants' statements⁽¹⁰⁾. This type of analysis was used based on the information provided by the interviewees, systematizing their contents and expressions. After this analysis, the structure of the phenomenon was constructed, emerging a theme and two categories.

Nevertheless, for data analysis and their subsequent interpretation, seven steps were followed⁽¹⁰⁾:

- a) attentive reading of the total content expressed by nurses and nursing technicians, in order to grasp its meaning within the global structure;
- b) rereading of the text to identify Meaning Units;
- c) apprehension of the verbal content expressed by the participants of the significant aspects of their perceptions, for understanding and analysis of their experiences. These units were apprehended through an analytical-associative mental process, based on the theoretical framework of human rights, bioethical principles and values;
- d) identification and classification of aspects that presented content convergences of several statements expressed by different participants, looking for what was constant in every statement;
- e) grouping of effect locutions or their meanings for the construction of thematic categories;
- f) presentation of the structure of the phenomenon with the theme;
- g) comprehensive analysis of the significant data of the thematic categories, based on the interpretation of the content associated with the human rights framework, bioethical principles and values.

The present study used as theoretical reference the Universal Declaration of Human Rights and the Constitution of the Federative Republic of Brazil⁽¹⁻²⁾, in addition to the Universal Declaration on Bioethics and Human Rights, 2005, and the UHS Users' Charter of Rights, prepared by the Ministry of Health since 2006⁽¹¹⁻¹²⁾.

The research ethics was ensured seeking to meet the ethical requirements of the National Health Council Resolution n. 466, 2012⁽¹³⁾, which regulates research with human beings. The project was approved by the Research Ethics Committee at the Nursing School of the Federal University of Bahia, under Opinion n. 932.998/2014 and CAAE n. 37557214.6.0000.553.

Results

The participants were 11 nursing professionals, eight females and three males, aged from 31 to 52 years, with a mean of 41 years. The time since graduation varied between 10 and 31 years. Regarding the time working in the health institution, the distribution was heterogeneous, between 2 and 31 years. In terms of degree/courses, six had specialization or courses in the hospital area and a nursing technician graduated in Theology and Philosophy.

After the interviews, based on the human rights and bioethics framework, it was possible to apprehend the meanings and senses of the participants for the construction of the two empirical categories and the theme that structure the phenomenon situated, that is: Thematic “Concepts and principles of Human Rights expressed by nursing professionals in an emergency unit”; Category 1 “Nursing professionals conceptualize rights taking as reference the Universal Declaration of Human Rights”; Category 2 “Nursing professionals base their understanding of Human Rights on bioethical principles and values”.

Thematic: Concepts and principles of Human Rights expressed by nursing professionals in an emergency unit

The thematic consisted of the comprehensive analysis of the two emerged categories, having as reference the Meaning Units of the statements of the study participants who work in hospital emergency units on Human Rights related to their experiences with the Universal Declaration of Human Rights, the principles of bioethics and values.

Category 1: Nursing professionals conceptualize rights taking as reference the Universal Declaration of Human Rights

Nursing professionals working in hospital emergency units expressed their concepts about Human Rights based on the Universal Declaration of Human Rights, such as the person's right to health, housing, medical care, social care, the right to come and go, the dignity of the human person, citizenship, legislation, basic rights and social order.

For nurses and nursing technicians, Human Rights are the respect and appreciation of the person, without social restrictions, and must be ensured. They guarantee respect for the citizen and his/her dignity; their disrespect interferes with the feeling of dignity. Human Rights are mutual respect, with the inclusion of civil, social and cultural rights, and citizenship is a principle.

Human Rights are respecting a person regardless of their condition, their way of being. It is the valorization and respect for the person regardless of their belief, regardless of their social condition, regardless of what they are to society. (Freesia).

It is the right of every citizen to be treated with respect [...] It is having the right to life [...] with dignity. (Sunflower).

It is assured to the person. (Orchid).

They are different rights that help citizens respect each other. (Dahlia).

It includes civil, social, cultural, and other rights. (Bromeliad).

If every human being had his rights respected, they would feel more worthy. I think it is often a little absent, not just in the health area, actually, in the general context. (Magnolia).

Values such as health, housing, safety, medical and social care were expressed as Human Rights, emphasizing that users have the right to health, to be informed about their rights, that Nursing professionals must meet them quickly, and every human being, as a citizen, has the right to quality care. In addition, people have the right to come and go, study, work, have a home, have quality health, aspects that constitute Human Rights, however, the disrespect of these rights has been observed.

So our client he has the right to health and we seek to give that right as quickly as possible to him. (Heather).

Every human being has the right to quality assistance without a push game, seeking his rights as a citizen. (Carnation).

By meeting their vital, main priorities, such as health, education, housing, safety, as well as leisure, and right to clarification, of everything that happens in our society that sometimes the citizen is totally oblivious to his own rights. (Sunflower).

Every human being has the right to come and go, study, work, have their own home, not be discriminated against, and quality health without bureaucracy. (Carnation).

We have several issues: black, discrimination, poor person who is sometimes poorly dressed, then he has the right to come and go, to enter any institution, but is often barred because of the clothes, so it is not respected, so the lack of this right is a disrespect. (Magnolia).

Nurses and Nursing Technicians understand human rights as laws, which guarantee benefits to those most in need. These rights are relevant to life in society and so that their immediate care does not depend on health professionals.

I see that Human Rights are a set of laws that came to benefit those current in need. (Saffron).

They are all rights that are actually guaranteed by Law [...] Relevant rights, which are really necessary for you to have a life in society and be able to survive harmoniously with the environment. (Champagne Rose).

Of course there are some conflicts, because some people think that their right is immediate, but not always we manage to meet this right immediately, not because we do not want to, but because of the unavailability of accommodations, which does not depend on the health care professionals. (Gerbera).

Category 2: Nursing professionals base their understanding of Human Rights on bioethical principles and values

In this category, the nursing professionals of the emergency unit based their understanding of Human Rights in view of bioethical principles and values, such as autonomy, dignity, universality, beneficence, otherness, respect, user's right and privacy. In addition, the principles such as autonomy and self-determination are unveiled upon caring for the user.

Respect for autonomy was more frequent in nurses' and technicians statements, and the experience of human rights is expressed in the choice. Thus, the team understands that users have the right to decide on their care and therapy in relation to his/her illness process, requiring

communication skills between professionals and users. It was also discovered that there is greater autonomy of professionals and users when in private institutions.

Including and respecting your opinion regarding the therapies applied, such as the right to decide whether to accept it or not. What is instituted to be done in your body, in relation to your health [...] May be have his free choice. May be decide for his treatment. The patient often refuses, so we must have an ability to explain to him the need for treatment. (Sunflower).

However, our population is often not very well informed about this. The private institution gives us greater support in doing [...] in being able to do something more for the patient. (Gerbera).

To experience Human Rights, you have to do what you like. (Carnation).

Dignity, as a principle of defense of life, is fundamental in understanding Human Rights. There was the understanding that respect for the human being does not depend on the person's conditions and is part of the dignity of the human being. The principle of universality guarantees Human Rights by the State and there is commitment of the health area to meet these rights, but lacks the dedication of the professionals themselves.

At the services, we need to maintain the minimum dignity of service in the area. (Heather).

That he [user] is someone who is there regardless of his conditions, we have been trying. It is not easy, we have tried to take care of this person as a human being, they sometimes arm themselves, even their own family [...] There is also the issue of homeless people, we work with homeless people, and so we have to show them that they also matters. But his respect as a human being, as a person, regardless of whoever he is or that society is stigmatizing him (color, race, religion) until that issue, marginalization, that marginalized people want to understand as if they were not a human being. (Freesia).

To ensure their rights. Before the State and before other people too [...] by lack of professionals [pause] assigned, right? To ensure these rights. (Orchid).

So, I believe that the health area has this side of service, dedication and the UHS worker has this great challenge: to always be fighting for more people to be well treated. (Heather).

The principles of bioethics, such as beneficence, were mentioned in the interview. There is an effort of the professionals to do their best of themselves before the user's need and, at the same time, to watch over Human Rights,

by respecting the right to the companion, as a way of assisting the user in accepting his/her treatment.

But we have to always try to do our best of people to be able to provide a better quality. What the patient needs at that moment. I think this is the moment for you to assert these rights of his, providing this service to him, to provide the best assistance at the time he most needs it. (Saffron).

And when he sees his companion there happy and smiling, he begins to accept the treatment better and feels a little at home, which ends up improving the treatment. (Freesia).

In relation to meeting Human Rights, nursing professionals consider otherness as a fundamental principle, the exercise of placing oneself in others' shoes. Respect is an essential value, and is seen as a principle that is independent of the patient's hospitalization condition. The right to information and respect for users' privacy is considered essential by the Nursing team.

Many times he goes through situations that [...] that are not good for any human being. (Orchid).

The experience of these Human Rights happens with caring for the other, as if it were someone close to you. (Saffron).

Respecting the other, whether hospitalize or not. (Gerbera).

For me, all these behaviors, we are respecting Human Rights. (Champagne Rose).

And in my work itself, I try to assert this patient's right. And also often because of not knowing, not being informed about procedures, about his needs. (Sunflower).

The respect for privacy, even in the institution, sometimes in a crowded hospital we struggle to keep the person's privacy so that they are not exposed. (Freesia).

Discussion

The Nursing professionals' understanding about Human Rights permeates individual rights. Professionals understand that HR are laws that guarantee benefits to those most in need, different from what is expressed in the Universal Declaration of Human Rights, in which all human beings are equal before the law, without any distinction, regardless of their needs, that is, it guarantees rights in a universal and equal way and not only equitable. Similarly, Human Rights reflect on "[...] rights inherent to all human beings, regardless of race, sex, nationality, ethnicity, language, religion, or any other condition"^(1:2).

In this sense, individual rights are included by legal order, expressed by civil, social, economic, political and cultural rights and are not exclusive to a specific group.

The social rights expressed, such as health and education, in addition to the right to come and go, to work, to live, the right to quality care, safety, medical care and to be clarified, were also mentioned as Human Rights in this study. For professionals, these rights are based on citizenship and supported by the UDHR, which includes the right to life, freedom, education, work, reparation, social protection. In addition to these rights, health involves a dignified life with a balanced environment⁽¹⁴⁾.

Thus, when reflecting on human rights, it should be understood that these involve a complex network of assistance, which are represented by all the rights expressed in the statements of the participants of this study. Thus, HR involve a dignified life with a balanced environment⁽¹⁴⁾, in which the right to safety is protected in case of unemployment, illness, disability, widowhood, old age or other cases of loss of livelihoods⁽¹⁵⁾.

However, this study reveals the disrespect of HR in health care expressed in the participants' statements, in the care for the health user, despite the effort presented to meet the patient in his/her needs. It was possible to understand that the clarification of doubts about the procedures is not always performed in a timely manner, which can generate friction between family members and the patients themselves. Health professionals, as information multipliers, act as facilitators in the process of consolidating rights through involvement between users and family members⁽¹⁶⁾, which contributes to the minimization of the obstacles found in the guarantee and respect for Human Rights, including the right to clarification.

The right to be clarified was understood by professionals as the right of users who seek emergency services. Thus, the user should be informed, with appropriate language and means of communication, about the services and actions proposed for health care and treatment,

minimizing risks and complications regarding the nursing care provided⁽¹⁷⁾.

The study also reveals that nursing professionals are assigned to provide rapid care in emergency cases, in an adequate way, with quality and at the right time⁽¹⁸⁾. Thus, even before sectors such as emergency, it is the nursing team's duty to ensure care continuity and patient safety in adverse situations⁽¹⁷⁾. Knowing people's rights to health, ensuring agile, effective, safe and quality care is indispensable to nursing professionals, especially because it is based on regulations. In this sense, understanding, valuing and respecting HR, regardless of adversities in the various care environments, constitutes an essential value to life, understood as a fundamental right present in the Brazilian Federal Constitution⁽²⁾ and in the Code of Ethics of Nursing Professionals⁽¹⁷⁾.

Furthermore, in the relationships of care with the user and his/her family, nursing professionals should consider individual and group capacities, be willing to ensure good care when benefiting more people, in any context, with quality in their care, in order to promote acceptance of individual needs and instruct the appropriate search for their rights.

It is worth mentioning that human rights are based on bioethical principles and values⁽¹⁹⁾, and this study revealed that, among the principles of bioethics, autonomy was the most expressive among professionals who experience respect for user autonomy in care relationships, using, in part, effective communication. They also see that professional autonomy favors decision-making regarding user care in private organizations. Thus, the right of users to refuse the procedures emerged, after the effort to try to benefit the citizen by explaining the risks of complications of such actions.

Study reveals that "[...] the search for answers about the human care dimension has increased by health professionals, concerned with relationships of autonomy, justice and respect to the human being"^(16:5), revealing the importance of ensuring respect for the autonomy of users who are assisted in health

services, especially in the hospital emergency environment.

Dignity and respect, also bioethical principles, were expressed by Nurses and Nursing Technicians as independent of hospitalization conditions, thus constituting values. The principle of universality was expressed as the foundation of HR, guaranteed by the State, and which are not assured by lack of dedication of the professionals themselves, even revealing commitment of the health area to guarantee this principle. In order to mitigate these consequences, professionals should observe and be attentive during their care practice, in the hospital environment, in the search for real or potential violations of HR of users, the team and other workers⁽²⁰⁾, and thus promote a safe environment, with universal and favorable care for the guarantee of dignity and respect for Human Rights.

For the principle of beneficence, it is noteworthy that professionals strive and offer their best to meet the user's need for health benefit by including the family in this context. As participants understand, otherness emerged as a way to meet human rights, which is a fundamental principle, because they expressed identifying and recognizing the singularities of those being cared for, even before personal differences⁽¹⁹⁾.

In addition to otherness, privacy has emerged as an essential value for understanding the rights of the person who is hospitalized, since respect for the privacy of the health user must be considered and ensured in nursing care, as well as being an ethical-professional obligation⁽¹⁷⁾. The right of the health user also includes being informed about the procedures, diagnoses and therapies related to health, being identified and called by name, having humanized and welcoming care in a clean, comfortable, safe and accessible environment for all, respecting autonomy before choices⁽¹⁸⁾. In addition to these, one should pay attention to the privacy of the information, the correct storage and the care of not making available in digital media⁽²¹⁾.

From this perspective, the Nursing team can apprehend knowledge, skills and abilities to

guarantee Human Rights and health users based on bioethical principles and values. For this, the better the contact of professionals and users, the better the orientation to the principles of bioethics and HR⁽²²⁾.

It is expected that the participants' reflections can support a practice that promotes respect for Human Rights and care quality, seeking equity and universality while caring for users by providing feelings of satisfaction, embracement, understanding and respect for their dignity, besides stimulating new research on the theme, in order to analyze the transformations of Human Rights and their applicability in modern society.

Thus, this study allowed the understanding of nursing professionals in relation to human rights and their guarantee in the care of users in emergency services, based on regulations such as the Federal Constitution of the Republic, the Universal Declaration of Human Rights and the Health Users' Charter of Rights, which converges with the responsibilities of these professionals in the care to users who have sought strategies to implement these rights.

Thus, a limitation of this study is the place, because in view of the diversity and complexity of the hospital scenario, this understanding does not portray the experiences of professionals on Human Rights in other sectors, besides the emergency.

Conclusion

The understanding of the Nurses and Technicians participating in this study on Human Rights is structured in respect for the social rights contained in the Universal Declaration of Human Rights, the Federal Constitution of Brazil and the Health Users' Charter of Rights, and comprises human rights as laws that guarantee benefits to the most needy.

Despite understanding Human Rights as a social right contained in national and international norms, nursing professionals base their understanding of such rights on bioethical principles and essential values, for the guarantee and respect for human rights during

care provision. Thus, by understanding Human Rights, the professionals of this study can ensure dignified and humane care for health users who seek care in a hospital emergency unit.

The study reveals the inherent presence in professionals of bioethical aspects, such as beneficence, autonomy, otherness, privacy, respect for personal identity, the right to information, which are essential and contribute to the necessary changes in professional action, in order to favor the achievement of human rights to all people who need health care.

Contributions:

1 – conception, design, analysis and interpretation of data: Tyciana Paolilo Borges and Darci de Oliveira Santa-Rosa;

2 – writing of the article and relevant critical review of the intellectual content: Tyciana Paolilo Borges, Karla Ferraz dos Anjos, Julia Barbosa de Magalhães, Renata da Silva Schulz and Darci de Oliveira Santa-Rosa;

3 – final approval of the version to be published: Tyciana Paolilo Borges and Karla Ferraz dos Anjos.

References

1. Organização das Nações Unidas. Declaração Universal dos Direitos Humanos [Internet]. Nova York (EUA); 1948 [cited 2020 Aug 19]. Available from: <http://www.un.org/en/documents/udhr/index.shtml>
2. Brasil. Senado Federal. Constituição da República Federativa do Brasil [Internet]. Brasília (DF): 1988 [cited 2020 Aug 19]. Available from: https://www2.senado.leg.br/bdsf/bitstream/handle/id/518231/CF88_Livro_EC91_2016.pdf?sequence=1
3. International Council of Nurses. The ICN Code of Ethics for Nurses [Internet]. Geneva (CHE): 2012 [cited 2020 Aug 18]. Available from: https://www.icn.ch/sites/default/files/inline-files/2012_ICN_Codeofethicsfornurses_%20eng.pdf
4. Ventura CAA, Mendes IAC, Godoy S, Fumincelli L, Souza MC, Souza Junior VD. Perceptions of brazilian nursing faculty members regarding literacy of human rights related to health in

- nursing undergraduate programs. *BMC Int Health Hum Rights*. 2019;19(27). DOI: 10.1186/s12914-019-0213-7
5. Maffaccioli R, Oliveira DLLC. Challenges and perspectives of nursing care to vulnerable populations. *Rev Gaúcha Enferm*. 2018;39:e20170189. DOI: 10.1590/1983-1447.2018.20170189 Portuguese
 6. Burkholder TW, Hill K, Hynes EJC. Developing emergency care systems: a human rights-based approach. *Bull World Health Organ*. 2019;97(9):612-9. DOI: 10.2471/BLT.18.226605
 7. Simões A, Sapeta P. The concept of dignity in nursing care: a theoretical analysis of the ethics of care. *Rev bioét*. 2019;27(2):244-52. DOI: 10.1590/1983-80422019272306 Portuguese
 8. Polit DF, Beck CT, Hungler BP. Compreensão do delineamento da pesquisa qualitativa. In: Polit DF, Beck CT, Hungler BP. *Fundamentos da pesquisa em enfermagem: métodos, avaliação e utilização*. 5a ed. Porto Alegre: Artmed; 2004. p. 199-221.
 9. Gil AC. Métodos das ciências sociais. In: Gil AC. *Métodos e técnicas de pesquisa social*. 6a ed. São Paulo: Atlas; 2008. p. 8-25.
 10. Vietta EP. Configuração triádica, humanista-existencial-personalista: uma abordagem teórica-metodológica de aplicação nas pesquisas de enfermagem psiquiátrica e saúde mental. *Rev Latino-Am Enfermagem [Internet]*. 1995;3(1):31-43. DOI: 10.1590/S0104-11691995000100004
 11. Organização das Nações Unidas para a Educação, a Ciência e a Cultura. Declaração universal sobre bioética e direitos humanos [Internet]. Lisboa (PRT): Unesco; 2005 [cited 2020 Aug 18]. Available from: <http://unesdoc.unesco.org/images/0014/001461/146180por.pdf>
 12. Brasil. Ministério da Saúde. Carta dos Direitos dos Usuários da Saúde [Internet]. 3a ed. Brasília (DF); 2011 [cited 2020 Aug 19]. Available from: http://bvsmms.saude.gov.br/bvs/publicacoes/cartas_direitos_usuarios_saude_3ed.pdf
 13. Brasil. Conselho Nacional de Saúde. Resolução n. 466/2012, de 12 de dezembro de 2012. Dispõe sobre as diretrizes e normas da pesquisa envolvendo seres humanos [Internet]. Brasília (DF); 2012 [cited 2014 Jun 10]. Available from: <https://conselho.saude.gov.br/resolucoes/2012/Reso466.pdf>
 14. Oliveira MHB, Vianna MB, Telles N, Machado FRS, Ferreira AP, Telles FSP, et al. Direitos humanos e saúde: 70 anos após a Declaração Universal dos Direitos Humanos. *RECIIS (Online)*. 2018;12(4):370-4. DOI: 10.29397/reciis.v12i4.1667
 15. Organização das Nações Unidas. O que são direitos humanos? [Internet]. Brasília (DF); 2020 [cited 2020 Aug 19]. Available from: <https://nacoesunidas.org/direitoshumanos/>
 16. Ventura CAA, Moraes VCO, Jorge MS. Human rights of people with mental disorders: health professionals' and clients' views. *Rev enferm UERJ*. 2017;25:1-6. DOI: 10.12957/reeurj.2017.4344 Portuguese
 17. Conselho Federal de Enfermagem. Código de Ética dos Profissionais de Enfermagem [Internet]. Brasília (DF): 2017 [cited 2020 Aug 18]. Available from: <http://biblioteca.cofen.gov.br/wp-content/uploads/2019/11/C%C3%B3digo-de-%C3%89tica-dos-profissionais-de-Enfermagem.pdf>
 18. Brasil. Conselho Nacional de Saúde. Resolução n. 553, de 9 de agosto de 2017. Aprova a atualização da Carta dos Direitos e Deveres da Pessoa Usuária da Saúde que dispõe sobre as diretrizes dos Direitos e Deveres da Pessoa Usuária da Saúde anexa a esta Resolução [Internet]. Diário Oficial da União. Brasília (DF); 2018 [cited 2020 Aug 18]. Available from: <http://conselho.saude.gov.br/resolucoes/2017/Reso553.pdf>
 19. Figueiredo AM. Bioethics: criticism of principlism, Brazilian Constitution and principle of human dignity. *Rev bioét*. 2018;2(4):494-505. DOI: 10.1590/1983-80422018264267
 20. American Nurses Association. Center for Ethics and Human Rights. The Nurse's Role in Ethics and Human Rights: Protecting and Promoting Individual Worth, Dignity, and Human Rights in Practice Settings [Internet]. Georgia (EUA); 2016 [cited 2020 Aug 19]. Available from: <https://www.nursingworld.org/~4af078/globalassets/docs/ana/ethics/ethics-and-human-rights-protecting-and-promoting-final-formatted-20161130.pdf>
 21. Carvalhal GF, Poli MH, Clementel FK, Gauer GC, Marques GH, Silveira IG, et al. Recommendations for the protection of patient privacy. *Rev bioét*. 2017;25(1):39-43. DOI: 10.1590/1983-80422017251164 Portuguese

22. Costa RRO, Medeiros SM, Martins JCA, Coutinho VRD. Simulação no ensino de enfermagem: reflexões e justificativas a luz da bioética e dos direitos humanos. *Acta bioeth.* 2018;24(1):31-8. DOI: 10.4067/S1726-569X2018000100031

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