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Guest Editorial

Let us be unequivocal about social justice in nursing

A search for the phrase social justice on the website of the Nursing and Midwifery Council (NMC) will produce 406 results, however none of these results refer to the phrase. I did this search to collect information about references in the NMC documents that portrays the organisation’s interest and position on social justice issues in nursing. A start with search for references to social justice in the NMC documents is justified by its statutory responsibilities and legal purposes to the public. One way that the NMC demonstrates this responsibility is by setting standards that schools or universities of nursing should adhere to in framing their curriculum. The failure of the NMC to make a clear reference to social justice challenges its stance on promoting public or social responsibilities of nurses. This contrast the significance that has been attached to social justice by other reputable national and international nursing organisations, such as, the Canadian Nurses Association, American Nurses Association and International Council of Nurses. The recognition of social justice as nursing responsibility by these organisations are evident in the forms of explicit references in documents and creation of specific documents on the topic. The failure of the NMC to make specific reference to and adopt definitive pronouncement on social justice contributes to the elusiveness of the topic in nursing scholarship in the United Kingdom.

I have research interest in social justice in nursing and now exploring the possibilities of this topic for my doctoral studies and would welcome further dialogue with the nursing community. My research interests cover issues relating to nursing responsibilities, visibility in nursing documents and integration into nursing curriculum. These issues have implications for nursing education, practice and research, and for the health and wellbeing of individuals and populations.

It is plausible to state that the nursing profession is rooted in social justice responsibilities, as exemplified by the pioneering activities of Mary Seacole, Florence Nightingale, Lillian Wald, among others. The caring and many times the advocacy roles of these pioneers continues to resonate in present day nursing practices, and extend beyond intersections of social class, ethnicity, race, gender, or similar backgrounds.

Social justice in health and nursing care can be understood in several contexts based on seminal definitions and theories. The term refers to equitable distribution and redistribution of resources for positive health outcomes, recognition and removal of social and political barriers that impinge on health and promoting parity of participation in decision-making for the allocation and utilisation of health resources. These are situations that relate to practices, policies and systems that create and perpetuate poverty, unemployment, homelessness, discrimination, lack of education, among other social malaise. The social consequences of these conditions can lead to poor health and negative health outcomes for individuals and communities.

In practising social justice, as an example, for a person living with diabetes or other diseases for that matter, the nurse is mandated to not only provide hands-on or bedside nursing care, but also initiate and advocate for health policies and social systems that eradicate the causes of diabetes or other diseases. In the current global COVID-19 pandemic, several instances have brought to the fore the disparities in health care and health outcomes for people in care homes versus those in National Health Service (NHS) hospitals, and Black and Ethnic Minority health care providers versus their European White counterparts. For these and similar reasons, it is incumbent on the NMC to make clear statements in their documents and even create charter dedicated to social justice issues in the nursing profession. Such courageous, timely and necessary action by an organisation with international standing will not only influence schools of nursing in the UK to develop curriculums that distinctly integrate the topic, but also make clarion call for similar national organisations to follow suit. A step in this direction will help student nurses and our future nurses to become aware of the critical conditions that are the causes of poor health which can be due to unfair, unjust and unequal social and political policies, systems and practices.

This argument can extend to the position that with the persisting health disparities in the UK and across the globe, it is imperative that nurses should not only become aware of, but also engage in actions that transforms social injustices that affects people’s health. There is emphasis in the nursing curriculum for students to understand and reflect on ethical issues that they encounter in their practice. As a stand-alone, awareness or reflection on unjust social health situations do not bring about necessary progressive transformation. In other words, awareness or reflection that is devoid of appropriate action is devoid of progressive change. Therefore, critical nursing learning activities should make space for theories or knowledge to be translated into practices that promote sustainable changes for improvement in health outcomes. This form of learner experience can be understood as praxis, that is, the use of theory to engage in practices that promote positive transformation. The learning opportunities for nursing students to become aware of and engage in actions for social justice or against social injustice, are neither explicit in the NMC standards nor in nursing curriculums. This situation hinders the ability of student nurses to consciously recognise and participate in activities for correcting structural inequalities and inequities that manifest as poor health and negative health outcomes.

The key viewpoints in this piece are associated with the curriculum, social justice and praxis in nursing. Firstly, I agree with the view that social justice should be the responsibility of nursing because issues of social justice affects the health and wellbeing of people. Secondly, it is my view that the current nursing curriculum is silent and ambiguous on practices and educational activities that promote social justice in the profession. Thirdly, I believe that our experiences of COVID-19 heighten the necessity for nurses and nursing institutions to make unequivocal statements about the place and relevance of social justice in our profession. Finally, I suggest that clear provision is made in nursing documents and curriculums to guide
engagement in praxis that promote social justice in practice, education and research. In response to these viewpoints, I am now exploring the possibilities of these topics for a doctoral study and would welcome further dialogue with the nursing community. The dialogue can focus on but not limited to viewpoints on: What is the position of the NMC on social justice? How visible are issues of social justice in the NMC standards? How to integrate issues of social justice in the nursing curriculum? What learning activities promote awareness of and actions for social justice in nursing? Dialogue on these and similar questions will elucidate critical factors that enable student nurses and nursing professionals to increase their awareness of and engagement in actions for social justice.

Appendix A. Supplementary data

Supplementary data to this article can be found online at https://doi.org/10.1016/j.nepr.2020.102849.

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