

Pandemic and Politicisation in Argentina

Nursing Professional Trajectories in the Conurbano Bonaerense Region

María Pozzio and Daniela Testa

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Abstract

The article analyses the politicisation of nursing personnel during the COVID-19 pandemic in Argentina, focusing on the trajectories of nurses trained in the public universities of the so-called 'conurbano bonaerense', especially in the young universities of the 'Bicentenario', rooted in a territory with strong traditions of popular political participation. The pandemic context accelerated the struggles for professional recognition among nurses. Analysing this process constitutes a significant contribution to the social studies of health and illness in Latin America, particularly regarding the role of gender. The pandemic has highlighted the necessity of making the history and demands of the nursing profession visible. Against this background, this article emphasises the challenging working conditions and lack of recognition faced by the nursing profession in Argentina, both materially and symbolically. Based on the analysis of narratives provided by nurses in the context of the COVID-19 pandemic, the article analyses three politicisation trajectories of nursing graduates of Universidad Nacional Arturo Jauretche, on the conurbano bonaerense, the metropolitan area of Buenos Aires. We demonstrate the importance of the institutional context of the universities in this territory and underline its significance for the politicisation process we have observed.

Keywords

Nursing, Argentina, Politicisation, Pandemic, Professional trajectories.

Introduction

The coronavirus pandemic has highlighted the vital importance of nursing staff in most countries worldwide. The situation is similar in Argentina, where nurses have long faced challenging working conditions. Nursing has historically been a female-dominated profession and has not been highly valued either socially or institutionally. Nurses often have to deal with job insecurity, and in many places their work is not recognised as a professional occupation.¹ This article explores the growing politicisation of demands related to the conditions that began to gain greater visibility during the pandemic. From conducting in-depth interviews, we have examined the career trajectories of three different nurses. Before analysing this material, we consider it important to present some background information on the social study of health-disease and its professionals from a Latin American perspective that may not be familiar to English-speaking readers.

¹ Particularly in the City of Buenos Aires, where they were classified as administrative workers and not professional staff, until being upgraded to a professional pay scale in November 2022.

Background

The findings presented in this article are part of a broader research project in the social studies of health and illness.² This field of study has grown in Latin America with contributions from anthropology and social history. In terms of theoretical contributions, the anthropological conceptualisation that criticises the hegemonic medical model, the critical analyses of classical epidemiology, and the conceptual approach adopted by social medicine and collective health movement have been crucial in shaping the field of social sciences related to the study of health (Spinelli 2010; Menéndez 2018; Bertolotto, Fuks, and Rovere 2012).

At the same time, from the viewpoint of historiography, and especially in Argentina, over the last decade there has grown a field of study that focuses on the genesis of professional knowledge based on the state, health policies, and the relationship between health-disease processes and the region's unequal integration into the global market (Biernat, Cerdá and Ramacciotti 2015). More recently, a transversal perspective on gender has enabled the connection of historical and present-day ethnographic studies.³ This article is situated at this crossroads.

The gender issue in nursing sheds crucial light on the historical processes of professionalisation, and how different forms of labour organisation have been permeated by pre-existing conditions and representations that reproduce gender stereotypes and inequalities (Lobato 2007). In Argentina, the early feminisation of this sector was linked to women's entry into the labour force and the opportunities available in the healthcare sector. As these tasks were considered natural to the female condition and an extension of household duties, low salaries and precarious working conditions were deemed acceptable (Ramacciotti 2020). On the other hand, the influence of the Rockefeller Foundation during the 1920s in the shaping of the healthcare system and in the training of human resources in Latin America, as well as the adoption of Florence Nightingale's model of nursing, facilitated the increased participation of women in this field and the gradual displacement of men towards other occupational profiles (Wainerman and Geldstein 1992). The demand for women in nursing was never egalitarian in the healthcare sector. This established a vertical segregation, which ensured hierarchical positions for male doctors, and a horizontal segregation, which

² PISAC-COVID-19 call for papers, sponsored by the National Agency for the Promotion of Science and Technology; the project was titled 'Nursing and the Professional Healthcare during the COVID-19 Pandemic and Post-Pandemic (Argentina, 20th and 21st centuries)'.

³ Nursing feminisation was not a process specific to Argentina, but was present all over South America. In 1912, the feminisation—established through a municipal decree—of one of the pioneering schools in Buenos Aires (Escuela de Enfermeros, Enfermeras y Masajistas, created in 1890 by Cecilia Grierson, the first female medical graduate in Argentina) became a significant driving force for this process across the country (Martin 2014).

assigned certain care tasks to women, who were also subordinated to medical practitioners (Nari 2004; Ramacciotti and Valobra 2014; Biernat, Cerdá, and Ramacciotti 2015; Lois 2021).

During the first decades of the 20th century, the gradual development of the Argentine health system led to the creation of several training centres. These were unevenly and heterogeneously distributed across the country, and offered courses of dissimilar durations, professional profiles, and degrees. Although the problem of organising and finding common criteria among nursing schools became part of the health agenda from the 1940s onwards, and despite efforts to achieving centralisation, traces of this initial training bias persist today.

Regarding the correlation between gender and class, it is worth mentioning that the number of nursing students in universities has increased since 2010, due to a higher education policy prioritising new universities in historically neglected territories. These new universities, known as *Universidades del Bicentenario* (Bicentennial Universities), established in 2010 to commemorate the bicentennial celebrations of the Independence of the Argentine Republic, were required to address ongoing issues in the territory, including the shortage of nursing professionals. This requirement resulted in nursing courses having the highest number of enrolled students and, simultaneously, being among the most feminised. Nursing students in these universities are typically first-generation university students, and have a higher average age than other professions and university students (Secretaría de Políticas Universitarias 2021). In turn, the region that has benefited most from the creation of these universities is the *conurbano bonaerense*, which also has a rich history of popular political participation.

The Context

Conurbano bonaerense is the term used in Spanish to refer to the 24 municipalities that encircle the city of Buenos Aires, from the mouth of the Paraná Delta in the northeast to the south coast of the Río de La Plata in the Southeast. This area, also referred to as the 'Greater Buenos Aires,' is structurally neglected and the most unequal territory in the country in sociodemographic terms. It is home to over 10 million people, which accounts for 25% of the country's population, and holds considerable weight in economic and electoral terms. The debate on how to name it and what to include within its boundaries dates back to the early years of the 20th century, as its expansion became evident. In the late 1940s, after extensive debates, the state opted to define it as the municipalities surrounding the Autonomous City of Buenos Aires. Although the *conurbano bonaerense* is a specific unit within the province of Buenos Aires and at the national level, it does not constitute a single demarcation for administrative and governmental purposes.

For instance, school, electoral, police, and judicial districts are organised according to municipal dependencies, which may result in overlaps and fragmentation of resources between jurisdictions.

This complex area has been the focus of much social, political, and academic study and concern, but descriptions of the region vary. It is sometimes portrayed as an entity with a defined identity, while at other times it is depicted as a territory with negative or conflictive attributes. These representations and discourses stem from two models of thinking about popular peripheries and suburbs, both in Latin America and in Europe and the United States. One perspective links suburban sectors to popular social and cultural integration, as they are located close to the big cities and are associated with the integration and reconfiguration of the world of work (particularly in the industrial and service sectors). The other perspective views suburban sectors as a territory that combines problems of poverty, inequality, political clientelism, insecurity, and fear. This vision gained traction in the 1990s, as the industrial crisis and social disintegration deepened (Basualdo 2001; Minujin 1992). In recent decades, other analyses have emerged that consider the internal heterogeneity of this territory, and shift the focus of problems and conflicts to other aspects (Kessler 2006; Quirós 2008).

From the perspective of political history, there have been attempts to understand the specificity of the conurbano bonaerense as a political space and to identify its characteristics. There is no exact date of foundation for this space, and its history covers different moments and periods depending on the processes analysed (Kessler 2006; Di Virgilio, Guevara, and Arqueros Mejica 2006). Matías Bisso (2006) proposed a possible periodisation that distinguishes two phases between 1912 (the year in which the Saénz Peña law replaced the qualified vote with the universal, secret and compulsory suffrage)⁴ and the military coup of 1976. The first period, between 1912 and 1945, provides the context of the political struggle between the radical and conservative parties until the emergence of Peronism. . From 1930 onwards, electoral fraud and the abstention of the radical party complicated this perception. The second stage marks a breaking point, with the emergence of Peronism which established this territory as its central bastion from 17 October 1945. This date holds special importance in the political history of Argentina. On that day, workers and trade unions from the conurbano bonaerense mobilised to the Plaza de Mayo, located in the heart of the City of Buenos Aires. At that time, Juan Perón held various high-ranking positions in the government, including Secretary of Labour, Minister of War, and Vice President of the Nation. He was temporarily removed from his position and detained on Martín García Island, but was released on 17 October due to popular and workers' pressure. This

⁴ Universal manhood suffrage: the right for women to vote was sanctioned by law in 1947 and became effective for the first time in 1951.

event not only marked the beginning of Peronism but also provides important insights into its nature. The different accounts and interpretations of these events can be seen as shaping a genuine origin myth and define the conurbano bonaerense as a crucial political region for comprehending subsequent popular struggles and demands (Neiburg 1995).

Political scientist Cecilia Cross (2021) examines the traces of the social struggles against the civil-military dictatorship (1976–83) through land occupations in the south of the conurbano bonaerense (specifically in the locality of Francisco Solano). These occupations represent a novel and ‘foundational’ modality of community struggle organisation that was later replicated elsewhere (Jelin, cited in Cross 2021) and reflected a ‘process of pauperization and territorial inscription of the popular classes’ (Svampa 2006, 403). Illegal land occupations, together with local struggles and a range of strategies deployed by human rights organisations, were part of the resistance during the period of the last military dictatorship in Argentina. This resistance occurred during a period of increasing poverty that was further exacerbated during the following decade.

Thus, during the first three years of Carlos Menem’s presidency (1989–99), significant changes occurred due to the implementation of trade liberalisation, administrative decentralisation, and state adjustment policies. From 1993 onwards, there were several demonstrations and barricades known as *puebladas* (popular demonstrations), mainly related to the privatisation of Yacimientos Petrolíferos Fiscales (YPF), which mobilised entire communities for several days. These protests were then called *piquetes*, and their demonstrators were referred to as *piqueteros*.⁵ Neoliberalism accelerated the situation of economic and social fragility, accompanied by an exponential increase in unemployment. From 1995 onwards, a broad and heterogeneous movement of unemployed people emerged and became a central actor in the political and social scene. According to Maristella Svampa (2006, 402), ‘the policies of the 1990s produced a strong de-collectivising dynamic that extended the boundaries of precariousness and affected all salaried workers.’ Since 2000, this type of manifestation had as its privileged setting the conurbano of Buenos Aires, which redefined the political dimension and the potential for social struggle of this territory. For all of the above, the combination of the reformist political traditions typical of the universities in Argentina, with the popular political traditions of this territory, the conurbano, was also fundamental for creating a ‘breeding ground’ for the politicisation of the demands of nursing.

⁵ ‘Picketing’ is a form of protest in which people (called ‘picketers’) congregate outside a place of work, location or road where an event is taking place, in an attempt to dissuade others from crossing the ‘picket line’, but this can also be done to draw public attention to a cause.

This article will analyse this politicisation through the ethnographic study of professional trajectories of selected nurses.

Concepts and methodology

Manual and professional careers are determined by the path a person follows from the moment they start to make decisions about what they want to do for a living. For the purposes of this article, this professional trajectory begins when they enter university to study Nursing. Careers are described in terms of trajectories because this concept allows for the incorporation of two complementary meanings: that of a 'bodily itinerary' (Esteban 2004), on the one hand, and that of a professional career, on the other. In accordance with Becker's (2009) proposal, this article will be focused on the significance of interactions between individuals' professional trajectories and the multiple institutions through which they move. Thus, for these authors, a career is a set of actions that affect and shape the identity of the subject (in our case, occupational and professional). This approach enables us to concentrate on the institutions that have been pivotal in shaping the dynamics and logic of the professional trajectories analysed: first and foremost, the university. The concept of 'bodily itinerary' (Esteban 2004), in turn, highlights the embodied aspect of this path: the way in which experiences, knowledge, learning, and sociability are materialised in the subjects. This entails trajectories and interactions with different actors and institutions, making practices visible in these itineraries.

The study of professional trajectories and itineraries is framed within the increasingly important place that the social sciences and gender studies have given to biographical space. Narratives and stories play a central role in the study of professional trajectories, the way in which the subject narrates and, through narration, configures and makes sense of their own experience and identity. Starting from a configurative and performative notion of language, the interview situation is viewed as a relationship where both parties produce narratives through interaction. These stories are the product of this interaction and configure a becoming, a setting in time of the professional trajectory that constitutes it as such, in front of those who ask about it (Guber 2001; Arfuch 2018).

Narratives and stories, which develop in interactions, can be virtual. This analysis includes virtual interaction spaces, such as WhatsApp and Instagram, as they contribute to the exchange between researchers and those being researched. It is interesting to consider the role of the digital space in ethnographic work. As Estalella (2018) suggests, this allows for methodological recursion, where the 'others' become peers to learn from, and the traditional notion of 'fieldwork' becomes blurred. At the same time, the use of images in virtual spaces is seen as part of the self-presentation in the biographical space. These will not be analysed

in semiotic terms as isolated signs that speak for themselves, but as part of a narrative strategy. Following Silvia Rivera Cusicanqui's proposal on the sociology of images, this narrative allows for an understanding of the experience—in our case, that of nurses' struggle—'through a visual form [. . .], the sequence acts as a storyboard that incorporates atmospheric dimensions and visual metonymy, moving them according to rhythm and breath' (Cusicanqui 2015, 24). However, as Cusicanqui makes clear, this is not restricted to the narrative talent of a single person; otherwise, it could be thought of as a collective fact, a 'way of seeing' in John Berger's sense (1998). For Berger, the photography in industrial capitalism altered our way of perceiving and remembering: certain images and photographs are the materialisation of social 'ways of seeing'. The professional trajectories that make up our analysis come from our experiences as teachers of the Universidad Nacional Arturo Jauretche (UNAJ) nursing career and as researchers of the project 'Nursing and the Professional Healthcare during the COVID-19 Pandemic and Post-Pandemic (Argentina, 20th and 21st Centuries)'.

Results

Professional trajectory 1

María Laura is a 41-year-old married woman, with a teenage son, who lives in Florencio Varela.⁶ She pursued her 'dream of studying' when her son grew up and the university opened in her town. She began her studies at the age of 35 and obtained an intermediate degree as a university nurse. Immediately afterwards she started working in a private clinic located in a high-income neighbourhood in the city of Buenos Aires, 40 km away from where she lives. With the support of her family, she continued her studies and graduated from the UNAJ as a nurse during the pandemic. Her undergraduate dissertation focused on the eating habits of nursing staff during their working hours, particularly at night. The data for her dissertation was gathered from her own work experience as a nurse. Her critical view of her colleagues' eating habits was one of the first elements that enabled her thinking about the impact of university training and sociability on her work experience. This process intensified with the outbreak of the pandemic. María Laura says that being a nurse during the pandemic led her to experiment and revisit what she had learned during her studies. Her training enabled her to objectively evaluate the measures proposed by the institution where she worked, and also to demand the necessary supplies and materials in the face of new risks, fears, and personal care. On several occasions, especially after the 'first wave of

⁶ District of the metropolitan area of Buenos Aires, located in the south-eastern region, with almost half a million inhabitants.

COVID’, the nurses at the clinic had to hold protests in order to get all the supplies they needed (not just ‘gowns and gloves’). Following the initial shock, requests for supplies returned to the usual institutional processes and delivery schedules. ‘It was a struggle,’ says María Laura, describing the challenge of meeting the demand for the appropriate caps, boots, and protective masks to carry out their tasks—Fig. 1 shows a similar protest by a nurses’ union in Buenos Aires city.

During the initial stages of the pandemic, it was quite dynamic; then, when the fear started to calm down a little bit, everything became more complicated, and you had to talk to the supervisor, the supervisor had to talk to the head of supervisors and to the doctors, to see if everyone was in agreement. It was a continuous tug-of-war. It was not easy.



Figure 1: May 2021. International Nurses Day and protests in the City of Buenos Aires.

Credit: Joel De Luca.

The idea of ‘having to fight’ for things, the reference to working conditions as ‘a struggle’, and the realisation that she had the capacity not only to technically evaluate the safety measures implemented by the employers, but also to organise the workers’ claims, are dimensions of the ‘politicisation process’ as considered in this article. According to our analysis, these ideas that have emerged during the pandemic can be linked to her experience at university. The term ‘politicisation process’ refers to the phenomenon whereby certain actors and social spaces increase their interventions in the public space by articulating their actions, making their demands visible, and framing them within the repertoires and narratives available within the political culture. Thus, in certain situations and contexts, subjects, institutions, and groups become politicised, assuming in the public

sphere an identity and a repertoire that is read as political by all the actors that make up the network of relationships involved in the process. This perspective, based on the ideas of political anthropology (Rosato and Balbi 2003), must be complemented by a gender and feminist approach, which allows broadening the notion of politics and the political, just as women's history has done. This means that the analysis should not only find, illuminate, and rescue certain actions of women and other identities, but also new meanings and interpretations of what is political and the way in which politics and identities feed back into each other (D'Antonio, Grammatico, and Valobra 2020).

Returning to María Laura and her 'struggle', is it possible to think about her work experience in the pandemic and her demands within this broader framework? To answer this question, other professional trajectories need to be examined so as to broaden the view and place María Laura's 'struggle' and her experience in an institutional and regional context.

Professional trajectory 2

Mariano was born, studied, lives, and works in the south-eastern part of the conurbano bonaerense. When he was a child, he liked to play 'pharmacy' and hand out medicines to his dolls and imaginary patients. When the time came to choose his secondary school studies, he enrolled without hesitation in a high school with a focus on health. Then, when having to choose a higher education option, he didn't have much to think about: he was going to be the first in his family to go to university to become a nurse. So he graduated as a university nurse from the National University of Quilmes (UNQ) in 2006.

Mariano's vivid story weaves together the fragments of a professional trajectory that has not always been easy. He specialised in intensive care and worked in private clinics, where long routines and physical fatigue dominated the working world. He considers these experiences to be very different from those of the public hospital where he started as a trainee in intensive care in 2008. Later, in 2014, already with a degree in Nursing, he worked in the area of gastroenterology. He currently works there and feels that the hospital is 'his second home'. Aged 37, he works as a nurse and he has also organised groups and work projects linked to the institutions and the community. 'A group called *Enredados* was set up in the hospital, and I was the founder.' *Enredados* is a group of volunteers made up of professionals from different disciplines. They carried out various recreational and solidarity activities at the hospital, and even travelled to the *Impenetrable*, the subtropical rainforest in the province of Chaco, in the north-east of Argentina. They gathered and donated toys, vaccines, food, and water. They took blood samples to prevent Chagas disease and shared knowledge with the population. When Mariano returned, he felt that something in him had been transformed: 'It was the

trip of a lifetime', he remembers. 'Everything I learned there was wonderful. You realise that everything you have here is worth gold.' During that trip, Mariano gained new insights into the nursing profession but, at the same time, he became aware of other aspects of his sensitivity that were previously unknown to him. With the French physician and psychoanalyst Cristophe Déjours (2015, 14) this experience could be taken as one where one 'discovers the world [. . .] and in reality it is life that is awakening [. . .], it is subjective life that grows.' The pleasure of life and the enthusiasm present in his story can be understood as much more than achievements, adversities, and gathered experiences. According to Déjours' approach, to work is—firstly—to fail and—secondly—to suffer, but he also affirms that to work is to become oneself. For this author, it is the battle in the face of the difficulties presented by the task that gives rise to creativity, to the search for solutions, and to the struggle that emerges in that space where the intelligence of the craft is recreated so that work becomes living work.

After his experience with *Enredados*, Mariano continued working at the hospital, which has an institutional policy of supporting the training and improvement of its staff. This allowed him to pursue a second career, also related to the healthcare sector: psychology. His sensitivity and interdisciplinary training were central to the fact that, during the pandemic, he was called to a task that marked another milestone in his career: the hospital where he works was the first of its kind to have an institutional action protocol for the prevention and intervention in situations of violence or discrimination based on gender or sexual orientation, and he was selected to be part of the committee that implemented it. This protocol, promoted by hospital workers and authorities, was inspired by UNAJ, the university where Mariano had begun to teach and where he was studying for a postgraduate diploma. In his own words, he was 'lucky' to be called to be part of it: 'A radical change was necessary, because of the hospital's ongoing issues with violence and discrimination, including gender-based violence.'



Figure 2: Mariano at the front door of the hospital during Pride Day activities in June 2021. He posted this image on his Instagram account with the caption 'Love defeats hate', a phrase commonly associated with Peronism and attributed to Eva Perón, which has also been widely used by Cristina Fernández de Kirchner.

He speaks 'with his hand on his heart': about the pain caused by so many complaints, the prejudices he identifies as obstacles to overcome, particularly the 'blindness' to acts of violence. 'We have suffered a lot and many types of violence and discrimination, but there is still a lack of a gender perspective within the hospital for all workers.' The naturalisation of violent acts and the identification of the subordinate positions assigned to nurses constitute, for him, a knot of interprofessional conflicts. The same conflicts arise from violence within the nursing team: peer recognition is weakened, vertical recognition is scarce and 'always comes late'. On the other hand, 'individualism, lack of cooperation, and loneliness prevail'. However, the team works 'because it is in the nurse's blood that the duty of care must continue'.

Although his story is unique and peculiar, it makes comprehensible the experiences of many other students from less privileged backgrounds who enrolled in public universities established in recent decades. His voice echoes

those of others who have strived to overcome their humble origins, pursue their dreams, and fulfil their callings.

His story is revealing of himself, his experience as a nurse, and the institutions; of what is part of the job and what cannot be changed. Through his bodily itinerary, it becomes possible to explain suffering, violence, and loneliness; it also becomes possible to explain his desire to transform: 'We have to humanise ourselves.' In the hospital he 'grew light years', and says, 'it is worth putting your body at the service of the desire to change things', breaking the boundaries of the traditional image usually associated with nursing work. He says that working in the Protocol Committee is not easy, that some bosses keep him at a distance, and that he has even lost friends. He described a question typical of the reactions he received from his colleagues and peers, and his response:

'Che,⁷ but you're not going to be a nurse anymore, right?'

'Yes, I *am* a nurse—this is a day-to-day job, it's just another tool to help you, me, everyone . . .'

He also recounts aggressive comments such as: 'you are with the *feminazis*'; 'that's a *curro*'.⁸ To end his story, Mariano poses a question: 'Do you know what is necessary? That someone comes when you are working, puts a hand on your shoulder, and says: "Are you all right? How is your day going?"' With this simple formulation, he sums up the gestures, thoughts, and emotions that condense his knowledge of his profession and express, too, a possible way of being a nurse.

Professional trajectory 3

Gladys has a cheerful look, despite being in her 'early fifties'. She has children and grandchildren. In August 2022 she defended her thesis for her degree in Nursing, entitled 'Nursing Role and Care of Trans Children'. In this thesis she carried out a bibliographical study to demonstrate the lack of development of the subject by

⁷ Che: Interjection of unclear origin. Argentinism used to address other people. It is mainly used as a vocative to call someone's attention (similar to 'hey').

⁸ A colloquial term that means an activity comparable to theft, from which economic advantage is taken dishonestly but not necessarily illegally.

Spanish-speaking nurses. This lack of literature encouraged her to continue her education and dream of an academic and research career. All of



Figure 3 (left): May 2021. International Nurses Day and protests in the City of Buenos Aires. Credit: Joel De Luca.

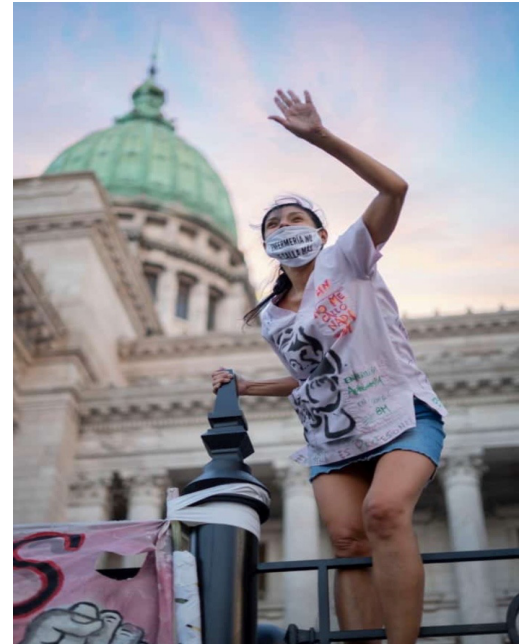


Figure 4 (right): Gladys at the protest. Credit: Julieta Bugacoff.

Gladys' academic interests began to develop when she entered the world of nursing at the age of 44. Before that, she had worked in commerce and raised her children. In her narrative, there are two events that led to her entering 'this noble profession': one, she accompanied a friend undergoing cancer treatment and saw nursing staff care work 'up close'; and, two, in the town where she had attended high school, Florencio Varela, a public university (UNAJ) opened, which offered the Nursing degree free of charge. She enrolled, began her studies, and graduated after three years with an intermediate degree in university nursing. She began working in the profession, first as a freelancer and soon after as an employee of the government of the Autonomous City of Buenos Aires for one of the public hospitals in the southern area of the Federal Capital.

In the Autonomous City of Buenos Aires, the government (until November 2022) classified the nursing staff into the administrative payscale and not the professional one, which had an impact on the economic and symbolic recognition of the healthcare work of thousands of nurses. Because of this situation, many of them began to fight for their recognition as 'professionals', and this struggle became stronger and more visible during the pandemic.

Gladys took part in the protests with other colleagues from the hospital where she works, in a group called *Autoconvocados*. A photo of her circulated in the media:⁹ hand raised, wearing a mask with the words *Enfermería no se calla más* (Nursing is no longer silent), and a colourful healthcare uniform *ambo*.¹⁰ In the photo (Fig. 4) Gladys is climbing the fence that surrounds the National Congress, a powerful image with multiple meanings. Before paying deeper attention to this image, it's worth returning to her professional trajectory.

Gladys has the same profile as many of the first cohorts of nursing students at public universities, especially those of the Bicentennial: a woman living in the suburbs of Buenos Aires, who started studying 'when being older'—after raising her children. Like many of her peers, she was also the first in her family to go to university. She entered the job market very quickly, as nursing is one of the most sought-after service professions in Argentina and the world. She describes her time at university as a 'training in commitment': the personal effort to reconcile university life with family life, work and travelling by public transport. Gladys describes her and her colleagues' efforts to stay awake in class after working all night; the dazzling lectures and readings on mental health, community health, anthropology, gender; a different, more 'authoritative' way of looking at some work issues and being able to discuss, with 'knowledge of the facts', both technical procedures and more general issues, such as how to treat patients and colleagues.

The photo was posted by Gladys on her WhatsApp status and then on her profile. Ethnography can make meaningful the practice of social actors, their silences, their uses of different languages, and the situations where they use them, and above all their corporealities (Guber 2001). If the concept of 'itinerary' is useful for focusing on professional trajectories and corporealities, here it reveals a double way of *poner el cuerpo* (putting your heart and soul into) performances: being in a place and facing the consequences of the struggle—being exposed to the emotional stress and physical wear, as well as the violence; at the same time, reproducing these images as a way of repeating the action itself. Meanwhile, as can be seen in the photograph, common ideas of femininity and nursing are put up for examination. As Ludmilla Jordanova (1989) points out, women's images in Western culture—especially in the public sphere—have commonly served as personifications of myths and values such as decency and virtue. In Fig. 4, Gladys seems to personify different values. The image is that of a woman who puts her body, her heart and her soul into the struggle, into street protests, perhaps one of the most 'bodily' forms of political struggle, of visibility and risk. The image embodies that process of politicisation mentioned at the beginning of this article

⁹ On this photograph and its contradiction of the typical image of Argentine nursing, see Pozzio 2021.

¹⁰ Part of healthcare clothing, like a t-shirt.

and, at the same time, it is the culmination of this process, perhaps even its synthesis. Gladys inscribed in this moment a feeling that had accompanied her all her life: intolerance of injustice. But in her becoming a nurse and in her passage through the university, ‘one person enters and another leaves’, ‘for me—it was embracing—like a hug—it was supportive, it was a motivating force.’ She speaks of her ‘passage’ through the university, which she describes as a ‘training in commitment’ that made her an authorised person: ‘now you know things, you know what’s wrong, that technically it is not the case, or what you cannot do, you cannot violate the right of the patient, the right of a colleague.’

Her words reveal a double knowledge: technical and ethical-political, both acquired at the university. Gladys emphasises the UNAJ’s commitment to the region, the importance that this university gives to community health, to what is taught in the curricula, formally, and to what is learned informally, with others: ‘You start working and the health system is a mountain range of obstacles, budget cuts, everything that is not seen . . . but I have learned that, in addition to practising a profession, I am fighting. I was even told that I was doing things too well, that everyone else’s performance was becoming mediocre.’ Knowing how to face this ‘mountain range of obstacles’ is also part of the learning that the university has given to her and many others. This illuminates a process of politicisation that is expressed in the struggle of nurses during the pandemic, but that begins before—in the passage through the university—and that is expressed in a different way in each narrative and biographical singularity, as seen in the cases of María Laura and Mariano.

Debate: Recognition and Politicisation

‘Struggle’ and ‘recognition’ are words that appear repeatedly in the narratives of María Laura, Mariano, and Gladys, as well as in the sectoral struggle of nursing in Argentina during the pandemic. It is therefore interesting to analyse what ‘recognition’ means from the point of view of these actors, and how this concept can be related with some of the theories that have dealt with recognition and professional struggles. For nurses, as seen in these exemplary professional trajectories, ‘recognition’ entails the legal and economic aspects—within the professional hierarchy and in terms of salary (as in the case of Gladys) for the entire nursing collective; the recognition of certain qualities at work that can open up new fields of practice and professional action (as in the case of Mariano), and the intersubjective recognition of belonging to a group, of having the same needs—for example, in terms of biosafety—and of being able to address these demands jointly with other professional collectives or even with an employer (as in the case of María Laura). It is the quest for recognition that becomes visible in certain social interactions and becomes a social demand.

Axel Honneth (1992; 2007) postulates that there are three forms of recognition capable of accounting for what the author (inspired by the Marxist historian Edward Thompson) calls ‘the moral motivations of social struggles’: love, rights, and solidarity. These three forms of recognition can only be distinguished at an analytical level. ‘Love’ means that in every interaction, subjects must recognise themselves as beings in need of attention and care. This can be seen both in the group protests’ demands for ‘care for the caregivers’, and in the professional trajectories analysed in this article, where actors insist on the importance of their role, their knowledge, their security being taken into account. The second form of recognition for Honneth is the demand for ‘rights’, for legal recognition. This describes the nurses’ demands to be recognised as ‘essential’ workers (Cammarota and Testa 2021), to have the same professional hierarchy as doctors, to be protected by a protocol against gender violence. The last of Honneth’s forms of recognition, ‘solidarity’, is perhaps the most relevant in relation to the professional trajectories presented here, since it is not only a matter of affective and/or legal recognition, but also of social bonds, of appreciation towards certain groups of people—in this case, university nurses from the suburbs—for their contributions to community life and, in our case, for their social response to the pandemic. Honneth argues that when any of these three forms of recognition fails, there is a perception of contempt or ‘moral’ offense that individuals need to rectify. And this rectification emerges from the intersubjective space, from interactions, from institutions: both in Honneth’s analysis and in the professional trajectories analysed, the level of recognition comes from the ‘struggle’, which, Honneth argues, is possible when certain cultural and organisational conditions, certain discourses and political articulations are present which, based on the ‘previous offense,’ spark or motivate the struggle. As noted above, the ‘previous offense’ is a fact in the history of nursing in Argentina. In the case of the professional trajectories studied in this article, it is the university experience, the political repertoires of their territories, professional socialisation, and the conjunctural context of the pandemic that led to this struggle. If, as the anthropology of politics suggests, it is necessary to understand in what sense actors mark their actions as ‘political’, in the professional trajectories studied in this article expressions such as ‘struggle’, ‘commitment’, and ‘changing things’ appear, which can be understood as the ways in which the political emerges. Thus, the demands for recognition—with the multiple levels identified by Honneth’s analysis—take on a political form, and struggle and recognition become politicised.

Final thoughts

As previously mentioned, politicisation refers to a process of articulating certain areas and demands in a particular context with repertoires and collective actions that endow them with political meaning. The analysis has shown that the process occurs within a specific institutional framework, which summons this politicisation, and was influenced by the unique context of the pandemic. The institutional framework is that of nursing careers at Bicentennial Universities, located in a historically marginalised but highly politicised territory, such as the conurbano bonaerense. The university population is predominantly (approximately 65%) female and includes a majority of first-generation students (Pozzio, Mingo, Almirón, Cerezo, and Beker 2023). The emergence and consolidation of a feminist and diversity movement has had a strong impact on universities, particularly in health-related fields, during the debate for the legalisation of abortion between 2018 and 2020 (Gago 2019). In summary, the recognition and politicisation result from the confluence of the multiple processes described in this article.

The analysis of this process can be a significant contribution to the social studies of health and illness processes in Latin America, especially those with a gender perspective; this article has highlighted the need to make visible the history and demands of the nursing profession. We have also pointed out the adverse working conditions and lack of recognition faced by the nursing profession, both materially and symbolically, along the years. These issues are present within the healthcare field, both within the nursing profession and in an interprofessional context, as well as in the broader public arena. This article refers to this process as 'politicisation'.

So, based on the professional trajectories of nurses who graduated from these universities, this article shed light on this process, arguing that it should be framed within their university experience (especially at the Bicentennial Universities), in a particular region (the conurbano bonaerense), and in a singular political moment. The context of the pandemic acted as a catalyst for the struggles for professional recognition among nurses. Thus, this framework has enabled these struggles to embody politicised professional trajectories. This is a key element in understanding the narratives of nurses in this important region of the Argentine Republic.

Authorship statement

María Pozzio and Daniela Testa are the sole authors of this article.

Ethics statement

The authors, María Pozzio and Daniela Testa, complied with the precautions of informed consent in the case of those who were interviewed in this article. All the research had the approval of an ethics committee according to the requirements of the financing entity.

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About the authors

María Pozzio is a sociologist and doctor in anthropological sciences. Her research interests are principally health professions and gender; and pharmacies, medicines and data production from an ethnographic perspective.

Daniela Testa is an occupational therapist and doctor of social science. Her research interests are in the areas of health, illness and care process.

Both authors are lecturers at the Instituto de Ciencias de la Salud-Universidad Nacional Arturo Jauretche, Florencio Varela, Argentina.

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