PLAYFULNESS AND HUMANIZATION OF HEALTH CARE – EXPERIENCES OF THE RESCUE PROJECT

LUDICIDADE E HUMANIZAÇÃO DA ASSISTÊNCIA EM SAÚDE – EXPERIÊNCIAS DO PROJETO RESGATAR

EL LÚDICO Y LA HUMANIZACIÓN DEL CUIDADO DE LA SALUD – EXPERIENCIAS DEL PROYECTO RESCATAR

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Objetivo: apresenta-se um relato sobre emprego da ludicidade para a promoção da humanização do cuidado em saúde em atividades desenvolvidas no Projeto de Extensão Resgatar. Método: trata-se de um relato de experiências vivenciadas entre os meses de agosto (2019) e janeiro (2020) em hospitais públicos de Maceió, Alagoas. Resultados: o Projeto Resgatar promove atividades lúdicas mediadas por acadêmicos de cursos superiores e tecnológicos de maneira interdisciplinar, multiprofissional e humanista em alas hospitalares pediátricas. Esse projeto, que realiza suas atividades há dez anos, contou, no período relatado, com a colaboração de 39 extensionistas e cinco intervenções, abordando temas de relevância social na perspectiva da educação em saúde, atingindo um público aproximado de 175 pacientes e seus acompanhantes nas alas pediátricas do Hospital Geral e Hospital Universitário. Conclusão: a participação nas atividades do Resgatar possibilita uma ressignificação do cuidado em saúde e o desenvolvimento de habilidades que propiciarão o uso da ludicidade na atuação profissional. Pode-se aferir que as ações desenvolvidas se mostraram como uma estratégia efetiva para o alcance da humanização do cuidado na prática em saúde.


ABSTRACT

Objective: a report on the use of playfulness to promote the humanization of health care in activities developed in the Rescue Extension Project is presented. Method: this is an account of experiences from August (2019) to January (2020) in public hospitals in Maceió, Alagoas. Results: the Rescue Project promotes playful activities mediated by higher education and technology academics in an interdisciplinary, multi-professional and humanist manner in pediatric hospitals. This project, which has been carrying out its activities for ten years, has had the collaboration of 39 extensionists and five interventions in the reported period, addressing topics of social relevance from the perspective of health education, reaching an audience of approximately 175 patients and their companions in the pediatric wards of the General Hospital and University Hospital. Conclusion: the participation in the activities of Rescue enables a resignification of health care and the development of skills that will propitiate the use of playfulness in the professional performance. It can be seen that the actions developed have proved to be an effective strategy for the achievement of humanization of care in health practice.

Keywords: Humanization in Health. University Extension. Health Promotion.

RESUMEN


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Rescatar promueve actividades recreativas mediadas por académicos de cursos superiores y tecnológicos de manera interdisciplinaria, multiprofesional y humanística en las salas de los hospitales pediátricos. Este proyecto lleva diez años cumpliendo sus actividades, dijo en el período reportado, con la colaboración de 39 extensionistas y cinco intervenciones, abordando temas de relevancia social, desde la perspectiva de la educación en salud, llegando a una audiencia de aproximadamente 175 pacientes y sus acompañantes en las salas de pediatría del Hospital General y Hospital Universitario. **Conclusión:** la participación en las actividades del Rescatar permite un nuevo significado del cuidado de la salud y el desarrollo de habilidades que permitirán el uso de la alegría en la práctica profesional. Se puede verificar que las acciones desarrolladas resultaron ser una estrategia efectiva para lograr la humanización del cuidado en la práctica de la salud.  

**Palabras-clave:** Humanización en Salud. Extensión Universitaria. Promoción de la Salud.

**INTRODUCTION**

Currently, several actions to humanize hospital care have been embraced in various parts of the world. They will come to collaborate to improve relationships between health professionals and patients at health institutions, going much further than just humanizing care. Authors highlight that:

"[...] these strategies seek to rescue values such as solidarity, collaboration, affectivity in relationships, respect for diversity, valuing complaints and care for others, in contrast to the current logic that privileges profit, forms of exclusion, the market and competitiveness, among other "dehumanizing" values [...]".  

In order to implement processes of work that privilege humanization in care, changes are needed in the various areas of care, including the hospital environment, which over time has always been characterized as a space for the production of care focused on the biological aspects of the sick, diminishing other aspects of the individual, such as psychological and emotional issues, which contributes to a detachment from the subject and, consequently, a practice that does not dialogue with humanization.  

In order to implement work processes centered on the subject and changes in the ways of managing and caring, as recommended by the Unified Health System (UHS), the Ministry of Health published the National Humanization Policy (NHP) in 2003 throughout Brazil. The NHP, which is also known as HumanizaSUS, refers to and conceptualizes humanization as:

"[...] a set of strategies to achieve the qualification of health care and management in UHS, thus determining how to build/activate ethical-political attitudes in line with a project of co-responsibility and qualification of inter-professional links and between these and users in health production. In this sense, it is attributed that humanization conceives exchange of knowledge, dialogue between professionals and ways of working in teams, valuing their autonomy and protagonism [...]".  

A humanized practice in health implies incorporating the expanded concept of health, considering the whole human being in its multiplicity, not focusing on the pathology.

Hospitalization, for the child, is a stressful and traumatic experience that comes from the changes in his daily life. These circumstances bring more evident disorders in childhood that can be lasting even after discharge from hospital. Thus, humanization strategies in the pediatric sectors should be prioritized by the health services, from the setting to the preparation of the team of workers.

In this sense, with the purpose of reducing the repercussions arising from hospitalization, play is instituted in the pediatric hospital environment, carrying with it numerous benefits, such as reduced stress, ease in the socialization process, expression of feelings and, above all, effective holistic treatment. Playfulness has become a tool to achieve humanization of health care, especially with the children.

In the hospital context, playfulness enhances this human need to feel active. Playful activities are needs inherent to the human being, since they allow the understanding of painful experiences and facilitate interpersonal relationships. In the playful proposal, the patient can distance himself from the reality he is living, exercise his autonomy and self-recognition, relaxing tensions and stimulating free expression. In addition, it can help in the non-verbal expression of feelings.

The playfulness, in the Brazilian context, has become widespread in the hospital environment as a result of the urgency of changes in the welfare paradigm. In this context, the figure of the clown appears in the hospital, producing significant changes by the potential to re-signify structures, functions, people and objects, so that it benefits not only the patients assisted, but all those involved in this condition momentarily or definitely subverted: patients, escorts and even the service team itself.

This deconstruction of the hospital’s traditional environment and its resignification are the basis of most projects that work with the language of the clown and bring with them humor, beyond laughter, through imagination and creativity.

This work presents a report on the use of playfulness to promote the humanization of health care in activities developed in the Rescue Extension Project in actions carried out in pediatric sectors of public hospitals with the interns and/or
their relatives.

**METHOD**

This is an experience report about the practices experienced by students in an extension project linked to the Faculty of Medicine of the Federal University of Alagoas.

The activities occurred in the Pediatrics sectors of two hospitals: the General Hospital of the State of Alagoas and the University Hospital, both located in Maceió, Alagoas. The reporting period is from August/2019 to January/2020.

The study started from an expanded vision of humanization, which is adopted by the Rescue project and includes a proposal to make health, which breaks with the biomedical model, of vertical teaching, usual in hospital environments; the implementation of a routine of care through playfulness in the hospital context; the approach between service and teaching, allowing exchanges and effects of both in the construction of a contextualized training and action and, finally, the potential of resignification of the hospital environment and the process of hospitalization.

The vision adopted is to promote, together with higher education and technological scholars, experiences of an interdisciplinary, multi-professional and humanistic nature that consist in the application of playful interventions as a pedagogical resource for the practice of health education.

The project develops its activities based on the following dynamics: holding fortnightly meetings for intervention/action planning, including the production of materials and definition of pedagogical strategies and other meetings with the culmination of the activities carried out in the pediatric wards of hospitals. Several themes were worked on such as: oral health; environment; bullying; breast cancer and Children's Day and Christmas celebrations. There were also workshops on reception and theatrical techniques, in order to qualify the members of the project, and the construction of the doctor clown or character that each would adopt.

**RESULTS AND DISCUSSION**

The project, which is linked to the Public Health Center-USP/UFAL, has been operating for ten years within the humanization line of the Ministry of Health. In this sense, it seeks to develop health promotion activities and discussions about human rights and the UHS user in the Pediatrics sectors.

From August to December 2019, 39 extension workers from various public and private educational institutions collaborated with the project, who carried out interventions in the above sectors, addressing topics of social relevance from the
perspective of health education. In total, the actions carried out contemplated an audience of approximately 175 users/companions. These activities have provided a humanized relationship between students and users and/or companions of the sectors involved, awakening in academics the importance of quality and humanized assistance, consequently in line with the principles of the UHS, such as integrality, equity and universality.

It is important to understand that bringing joy through playfulness was aimed at reducing the impacts of hospitalization, anxiety and discomfort. Humanized and individual contact is not only restricted to children, but also to extensionists, companions and professional staff, helping to express feelings, enhancing the quality of recovery and presenting extensionists with another way of producing care in a dialogical and loving way. The desired aspects with regard to humanization have been successfully achieved.

Hospitalization of a child can cause serious damage to his or her development, which is aggravated depending on the length of hospitalization and the severity of the disease. The restrictions of the hospital environment regarding the physical space and the very limitations resulting from the disease cause the absence of stimuli and the reduction of the possibilities of exploitation of the environment, and may thus compromise the development of the child.\(^9\)

However, the humanization of hospital care must occur through various approaches. According to the NHP guidelines, a welcoming and comfortable environment should be promoted, with the lighting and colors of the wards, in addition to other measures carried out by professionals of the hospital itself with the help of volunteers. However, one of the best known forms of hospital humanization is the so-called "Clown Therapy" or clown therapy, in which the clown has been used in hundreds of projects in an attempt to unbind the cold and stereotyped image of doctors and nurses.\(^10\)

Still clowning has as one of its definitions:\(^1\)

"[...] it is the implementation of clown techniques derived from the circus art, for the context of the disease, in order to improve people's mood and mental state. Its focus is the subjective needs of patients, which direct the dynamics and improvisation of the interactions performed by clowns, mostly not expressed in complaints or medical records [...]".\(^1\)

It has been studied the performance of groups of clowns in the hospital environment and it is believed that the humorous smile, resulting from a meeting
with the clown, demonstrates that, in some way, the patient alleviates his suffering and difficulties, at least for a few moments. According to these authors, by laughing in hospital, the patient distances him/herself from the problems associated with his/her treatment.\textsuperscript{11}

The use of play in the process of humanization and the enrichment of the care process in the hospital environment have an impact on health care. Among the known consequences are the stimulation of communication and independence through the choice of a particular toy, and the creation of a possibility for the child to release feelings of anger and hostility caused by hospitalization, as well as invasive and painful procedures to which the child is often obliged to undergo.\textsuperscript{12}

In this sense, these experiences, like the one reported in this study, assess the reliability of the use of playfulness for the attainment of humanization.

In addition, other contributions of the interventions undertaken include the development of health promotion strategies, informing interns and/or their families about their rights, guiding them to ensure such rights, contributing to the full exercise of citizenship. In addition, there are celebrations on festive dates and recreational activities with the children hospitalized, the formation of links between patients, companions, professionals and students and a broader look at the suffering of the children hospitalized.

Participation in the project enables extensionists to develop skills that are extremely important for professional performance, providing them with a broader view of the health-disease process and a dialogical relationship with the assisted user, awakening the humanization that will reverberate in a qualified assistance. It can also significantly contribute to changes in the child's emotional state, reducing the impacts of hospitalization and enhancing the quality of recovery.

**CONCLUSION**

At the present time, health care requires transcending the biological vision with the application of standardized technical knowledge for a field of action consolidated by innovative strategies that promote listening, welcoming and building links, among other aspects, promoting humanization in health care. Thus, it is noted the importance of the Rescue Extension Project which, through health education interventions, seeks to apply playfulness to the promotion of humanization, contributing to the breakdown of the biomedical paradigm.

At the end of the period, the actions carried out covered an audience of approximately 175 users/accompaniers and 39 extension workers from various educational institutions.
The playful activities proved to be an important strategy to achieve humanization in health practice. Exploring such actions contributes to the production of care in the hospital environment, in line with the National Humanization Policy. It is possible to infer that the structural changes caused by the insertion of playfulness in the hospital environment seem more aligned with the philosophy of this practice, as well as with the expanded concept of health, challenging the current biomedical model, which does not fully address the health needs of the population.

Finally, it is important to highlight that, in addition to contributing to a more humane and sensitive student formation, pulverizing disseminators of the philosophies seized, the project invests in a perspective of expanded care, betting on playfulness as a driving force for the achievement of humanization in the pediatric context.

REFERENCES


