

THE USE OF TOYS DURING CHILD'S HOSPITALIZATION: KNOWLEDGE AND PRACTICES OF THE NURSING TEAM

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ABSTRACT

Search descriptive field with a qualitative approach that aimed to understand the perceptions of the nursing team of a pediatric inpatient unit on the use of Toy / Therapeutic Toy. The data collected through focus group technique, with the subject of 16 nurses, who underwent thematic content analysis, from which emerged two themes: The toy is perceived according to its recreational and cathartic function during the hospitalization of the child; the act of playing is normally delegated to professionals who do not belong to the nursing team. The results showed that professionals consider important and beneficial the use of toy to the development of child care, but not all input it in their daily practice, delegating this activity to professionals of other fields. It signals the importance of providing subsidies to the nursing staff for fun activities for therapeutic or recreational purposes, integrating pediatric care.

Keywords: Hospitalized child. Play and playthings. Pediatric nursing. Child care.

INTRODUCTION

Hospitalization is an impressive and generating process of fear in most people, and when it comes to children, this condition worsens especially in light of the changes it causes in the family routine⁽¹⁾. Besides the removal of the family environment, the hospitalized child is constantly undergoing hospital procedures that, although justified by the purpose, often painful, invasive and threatening⁽²⁾.

The unpleasant feelings and sensations caused by infant hospitalization usually leverage when the health team is not prepared to provide care and humane manner consistent with the child's universe. Acting with indifference in procedures worsens this context, in the same way, the interaction with the child without the use of interactional relevant to its natural universe, such as playfulness media. Such failure can be interpreted by the binomial child/family as a hostile posture professional⁽³⁾.

Therefore, it is necessary for professionals working in pediatrics engaged in making the hospital environment more human and less anxiogenic hospitalization process, highlighting the possibilities of playing in the hospital environment⁽⁴⁾, which emerges by its role in communication, assimilation of reality, the definition of roles, the fun and, above all, for his role a traumatic during hospitalization⁽⁵⁻⁷⁾.

Pointed out the applicability, the play should be implemented and maintained within the hospital^(1,8), because the presence of toy units of public or private health care for children on an inpatient basis is a legal requirement in Brazil through federal law since 2005⁽⁹⁾, because of the importance of the act of play and the use of toys.

It is of note that in accordance with the purposes, the toy may present distinct attributes, highlighting two: the legislative, which leads to pleasure without achieving a goal; therapeutic, which is led by a professional, allowing the child to dramatize (or elaborate) atypical situations for age, in order to minimize anxiety and suffering,

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allowing to identify their needs and feelings. Therapeutic play is further classified into three types: Dramatic or cathartic - favors the child download their emotional charge; Instructional - allows the child to be instructed on procedures; Trainer of physiological functions - enables the child to use its functions in accordance with its biophysical condition⁽¹⁰⁾.

Since 2004 it is provided to the professional nurse, in the exercise of his profession, the employment of toys / therapeutic games to hospitalized children and their families⁽¹¹⁾; hence the importance of knowing and using toys in hospitals, especially the therapeutic one.

During our approach to theorizing this theme and reflections about our daily practice that permeates infant hospitalization, fidgeted in the fact of not remind us of spontaneous demonstrations or specific guidance on the use of toys in hospital spaces. Thus, we became interested in knowing, nursing team, what is your perception about the use of toys and the impact of this practice during pediatric care. Our investigative questions were developed in order to ascertain whether the toy was routinely used, the staff realized the toy as a facilitator of the relationship with the child and watched children greater cooperation by the use of the toy.

In this sense, the objective of this research was to understand the perceptions of the nursing staff of a pediatric inpatient unit on the use of Toy/Therapeutic Play.

METHODOLOGY

It was a search field with a descriptive qualitative approach conducted in the city Maringa, Parana State, in Brazil, in the pediatric unit of a private hospital.

The subjects were sixteen active nursing professionals to the unit. The data collection occurred in each of the shifts (morning, afternoon and evening) through focus group technique as scheduling previously conducted with the participants. Three groups were conducted in July 2012, and one group had six participants and the other two, with five participants each.

The focus group technique consisted of a thematic discussion led by a trained moderator, natural and unstructured manner, respecting the number of respondents suggested in the literature. The main purpose of this technique was to obtain answers through listening to a group of selected people on issues of interest to this study. It is argued that through the focus groups can obtain a wealth of information about the experiences, attitudes, opinions, as well as the customs and behaviors of groups of individuals⁽¹²⁾ in a specific situation, and in short period of time allowing thus laying a foundation for future studies on the subject matter.

The topic discussed with the groups was guided by guiding question: How is the use of toys in daily pediatric nursing and what results are achieved by its use? It is worth noting that the participants also completed a questionnaire to their socioeconomic characteristics.

The discussions were recorded to ensure the fluidity of speech, and the greater reliability of the records. At the time of the transcripts of children's characters names were assigned to participants, in allusion to the playfulness which constitutes the central theme of this study. This procedure allowed us to identify distinct lines of interviewees, giving them the authorship of the stories and ideas, but without hurting the anonymity of participation.

The project was reviewed by the Ethics Committee in Research of the State University of Maringa and approved according to opinion n° 41912/2012. Were respected and observed all ethical precepts regulated by Resolution 196/96 of the National Health Council (CNS). The participation of nurses in the study was annual installments by signing the Instrument of Consent, after express statutory responsibility for hospital release.

The data were analyzed by means of, in which the material was first organized for later transcription analysis of thematic⁽¹³⁾, content. After this first step, we performed several readings from which emerged the keywords Representative to meet the study objectives, which were grouped by similarity or divergence, yielding themes further analyzed.

RESULTS AND DISCUSSION

The study involved the participation of 13 nursing technicians and 3 nurses working in the pediatric unit, totaling 16 subjects. The age of participants ranged from 23 to 50 years old, 15 women and one man. Regarding marital status, nine participants were single, and the same number reported having children. Regarding the educational level, ten reported having completed the secondary school, four had only a college degree and two had, in addition to a college degree, some graduate broader degree. The time of practice varied from two to 15 years in pediatric units, noting that all had over a year of work experience in the research institution. It is worth noting that, among these respondents, none reported having some course or specialization in pediatric nursing. The analysis of participants' speech allowed the determination of the themes that follow are presented and discussed with grounding in literature.

THE TOY IS PERCEIVED ACCORDING TO ITS RECREATIONAL AND CATHARTIC FUNCTION DURING HOSPITALIZATION OF THE CHILD.

Regarding the use of the toy, the participants reported observing its use in the context of nursing care to the child, justifying the practice by the importance of play for children's treatment and recovery. However, during the discussion of the focus group, it was possible to apprehend that there is not a broad comprehensive understanding of the use of the toy, either clarity about their purpose as a therapeutic resource.

Given the focus discussions, we believe that its use is for some normative act, related solely to pleasure the play provides, ie, restricted to recreational component of their therapeutic function. It seemed to be a still rather limited view of their use, restricted only to the possibility of allowing distraction of the child:

Hospitalized children is far from family, buddies, cannot get out, cannot walk, cannot run, then the

only distraction would be the toy (Pequena Sereia).

We offer (the toy) to the mother and say that she can use to soothe and distract the child (Morgana).

[...] It is a learning process for Distraction children (Barbie).

On the other hand, also apprehended that the use of toys in participating evokes a perception, albeit incipient, its therapeutic function that impacts the care and emotional condition of the child. Participants in the study are in line when considering the use of the toy in the hospital environment, and distract the child; help in coping with hospitalization and in overcoming the difficult times experienced this scenario, soothingly:

[...] Managed to minimize stress (Pocahontas).

[...] Is a way to calm the child [...] distracting, in fact, so it will be quieter (She-Ha).

When we use the toy to distract the child, not her attention back to what we're doing, but for the toy. Thus, we could minimize stress, which greatly helps our work (Pocahontas).

Depending on the procedure, the toy distracts the child and we can accomplish it better (Alice).

The toy helps in procedures, the recovery of the child and helps our work (Pequena Sereia).

The use of the toy assists in procedures, because the child will become more collaborative. So, its use must be included in the form of treatment of children (Mulher Gato).

Given the above, we infer that the use of toys was justified only by the participants for their recreational and cathartic functions. Remember that in addition to these, the toy performs other functions such as stimulation, which relates to motor and sensory child development and socialization, which allows the same, call the play with reality^(8,14). However, such functions were not mentioned by the participants.

It is known that infant hospitalization interferes with the routine of families and children, bringing moments of stress, pain, separation from loved ones, school, and especially toys. It becomes necessary, therefore, to provide the child with a less traumatic hospitalization possible, through the

promotion of an environment that respects their characteristics and psychological and developmental demands. In this respect, the toys are in fact facilitators of care⁽¹⁵⁾.

Playing is constituted thus one of the basic needs of the child, assisting her in her development, which is why, despite the experience of illness and hospitalization, the game needs to be inserted in the hospital environment⁽¹⁶⁾.

Recreational activities such as the use of toys during hospitalization benefit not only the child in understanding what is happening, allowing you to express your desires and fears, but also health professionals, to facilitate the communication process and the implementation of procedures and even the hospital, contemplating some guidelines on the reception and humanization of care⁽¹⁷⁾.

When the child plays, it distances from the problems and difficulties of its daily lives, while that enters into a magical fantasy world. Through the play she becomes able to reconstruct and express what they are feeling, while developing new skills related to reasoning, patience and strategizing to face your fears and adverse situations that are experiencing.

Playing allows a key learning for child development, be it individual or together with other children, since it works important concepts like socialization, the balance between losses and gains, recreation, work cooperatively, and switching times the joys and sorrows of life as part of being human. Thus, the development of methods and recreational areas should be encouraged in child care, not only for recreational purposes, but as an important therapeutic tool in the provision of care^(17,18).

The nursing staff is the one that is closest to the patient during hospitalization, which favors the formation of a trusting relationship between work and who receives care. With the child, this approach is even more relevant because care permeated by an attitude of care and attention by the professional and recreational produces joyful moments, while it increases the feeling of safety of the child/family, who spend member of staff that

have a reference to the experience of coping with illness and hospitalization. Thus, the play and toy instruments are paramount in pediatric care, and should be used as often playful and therapeutic resource for nursing^(6,8).

THE ACT OF PLAYING IS USUALLY DELEGATED TO PROFESSIONALS NOT BELONGING TO THE NURSING TEAM

Although the interviewed professionals recognize the benefits that playing / Therapeutic Toy brings to the child, they pointed out some limitations that prevent them from using this feature, either in terms of its recreational function or therapeutic care in the pediatric clientele. Among the barriers cited are: the activity overload, lack of human resources, attending to other demands and lack of time, which ultimately culminated in delegating this so important to other professional activity:

It would be very important if we had time, because our work is very busy, we do not have time to give this attention for children (Mulher Maravilha).

We had some people who were responsible for the playroom was very good (She-Ha).

We should have a qualified person to be responsible for this (therapeutic play). We, the area of nursing do not have much time (Magali).

The fact of playing with the child is considered by the participants as an activity to be preferentially exerted by other professionals, occurs despite the use of Games/ Therapeutic Toys be regulated by Resolution 295/2004 of the Federal Board of Nursing.

This condition was confirmed by another study, which demonstrated inconsistent recovery in the use of the toy by professionals, since they do not recognize this practice as allocating the nurse, despite knowing about the advantages that the use of this instrument brings to Child Notes is thus that the use of toys is a nascent practice, and their use needs to be further explained and encouraged with the nurses⁽¹⁹⁾.

Although there are difficulties in the implementation and full and proper utilization of Toy / Therapeutic Play in healthcare realities, such as those related to the scarcity of human, material or financial resources, such arguments cannot justify depriving the child of his right to play. It is necessary to provide conditions and empower the nursing staff, especially nurses, to enter the play in the healthcare practice in order to maximize its benefits⁽¹⁷⁾.

Another point worth mentioning relates to the prevailing health care model based on the curative provision, with emphasis on attendance demand and fragmented queries, devaluing the humanization and comprehensive care.

In this perspective, the play takes shape as a challenge and emerges as humanizing instrument of pediatric care, thus contributing to the deconstruction of biologicist paradigm and the strengthening of actions to a less hostile hospital environment. Thus, the existence of a space to play in the hospital reflects the concern for the well-being of children and their families, making the nice and cozy environment⁽¹⁸⁾. Moreover, the literature also shows that caregivers also benefit from jokes, distracting themselves with children^(17, 20).

For families of hospitalized children, the use of toys in the provision of care sets up flag from a host process and humane care and predictor of quality care, in that it considers not only the biological needs of the child but

also the psycho-emotional demands of its clientele.

FINAL CONSIDERATIONS

Nursing professionals consider important play in the treatment and recovery of hospitalized children, but does not incorporate into their professional practice, while recognizing its therapeutic and recreational action as well as the benefits triggered by the implementation of this instrument.

It was noticed, however, the lack of a more consistent knowledge about the toy, their applications, advantages and purposes, by the nursing staff, as well as a lack of incentive to use care in contexts in which they operate.

In this sense, we see the need for greater dissemination of this fundamental instrument for child care, as well as a greater incentive role of nursing in the proper and safe use of this resource. We must recognize the essential value of the toy in child care, fostering humane care and not just bond with the infant, but also with the whole family, with a view to facilitating coping with hospitalization for the combination.

It is expected that the results of this research can contribute and instigate nursing professionals who provide care to children, for inserting toy in their professional practice, separating its performance from the mere execution of technical activities and redeeming affection and playfulness as ingredients of humanized care.

O USO DO BRINQUEDO DURANTE A HOSPITALIZAÇÃO INFANTIL: SABERES E PRÁTICAS DA EQUIPE DE ENFERMAGEM

RESUMO

Pesquisa de campo descritiva com abordagem qualitativa que teve por objetivo compreender as percepções da equipe de enfermagem de uma unidade de internação pediátrica quanto ao uso do Brinquedo/Brinquedo Terapêutico. Os dados coletados mediante técnica de grupo focal, tendo por sujeitos 16 profissionais de enfermagem, foram submetidos à análise de conteúdo modalidade temática, da qual emergiram duas categorias temáticas: O brinquedo é percebido segundo sua função recreativa e catártica durante a hospitalização da criança; O ato de brincar é normalmente delegado a profissionais não pertencentes à equipe de enfermagem. Os resultados apontaram que os profissionais consideram o uso brinquedo importante e benéfico ao desenvolvimento do cuidado infantil, porém nem todos o inserem em sua prática cotidiana, delegando esta atividade aos profissionais de outras áreas. Sinaliza-se a importância de fornecer subsídios à equipe de enfermagem para que atividades lúdicas, com finalidades terapêuticas ou recreativas, integrem a assistência pediátrica.

Palavras-chave: Criança hospitalizada. Jogos e brinquedos. Enfermagem pediátrica. Cuidado da criança. Equipe de enfermagem.

EL USO DE JUGUETES MIENTRAS LA HOSPITALIZACIÓN DE LOS NIÑOS: CONOCIMIENTO Y PRÁCTICA DEL EQUIPO DE ENFERMERÍA

RESUMEN

Investigación de campo descriptiva con abordaje cualitativo que tuvo como objetivo comprender las percepciones del equipo de enfermería de una unidad de hospitalización pediátrica en cuanto al uso de Juguete/Juego Terapéutico. Los datos recogidos a través de la técnica de grupo focal, teniendo por sujetos 16 profesionales de enfermería, fueron sometidos al análisis de contenido modalidad temática, del cual emergieron dos categorías temáticas: El juguete es percibido según su función recreativa y catártica durante la hospitalización del niño; El acto de jugar es normalmente delegado a profesionales no pertenecientes al equipo de enfermería. Los resultados mostraron que los profesionales consideran el uso de juguetes importante y beneficioso al desarrollo del cuidado infantil, aunque ni todos lo insertan en su práctica diaria, delegando esta actividad para los profesionales de otras áreas. Se señala la importancia de proporcionar contribuciones al equipo de enfermería para que las actividades lúdicas, con fines terapéuticos o recreativos, integren la atención pediátrica.

Palabras clave: Niño hospitalizado. Juego y juguetes. Enfermería pediátrica. Cuidado al niño. Equipo de enfermería.

REFERENCES

1. Souza A, Favero L. Uso do brinquedo terapêutico no cuidado de enfermagem à criança com leucemia hospitalizada. *Cogitare enferm.* 2012; 17 (4):669-675.
2. Ribeiro CA, Angelo M. O significado da hospitalização para a criança pré-escolar: um modelo teórico. *Rev Esc Enferm USP* 2005; 39(4):391-400.
3. Souza LF, Misko MD, Silva L, Poles K, Santos MR, Bousso RS. Morte digna da criança: percepção de enfermeiros de uma unidade de oncologia. *Rev Esc Enferm USP.* 2013; 47(1):30-37.
4. Lapa DF, Souza TV. A percepção do escolar sobre a hospitalização: contribuições para o cuidado de enfermagem. *Rev Esc Enferm USP.* 2011; 45(4):811-817.
5. Ribeiro RLR, Fonseca ES, Borba RIH, Ribeiro CA. Educação, saúde e cidadania: estratégias para a garantia de direitos de crianças e adolescentes hospitalizados. *Rev educ públ.* 2013; 22(2):503-523.
6. Bento APD, Amorim HCC, Filho MBA, Oliveira CS. Brinquedo terapêutico: uma análise da produção literária dos enfermeiros. *G & S.* 2011; 2(1):208-223.
7. Junior JSS, Costa RMA. A construção do brinquedo terapêutico: subsídios para o cuidar em enfermagem pediátrica. *Cuidado é Fundamental [Online].* 2010. [citado 2012 out 14]; 2(supl): 728-731. Disponível: http://www.seer.unirio.br/index.php/cuidadofundamental/article/view/1107/pdf_269
8. Kiche MT, Almeida FA. Brinquedo terapêutico: estratégia de alívio da dor e tensão durante o curativo cirúrgico em crianças. *Acta Paul Enferm.* 2009; 22 (2):125-130.
9. Presidência da República (BR). Casa Civil. Subchefia para Assuntos Jurídicos. Lei nº 11.104, de 21 de março de 2005. Dispõe sobre a obrigatoriedade de instalação de brinquedotecas nas unidades de saúde que ofereçam atendimento pediátrico em regime de internação. [on-line]. 2005 [citado 2013 jul 23]. Disponível em: http://www.planalto.gov.br/ccivil_03/_Ato2004-2006/2005/Lei/L11104.htm
10. Cintra SMP, Silva CV, Ribeiro CA. O ensino do brinquedo/brinquedo terapêutico nos cursos de graduação em enfermagem no Estado de São Paulo. *Rev bras enferm.* 2006; 59 (4):497-501.
11. Conselho Federal de Enfermagem. Resolução Nº 295 de 24 de outubro de 2004. [on-line]. 2004. [citado 2013 abr 02] Disponível em: http://novo.portalcofen.gov.br/resolucofen-2952004_4331.html
12. Backes DE, Colomé JS, Erdmann RH, Lunardi VL. Grupo focal como técnica de coleta e análise de dados em pesquisa qualitativa. *O Mundo da Saúde.* 2011; 35 (4):438-442.
13. Bardin L. Análise de conteúdo. Lisboa: Edições 70; 2011.
14. Melo LL, Valle ERM. A brinquedoteca como possibilidade de desvelar o cotidiano da criança com câncer em tratamento ambulatorial. *Rev Esc Enferm USP.* 2010; 44 (2):517-25.
15. Almeida FA, Sabatés AL. *Enfermagem Pediátrica: a criança, o adolescente e sua família no hospital: Manole;* 2008.
16. Jansen MF, Santos RM, Favero L. Benefícios da utilização do brinquedo durante o cuidado de enfermagem prestado à criança hospitalizada. *Rev gaúcha enferm.* 2010; 31(2):247-53.
17. Garanhani ML, Valle ERM. O significado da experiência cirúrgica para a criança. *Cienc cuid saude.* 2012; 11(supl.):259-266.
18. Francischinelli AGB, Modena T, Morete MC. Conhecimento dos profissionais quanto às medidas não farmacológicas para o alívio da dor nos pacientes pediátricos. *Rev Dor.* 2009; 10(1): 19-24.
19. Giacomello KJ, Melo LL. Do faz de conta à realidade: compreendendo o brincar de crianças institucionalizadas vítimas de violência por meio do brinquedo terapêutico. *Ciênc saúde colet.* 2011; 16 (supl 1):1571-1580.
20. Francischinelli AGB, Almeida FA, Fernandes DMS. Uso rotineiro do brinquedo terapêutico na assistência a crianças hospitalizadas: percepção dos enfermeiros. *Acta Paul Enferm.* 2012; 25(1):18-23.

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