MUSIC AS A TECHNOLOGY TO PROMOTE HEALTH IN THE HOSPITAL: PERCEPTIONS OF HEALTH PROFESSIONALS

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ABSTRACT

Objective: to understand the perceptions of health professionals working in hospital care regarding the use of music as a care technology to promote health in the hospital. Methodology: descriptive, exploratory study with a qualitative approach, based on the theoretical assumptions of Health Promotion, carried out with 15 professionals from the Neurology and Medical Clinic sectors of the largest hospital in the West of Santa Catarina, Brazil. Data collection took place through a semi-structured interview, between July and August 2022. The data were analyzed by the use of content analysis. Results: For the participants, health is fundamental and involves quality of life, self-care, balance and biopsychosocial and spiritual well-being. They highlighted possibilities to promote health in the hospital, such as active listening, resoluteness, respect, dialogue, empathy, hugging, integral and humanized care, prevention, health treatment, clowning and music, which provides distraction, joy, tranquility, reflections, longing, sadness and, sometimes, stress in the work process. Final considerations: music can be considered a technology to promote health; it awakens a mix of positive feelings, such as happiness, joy, calm and lightness. However, it was evidenced that at times, it can promote longing and accentuates the level of stress that professionals already experience in the work environment.

Keywords: Health promotion. Health personnel. Music. Hospitalization.

INTRODUCTION

The workplace can be seen as a stressful place, with intense workloads and adverse conditions for professionals, which can lead to harm to the health of workers. In this scenario, health professionals stand out for finding themselves in stressful environments, due to the high responsibility of caring for others, in addition to being involved in numerous occupational risks and the disproportionate division of work shifts^(1,2).

In this context, health professionals who work in the hospital environment tend to experience work stress more intensely, either by continuous and complex contact with physically and emotionally debilitated people, or by the management of situations of death and grief that can lead to feelings of anxiety, fear, depression, anguish, physical and mental fatigue, which consequently expresses itself in the quality of life and well-being, associated with the determinants of health^(1,3). It is noteworthy that the pandemic scenario imposed by COVID-19 intensified the work stress of these professionals during this period, given the insecurity and fear of the unknown, the change and expansion of the work process, as well as the fear of personal contamination and the family itself⁽⁴⁾.

In the hospital scenario, scientific and technological evolution has a remarkable space each year, bringing with it several advances in the health area and in the care process. However, this evolution should not only focus on increasingly sophisticated techniques, but

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also on relationship technology, bonding, welcoming through communication, also called light technology, or relational technology. This technology considers the relationships between people, in which interactions and reciprocal relationships are produced, which are indispensable for the effectiveness of care. Its purpose is to carry out health promotion actions that seek integrality and welcoming, in addition to bonding and rescuing the uniqueness and autonomy of the individual that needs care⁽⁵⁾.

However, what is seen in the hospital reality is a greater focus on health recovery, suppressing health promotion actions, even if this occurs due to sociocultural and political influences⁽⁶⁾. Thus, it is necessary to recover the concept of health promotion, provided for in the Ottawa Charter, which considers the determinants of health and quality of life in order to overcome the biological model, in order to implement actions that promote wellbeing, such as the creation of favorable healthy public policies, environments, reinforcement of community action, development of personal skills and the reorientation of health services^(7,8).

In Brazil, in line with the Health Reform movement, qualification of the Unified Health System (SUS) and reflections on inequalities and determinants of health, debates arose on health promotion actions and on strategies to produce individual and collective health. Thus, the concept of expanded health was considered, which brings that health is the result of the provision of food, housing, education, income, environment, transportation, leisure, freedom, access to health services, among other conditions^(9, 10).

At this juncture, the National Health Promotion Policy (PNPS) was created in 2006, reformulated in 2014 and 2017, based on the expanded concept of health, aiming to guarantee the integrality, autonomy and uniqueness of the individual, the community and the territories in which they are inserted. In addition, it instituted happiness as a founding value of the effectiveness of health promotion⁽¹¹⁾.

Therefore, promoting health in the hospital environment is extremely important. Using health promotion strategies as care technology can mitigate the stressful work process of health professionals working in the hospital. Added to this, it also assists in the process of hospitalization of the patients, reflecting on the work of the professionals. One of the possibilities to promote health in the hospital environment is music, which provides moments of leisure, humanization and playfulness⁽¹²⁾.

Music can be used as a care technology, in addition to being an accessible, low-cost tool with therapeutic potential for the treatment of various clinical conditions and better quality of life⁽¹³⁾. Given the above, the following research question emerged: What are the perceptions of professionals working in hospital care regarding the use of music as a care technology to promote health in the hospital?

As a justification for the study, there are gaps in the literature on scientific evidence of the effects of music as a health promoter in the hospital space. Therefore, the objective was to understand the perceptions of professionals working in hospital care regarding the use of music as a care technology to promote health in the hospital.

METHODOLOGY

This is a descriptive, exploratory study with a qualitative approach, based on the theoretical assumptions of Health Promotion^(7,11). The study followed the protocol of the Consolidated Criteria for Reporting Qualitative Research (COREQ).

It is noteworthy that this study originated from the actions of an outreach program of the undergraduate course in Nursing, of a public university in southern Brazil, which has the performance of eleven students and three professors. This program aims to promote the health of hospitalized people, their families and professionals working in the hospital environment, with music as a care technology.

Musical interventions take place weekly in the hospital's rooms, corridors and waiting rooms, in the medical clinic, neurology and maternity sectors of a public hospital with the support of voices, violin, ukulele and percussion. The duration of the intervention varies according to the sector, the disposition of the teams, the number of hospitalized patients and the dynamics of the shift, on mean, about two hours. It should be noted that the intervention is carried out only with the authorization of the hospital, the professional team, the patients and their families.

The study included the participation of 15 health professionals working in the Medical Clinic and Neurology sectors of a public hospital in a city in the west of Santa Catarina, Brazil. The inclusion criteria considered were professionals who had been working in the hospital area for more than a month. Professionals who did not participate in any moment of musical intervention in the hospital environment were not included in the study.

Participants were intentionally selected by the researcher in charge, based on the purpose of the study and frequency of interventions. A total of 27 professionals were invited to participate, of which 12 refused due to work overload at the time of the invitation, since the collection occurred at the end of a 12-hour shift. On the other hand, 15 professionals agreed to participate in the research, at which point data saturation was reached.

Data collection was developed through semi-structured interviews with participants, carried out between July and August 2022, shortly after the musical intervention of the outreach program. It was supported by a script with questions that dealt with the concept of health, hospital experience, the possibilities of promoting health, the meanings of the use of music as a health promoter in the hospital environment and the sensations that the musical intervention arouses, aiming at a better understanding of the perceptions professionals in order to answer the research question.

The interviews were conducted by the researcher with experience in the qualitative approach, in person and individually shortly after the end of the intervention, in a private room, and lasted approximately twenty minutes. Data were collected with the aid of an audio recorder and recorded with the proper authorization of the participants, by reading and signing the Informed Consent Form (ICF). Data were transcribed in digital spreadsheets, whose access is restricted to the student researcher and the advisor.

For the organization and interpretation of the data, the content analysis proposed by Minayo⁽¹⁴⁾ was used, which is presented in three phases: 1) pre-analysis: reading the transcribed data, seeking to approximate the initial objective and hypotheses of the elements found in the collection; 2) exploration of the material: coding of the data, in which the writing of textual fragments was elaborated, in order to approximate the meaning of the research; 3) treatment of the results obtained: identification and interpretation of the material, with organization of the theoretical categories, seeking to achieve the objectives of the research. From then on, three categories were organized, which will be presented and discussed below.

Regarding ethical aspects, it is noteworthy that data collection began only after the study was approved by the Research Ethics Committee of a University of Southern Brazil, with opinion number 4,960,473, on September 9, 2021. To preserve the anonymity of the participants, it was decided to name them by the name of the songs that make up the musical repertoire of the outreach program, being: O Leãozinho, Sorte, Girassol, Peça felicidade, Aquarela, Tocando em frente, Trevo, Meu abrigo, Colorir papel, Anunciação, Um anjo do céu, Velha infância, Celebrar, Dia especial and Oceanos.

RESULTS

The participants were aged between 22 and 43 years, five males and ten females. As for the profession: nine were nurses; four were nursing technicians; one physical therapist and one physician. These professionals worked in the hospital between one month and 25 years, with seven working in the Neurology sector and eight in the Medical Clinic sector.

In the data analysis, three categories were organized: 1) What is health for professionals working in the hospital; 2) Possibilities to promote health in the hospital; 3) Music as a light technology to promote health in the hospital.

In the first category, which addressed the concept of health, some interviewees mentioned that health involves physical and

mental well-being, while others defined it as complete biopsychosocial well-being.

Health is a state of general well-being. When a person is able to have adequate mental and physical development. (Sorte)

In fact, everything; health is biopsychosocial well-being, beyond the physical being. So, many people come here, not with their physical health in such bad shape, but with their emotional well-being shaken, which ends up harming their physical well-being. One thing is very interconnected with the other and cannot be treated in isolation. (Aquarela)

Health is not just physical health. There are several factors that are encompassed and linked to this, physical, emotional, social health; it is not only the physical part that will prevent you from being healthy. (Oceanos)

In addition, some professionals mentioned that health involves a balance between various factors, such as physical, mental, social and spiritual.

I think it's when we are in balance in various parts of our lives, physical, spiritual, mental. (Special day)

Look, there is that who definition, which is complete, but health can be both physical, there is a lot of this view nowadays, but health covers all our possible states, spiritual, psychological, and biopsychosocial state and all this influences and has to have balance. (Anunciação)

In addition, some participants mentioned that health is fundamental, considering quality of life and self-care, evidenced by the act of taking care of food, physical exercise and mental health.

Health is key. If you are not healthy, you do nothing in life, from getting up, going to sleep, if you are not healthy, you do not get out of bed. (O leãozinho)

Quality of life. (Girassol)

It's taking care of the food, taking care of the health itself, exercising, taking care of the mentality too. (Peça felicidade)

In the second category, possibilities of promoting health in the hospital environment, the participants pointed to active listening, resoluteness, respect, dialogue, empathy and embrace as health-promoting actions.

Offering good care, listening to complaints and trying to solve, even if it's the little things. (Velha infância)

Respecting each one with his individuality, his thinking, his belief [...]. (Colorir papel)

There are several tools, the conversation, active listening [...] you are on his side, have empathy, talk, or simply give him a hug and say that everything is fine, I believe it guarantees better assistance. (Oceanos)

In addition, the provision of comprehensive and humanized care, prevention and health treatment were also mentioned in the testimonies of the professionals, as possibilities to promote health in the hospital.

Practicing quality care [...] humanization, comprehensive care [...]. (Dia especial)

Treating them {the patients} in a humanized way, understanding their needs, which are often not in a very good moment of their lives and if we do not act in the best possible way, they will not have a good improvement of their clinical condition. (Um anjo do céu).

There are several ways to promote health here in the hospital, from prevention to treatment [...]. (Anunciação)

In addition, the interviewees cited the use of clowning and music as health-promoting strategies in the hospital environment.

[...] music can promote health in the hospital, as well as the doctors of joy {clowning} [...] the person who is sick, who is lying there in bed, does not think about his illness and thus manages to have a distraction. (O Leãozinho)

[...] I increasingly believe that music is inserted within a hospital environment, it will provide health promotion for patients, I believe that patients like it a lot [...]. (Oceanos)

In the third category, music as a light technology to promote health in the hospital, professionals highlight that music arouses feelings not only for hospitalized people, but also for professionals involved in the act of caring.

[...] for me it's good, something that cheers, moves the feelings of patients and staff. (Trevo)

So, when we listen to the music, it moves the feelings a lot, something that changes you when you are listening to the music [...].(Sorte)

Each awakens something different. But I believe only good things. Who doesn't like music, right? (Meu abrigo)

In this context, they also mentioned that music in the hospital rescues memories and reminiscences, with the awakening of reflections.

- [...] nostalgia, in which I remembered a long time ago, and I get very emotional, because often the music reflects what is in that environment, in that room, in that bed, and the companion reflects what he felt, so we end up feeling with him too. (Aquarela)
- [...] brought back memories. So, we rethink life situations with music. (Sorte)

The professionals showed that music arouses positive feelings, such as comfort, calm, tranquility, happiness, lightness and joy.

Comfort, calm, tranquility, that this is something that we suffer a lot with the issue of patients' anxiety, happiness [...]. (Celebrar)

[...] brings happiness to us for sure and to the people who are there in the beds. (Anunciação)

Joy, because with it we sing, we dance, so it brings a sense of joy, of lightness. (Um anjo do céu).

However, the participants also mentioned that music can arouse feelings of sadness and longing and that on some days it can bring relief to everyone involved in the hospitalization process, but on others, it can result in more stress for professionals during the act of caring, especially on the most overloaded days of activities.

[...] it awakens some sadness, longing, so music, I think, is an awakening of feelings. (Sorte)

It depends on the day, sometimes we are a little stressed and we don't like it very much, we professionals, but we see that for the patient it is good, but when we are very stressed, the head explodes. (Tocando em frente)

DISCUSSION

The concept of expanded health is still historically recent, making it extremely important to train professionals with an integral look at the act of caring, separating them from the fragmentation of the biological model⁽¹⁵⁾. It can be seen, through the interviewees' speeches, that there was a significant advance and an inherent visibility to this concept, when they mentioned the WHO and part of the concept pointed out by it, as well as mentioning biopsychosocial well-being, spirituality and the need for a balance between the determinants of health.

Quality of life is an intrinsic factor to health, in view of the self-assessment necessary to measure the physical and psychosocial impacts on each person's life⁽¹⁶⁾. Self-care meets the individuals' relationship with their own health, with the maintenance of healthy eating and physical exercise. It can be seen that these self-perceptions are usually limited, as they are still linked to the absence of disease⁽¹⁷⁾.

From this perspective, the Ottawa Charter (1986) considers health promotion as a way of empowering individuals to act on quality of life, emphasizing that it is not only the responsibility of the health sector, but goes far beyond a healthy lifestyle⁽⁷⁾. In addition, one of the health promotion strategies described in this Charter is the creation of supportive environments. In this sense, it is essential to create a healthy environment within the hospital area, considering the adversity of the place that tends to trigger a range of negative feelings and sensations and stress⁽¹⁸⁾.

To mitigate the impact caused by the hospital environment, health professionals can use actions that promote the health of the people under their care. Among them, as mentioned by the interviewees, empathy is considered an action, which is interpreted as an ability to identify and understand emotions and thoughts, in addition to accepting and respecting different beliefs and values⁽¹⁹⁾. Active listening, also in this scenario, tends to be a deviation from the biological model, as it allows the acceptance of the individual's life and daily history, enabling comprehensive health care⁽¹¹⁾. In addition, empathy favors active listening and effective communication, because when the individual feels understood, there is an openness to dialogue, also facilitating the creation of a bond⁽¹⁹⁾.

Humanization comes as a recent conception of making health, in order to favor a broader

view of the human being, his feelings and social, economic, biological and cultural conditions. Thus, health professionals should value humanizing attributes, such as empathy, dialogue, patient-professional connection, among others, to provide quality comprehensive care ⁽¹⁹⁾.

However, there is still a predominance in the curative and individualistic model when recovery and prevention are mentioned as health promoters, mainly influenced by political issues, organization of services and dispute of interests⁽⁶⁾. Health promotion seeks to achieve equity, with actions to reduce differences and promote equal resources, in order to ensure the health potential of the individual, favoring opportunities that allow healthy choices, that contribute to health determinants and reinforce integrality⁽⁷⁾.

In this context, it is essential that the process professional training approaches interprofessionality and acts in the expanded concept of health, focusing on the importance of public policies and reinforcement of the precepts of the SUS, for integral, political and social training(15). In addition, academic training in the assumptions of health promotion is one of the specific objectives mentioned in the PNPS⁽¹¹⁾. Another specific objective is the valorization of traditional knowledge and Complementary Integrative Practices in Health (CIPH), which rescue traditional knowledge associated with the scientific aspect and can be used as health promotion tools, encompassing the concept of integral health (11, 20).

To this end, clowning is mentioned, which, in its way of playing, favors the promotion of health through a more joyful and creative bond between health professionals, companions and patients. The clowning is linked to the use of music as a therapeutic resource, since it facilitates effective communication, in addition to providing feelings of joy, leisure and distraction to the hospitalized individuals and their families⁽²¹⁾.

Another important way to promote health is music, considered a language of emotions, capable of arousing different feelings in those who listen to it, in addition to being pointed out as a care technology (22). It is noteworthy that the hospital experience can generate in health

professionals the need for psychological help for not being able to deal with the feelings aroused, such as the fact that they are daily faced with the imminent possibility of death⁽³⁾. In this context, to promote the health of these professionals, music can be a complementary activity, providing moments of joy, happiness and relaxation⁽²³⁾.

Undoubtedly, music activates memories and recollections, instigating reflections. It is considered a form of representation of the social and spiritual relations that the individual has⁽²²⁾. Also, music promotes moments of intense reflection, influencing individually, considering that each being is unique⁽²⁴⁾. Music can provide memories of relief and euphoria; however, it also leads to not so positive feelings, which can generate a state of sadness and longing⁽¹³⁾.

It is known that music promotes the health of hospitalized people, their companions and professionals. But it can also accentuate work stress, especially when there is some complication in the sector. This is because noise can become a distraction and cause psychophysiological variations in health professionals, such as stress, considering that in addition to musical intervention, the hospital environment also has noise from therapy and monitoring equipment, telephones, printers, movement of stretchers and wheelchairs, conversations in high pitch, among others⁽²⁵⁾.

It is worth remembering that music in the hospital environment is still considered an innovation, being appreciated by hospitalized people, their families and health professionals, as it interferes, in most cases, positively in the physical, emotional, mental and social spheres (25,26). In general, health professionals are receptive and satisfied to receive music in the hospital, but it can be considered, by some, as a stressful factor in the work environment. Therefore, the importance of continuing research that brings scientific evidence on the use of music to promote health in the hospital setting.

As main limitations of the study, the time for data collection is mentioned, which was precisely the moment of shift change and greater work stress, reflecting in some refusals of professionals to integrate the research.

FINAL CONSIDERATIONS

Through the study, it was possible to understand the perceptions of health professionals in relation to the use of music to promote health, since they are aware of the broad concept of health, but can sometimes limit themselves to relating it to eating habits and physical exercise, disregarding the scope of social determinants of health.

The possibilities of promoting health in the hospital setting are numerous, as pointed out in this study, such as: active listening, respect, humanized and integral care, clowning and music. However, it was evidenced that the biological model is still rooted in the practice of some health professionals, when they mentioned only recovery and prevention as health promoters.

Music is an instrument of health promotion, as it distances itself from the focus on the

disease by promoting feelings of relaxation, calm, joy, lightness and awakening memories. Therefore, music is a lightweight, accessible care technology that contributes to expanding the means of promoting health in the hospital environment.

However, music is not always permeated by totally positive feelings, as it can favor unpleasant memories and also make the work environment more stressful for professionals. In this sense, the importance of developing a critical and empathetic look at the moment of musical intervention is revealed, in order to perceive when music is not welcome. It is urgent to continue research on this theme, in order to bring greater scientific evidence of the use of music as a health promoter in the hospital environment, in addition to subsidizing greater reflections for the improvement of musical activities in the hospital.

MÚSICA COMO TECNOLOGIA PARA PROMOVER SAÚDE NO HOSPITAL: PERCEPÇÕES DOS PROFISSIONAIS DA SAÚDE

RESUMO

Objetivo: compreender as percepções de profissionais de saúde que atuam na atenção hospitalar quanto ao emprego da música como tecnologia de cuidado para promover saúde no hospital. Metodologia: estudo descritivo, exploratório, de abordagem qualitativa, fundamentado nos pressupostos teóricos da Promoção da Saúde, realizado com 15 profissionais dos setores da Neurologia e Clínica médica do maior hospital do Oeste de Santa Catarina, Brasil. A coleta de dados ocorreu por meio de uma entrevista semiestruturada, entre julho e agosto de 2022. Os dados foram analisados conforme análise de conteúdo. Resultados: para os participantes, a saúde é fundamental e envolve qualidade de vida, autocuidado, equilíbrio e bem-estar biopsicossocial e espiritual. Evidenciaram possibilidades para promover saúde no hospital, como escuta ativa, resolutividade, respeito, diálogo, empatia, abraço, cuidado integral e humanizado, prevenção, tratamento em saúde, palhaçaria e a música, que proporcionam distração, alegria, tranquilidade, reflexões, saudade, tristeza e, algumas vezes, estresse no processo laboral. Considerações finais: a música pode ser considerada uma tecnologia para promover saúde, desperta um misto de sentimentos positivos, como felicidade, alegria, calma e leveza. Entretanto, evidenciou-se que, em alguns momentos, pode promover saudade e acentuar o nível de estresse que os profissionais já vivenciam no ambiente laboral.

Palavras-chave: Promoção da saúde. Pessoal de saúde. Música. Hospitalização.

INFLUENCIA DE LAS CARACTERÍSTICAS DEL PRENATAL, PARTO Y PUERPERIO EN LA LACTANCIA MATERNA EXCLUSIVA A LOS SEIS MESES

RESUMEN

Objetivo: comprender las percepciones de los profesionales de la salud que trabajan en la atención hospitalaria en cuanto al empleo de la música como tecnología de cuidado para promover la salud en el hospital. **Metodología**: estudio descriptivo, exploratorio, de enfoque cualitativo, basado en los supuestos teóricos de la Promoción de la Salud, realizado con 15 profesionales de los sectores de Neurología y Clínica médica del mayor hospital del Oeste de Santa Catarina, Brasil. La recolección de datos se llevó a cabo por medio de entrevista semiestructurada, entre julio y agosto de 2022. Los datos fueron analizados según el análisis de contenido. **Resultados**: para los participantes, la salud es fundamental e implica calidad de vida, autocuidado, equilibrio y bienestar biopsicosocial y espiritual. Evidenciaron posibilidades para promover salud en el hospital, como escucha activa, resolución, respeto, diálogo, empatía, abrazo, cuidado integral y humanizado, prevención, tratamiento en salud, payaseadas y la música, que proporcionan distracción, alegría, tranquilidad, reflexiones,

nostalgia, tristeza y, a veces, estrés en el proceso laboral. **Consideraciones finales**: la música puede ser considerada una tecnología para promover la salud, despierta una mezcla de sentimientos positivos como felicidad, alegría, calma y ligereza. Sin embargo, se ha evidenciado que, en algunos momentos, puede promover nostalgia y acentuar el nivel de estrés que los profesionales ya experimentan en el entorno laboral.

Palabras clave: Promoción de la salud. Personal de salud. Música. Hospitalización.

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