



Humanized treatment in the intensive care unit

<https://doi.org/10.56238/homeIIsevenhealth-089>

Victor Hugo Alves de Oliveira
Silvia Lucas Fontenelle de Oliveira
Carlos Andreeres dos Santos
Victor Augusto de Castro

1 INTRODUCTION

Culturally, the intensive care unit (ICU) is still an unknown and uncertain environment, which brings to the patients' relatives the idea of severity associated with loss and uncertainties (MENEGUIN *et al*, 2019). However, it is a space of care and recovery, where according to Cordeiro *et al* (2022) the ICU can provide care in recovery, healing and comfort at the end of life. Therefore, in this bias that it is necessary to understand the experience of this patient at this time when death haunts him in which his suffering is so intense, as well as the family members and health team that, near or far, suffer the same way (CLEM & HOCH, 2021).

In virtue of the negative conception and uncertainty, it is predicted that the ICU environment and can directly interfere with the patient's clinical condition. Characterized by being an inhospitable environment, with noises, alarms, constant lighting, invasive procedures and movement of professionals becomes even more depressing and stressful to the patient (OUCHI *et al.*, 2018). In addition, all the technology and machine operation can cause the mechanization of care. Corroborates Brezolin *et al.* (2020) "can compromise the humanized care and technology tends to contribute in a minor way."

Therefore, resulting from this demand to unite quality care and technological advances, humanized treatment emerges: Humanization is an act or effect of humanizing, that is, to become human so as to be more kind or affable, where individuals will have positive changes, making better care for beneficiaries and better conditions for workers, a qualified and specialized assistance is possible to increase the chances of recovery and survival of patients who present in serious condition (GAMA, 2020).

Moura and Jung (2021) mention that humanization enables comfort in the ambience, providing the user with sensory stimuli of well-being that have a psychological and physical impact. The purpose of humanization is to make the hospital environment more human, sociable, respectful, and pleasant, considering the point of view of all users, especially the patient. Corroborating, Barbosa *et al.* (2021)



states that humanized care in the ICU is not restricted only to techniques involving how to do, as to actions that express an attitude of pre-existing care involving the patient and his family.

According to Silva Castro et al. (2019), during humanization, the role of the nursing team is to seek to meet the needs of patients and their families through the expanded clinical perspective and the co-responsibility of care. Muller et al. (2021) complements this, stating that in order to have good results, it is necessary to have a professional team that develops contact, dialogue, bonding, and appreciation of patients, since by listening to their needs, they make efficiency and integral care possible.

It is worth highlighting another point as the experience of many professionals dealing with loss leads to the mismatch of the practice of humanization. According to Souza et al. (2020), this loss of essence comes from the stress of daily work and/or physical and emotional stress. In order to remedy and prevent this loss, the continuing education process is of fundamental importance. Continuing and permanent education in health aims to transform reality from behavior modification via new knowledge, taking into account the educational processes.

Therefore, it is justified to question the efficiency of the treatment during the process of humanized care in Intensive Care Units demands in the performance of the multidisciplinary team along with the family, due to the clinical picture of the patients, which include greater vulnerability and dependence.

The contributions of this research consist in the academic and social debate, in the search for improvement, besides promoting reflections on humanized care practices, demanding a critical posture from professionals and other involved entities. Taking these as the fundamental bases of a good professional, the choice of this theme was based both on the search for professional and humanitarian improvement and on the social engagement in the search for solutions and improvements.

2 OBJECTIVE

To analyze the humanization of the nursing team in the Intensive Care Unit.

3 METHODOLOGY

This study is a qualitative literature review of the last five years, carried out in the scientific journals *Scientific Electronic Library - Scielo*, *Scopus Elsevier*, PubMed and Google Scholar, from February 2022 to September 2022, using the following keywords: "*intensive care unit*", "*humanized care*", "*reception and humanization*".

After searching using the descriptors previously reported, 4359 articles were found. As selection criteria, the following factors were adopted: articles in Portuguese and English, with



theoretical basis consistent with the objectives of the study and time frame between January 2018 to September 2022.

The selection was made following the descriptors, the Portuguese and English languages, within the aborted chronology and after reading the abstract, observing if the articles were within the objectives proposed for the accomplishment of the work.

For the tabulation of the data found in the articles, the spreadsheet editor *software* Microsoft Excel version 2010 was used.

4 DEVELOPMENT

After reading the abstracts of the articles found, which respected the descriptors, the chronology, and in Portuguese and English, a total of 26 articles were selected. The list of selected articles can be seen in Table 1 below:



Table 1 - Selected articles

Title	Authors	Document Type	Place of publication	Year of publication	Keywords	Methodology	Results
Humanized nursing in ICU care	DA SILVA <i>et al</i>	Article	Coleta Científica Journal	2022	Intensive Care Unit. Humanization. Nursing care. Humanization of assistance	Literature review of articles and books up to 20 years old	The research pointed to the need for humanized care, focusing on the awareness and sensitization of the nursing team
National Humanization Policy related to nursing care for mental patients	VIEIRA <i>et al</i>	Dissertation	Institutional Knowledge Repository - RIC-CPS	2021	Mental health. Humanization. Nursing Technician	Qualitative research through a form with 5 questions. The sample was composed of 18 participants	Two categories were obtained: those who had the perception of the importance of humanization in treatment due to experiences and those who considered that they did not have enough knowledge to give an opinion
The Impact of Humanized Care in Palliative Care Patients: A Literature Review	MINAME & LEDUC	Article	<i>Brazilian Journal of Health Review</i>	2022	Humanization in care, palliative care, hospital humanization	Literature review, in which articles from 2001 to 2020 were searched. They were selected 12 articles	It was possible to see the influence that the practice promotes in patients, companions and health professionals. The care palliative care addresses forms of help in addition to medication and therapeutic conduct, so that stimulates humanization
Humanized care: perception of the intensivist nurse	DOS SANTOS <i>et al</i>	Article	Baiana Journal of Nursing	2018	Humanization of assistance. Intensive Care Unit. Nursing Care	Qualitative, analytical study. The data collection instrument was a semi-structured interview applied to ten nurses.	The three categories that emerged from the speeches deal with aspects of humanization as a work tool, associated with the use of technology and its influence on the recovery of the critically ill patient
Implementation of the National Humanization Policy (PNH): achievements and challenges for health care	SILVA, PEREIRA & ARAÚJO	Article	<i>Gep News</i>	2018	Humanization of care. Health services. Health policy. SUS Management	Literature review, using as a research source, material already published in the period between 2011 and 2017	The National Humanization Policy (PNH) produces a welcoming and integrating health care in the participating sectors, with the adoption of care measures, in a communication between multiprofessional teams, engaged in the humanization process
Humanization in adult ICU care	DOS SANTOS <i>et al</i>	Article	Nursing Brazil	2022	Humanization of Assistance; Critical Care; Nursing	Study with qualitative/integrative approach active between 2016 e 2021.	In the data analysis we observed ways to provide humanized patient care in the Therapy Unit Adult Intensive Care and the importance of the team to support the family as part of the care provided
Nurses' knowledge and practices in the intensive care unit	PEREIRA <i>et al</i>	Article	Nursing Journal	2020	Quality of Health Care; Nursing; Nursing Care; Patient Safety; Intensive Care Unit;	This is a qualitative, descriptive, observational study, carried out with ten effective ICU nurses. A script of semi-structured interview	It is revealed that the majority is female, with an average age of 44 years and an average of 16 years of education. Two categories were generated, one referring to nurses' knowledge about the quality of nursing care and the other to nurses' practice
The importance of humanized care in the intensive care unit	TOLEDO <i>et al</i>	Monograph	Google Scholar	2019	Humanization of Assistance; Intensive Care; Critical Care; Nursing Professionals; Humanization;	This is a narrative, descriptive review. We included publications with a time frame of 2004 to 2018 and language in Portuguese.	Healthcare professionals working in the ICU understand the concept of humanization, but there is no application during care, which brings to the patient a complex situation that arouses negative feelings such as suffering and anxiety in critical condition



Actions of the nurse manager regarding humanized care in the Intensive Care Unit (ICU)	PEREIRA & SILVA	Monograph	Unilab Repository	2019	Nurse and patient - Brazil. Humanization of health services. Unified Health System (Brazil)	Integrative review searching primary studies published between January 2002 to July 2019.	It was evidenced that the nurse manager is aware of humanized care since the academic teaching-learning period, however, in practice the care is sometimes scarce due to the great demand that the Intensive Care Unit offers to professionals, enhanced by the existing technology in this sector.
Humanized care to the critically ill patient: an integrative review	FIGUEIREDO <i>et al</i>	Article	Health & Science Magazine	2018	Nursing Care; Humanization; Health Policy	Integrative literature review, descriptive, quantitative approach, documentary-based	It was identified that some nursing professionals are unaware of the National Humanization Policy. It was observed that professionals who show some degree of knowledge have difficulties in implementing this
The challenges of humanizing in the unit within the perspectives of health professionals: a review of the literature	ARAÚJO <i>et al</i>	Article	Research, Society and Development	2022	Humanization; Assistance; Intensive Care Unit; Challenges	Bibliographical study, with integrative, qualitative analysis of the literature available in virtual libraries	It was identified that professionals have many obstacles in implementing humanization. In most of the articles found the biggest challenge was work overload, the difficulty of humanization in second place
Humanization of care in Intensive Care Units: potentialities, challenges and strategies	BRILL <i>et al</i>	Article	<i>Disciplinarum Scientia Saúde</i>	2020	Humanization of care, Intensive care unit, Nursing	Narrative Literature Review, conducted using online materials.	The results allowed the identification of potentialities: the importance of humanization in the ICU; the ICU environment conducive to humanization; valuing each patient's life story; the importance of the family in the humanization process.
Systematization of nursing care and the challenges for its implementation in the intensive intensive care unit: a literature review	NUNES <i>et al</i>	Article	Uningá Journal	2019	Intensive Care. Nursing Process. Intensive Care Units	Literature review study with a qualitative approach, with survey and analysis of bibliographic documentation from the period of 2004 a 2017	100% of the articles showed facilitating and challenging points in the use of SAE, as a facilitating point, they report the use of SAE in the planning and organization of care, but as challenging points, they describe difficulties experienced by professionals and institutional barriers
The role of nurses in humanized care in intensive care units in Brazil: a review integrative literature	GOMES, SOUZA&D AND OLIVEIRA ARAUJO	Article	HU Magazine	2020	Humanization; Nursing; Intensive Care Unit	Integrative review, with online survey occurred in the month of October 2018. 12 articles were selected	The analyzed articles point out that nurses play a primordial role in humanized care, and that they must assist the patient in a holistic, integral and empathetic way, considering the family members in the care process, having communication as one of the tools
The difficulties of the nursing team facing humanized care in the intensive care unit	OF NASCIMENTO <i>et al</i>	Artgo	<i>Brazilian Journal of Development</i>	2021	Humanization, Nursing, Difficulties	Literature review, being the search for articles conducted on platforms. The articles used belonged to the year 2016 to 2020, in Portuguese language and foreign	The main difficulties encountered referred to the hostile environment of which the ICU is a reference, the lack of communication and empathy to patients and relatives besides the fact that the ICU is a totally mechanized environment, reducing human contact and bonding
A Humanization of the nursing team in adult intensive care units	SANTOS	Monograph	Dspace Unirb	2021	Humanization; Nursing; Intensive Care Unit	Bibliographic research using academic papers	It was possible to realize that the importance of humanization in the ICU becomes more and more necessary so that patients have more when performing procedures that many times can lead the patient to death



Alienated labor, destruction of nature and crisis of hegemony	DOS SANTOS NETO	Article	In X International Journey of Public Policies	2021	Mental Health; Public Policies; Subjects	Bibliographic survey related to mental health, public policies, and psychology.	It is an important treatment device, by considering the singularities and subjectivities of the illness processes and proposing alternatives therapy aimed at citizenship and autonomy
Limitations for the implementation of humanized care in intensive care units: a review narrative	VIANA	Monograph	Google Scholar	2022	Nursing; Humanization of Assistance; Nursing Care; ICU	This is a narrative review of the literature	The studies have shown that the possible difficulty of work lack of time, shortage of professionals, are limiting factors for the implementation of humanized care in an ICU
The role of nurses in humanized childbirth care: literature review	DA SILVA, DOS SANTOS & DE STEPS	Article	JRG Journal of Academic Studies	2022	Pregnancy. Humanized childbirth. Obstetric nurses	This is a literature review	Nursing comprises the use of humanization in childbirth as the ability to pay attention to the conditions and needs of others
Humanization as a strategy in the care of patients in the intensive care unit	BARROS & MARIN	Article	Google Scholar	2020	Humanization. Intensive Care Unit. Healthcare Professionals	This is an exploratory integrative review research. As a Data Collection Instrument, a literature review was performed specific	Humanization performed with recovering patients in the ICU is very critical, The presence of family members is important, because for patients who are isolated, their only form of contact is with the team of professionals in the sector.
Humanization in the Intensive Care Unit	COSTA, ESPÍRITO SANTO & SILVA	Article	<i>Clinical and biomedical research</i>	2020	Humanization. Intensive care. Nursing care	Qualitative literature review, conducted in databases and virtual bookstores	Studies point out that the complexity of care in the ICU environment still focuses on high technology, with the purpose of satisfying the biological needs of patients first. Another point made by the nursing professionals is the lack of autonomy, where nursing ends up being considered as a mere task-performer
Humanization of care in the Intensive Care Unit: an integrative literature review	DIAS <i>et al</i>	Article	<i>Research, Society and Development</i>	2022	Humanization; ICU; Care	Integrative literature review, conducted in February and March 2022	The results show that there are difficulties in the implementation of ICU care, but that despite this the professionals have a good perspective on such a policy, helping effectively in the practice of the necessary strategies
Impact of the National Humanization Policy on the Family Health Strategy and the Health Network	REIS-BORGES, NASCIMEN TO & BORGES	Article	Communication Disorders	2018	Family Health Strategy; National Humanization Policy; Primary Care	Literature Review. Ten articles pertinent to the study's theme were selected	As the NHP is a new way of thinking about health, it offers tools to assist in actions and decision making in health services
Qualified listening as a tool for humanization of mental health care in Primary Care	SANTOS	Article	APS in Review	2019	Humanization, Mental Health, Primary Care	Bibliographic research. An exploratory study was then carried out	Qualified listening enables the humanization of the practices of promotion and prevention, diagnosis, treatment, and rehabilitation in mental health, that is, it makes it possible to consider the social circumstances in this context, ethical, educational and psychic
Knowing the aspects of humanization of health care in the intensive care unit: integrative review	MONTEIRO	Monograph	In International Congress on Research, Teaching and Extension - CIPEEX	2018	Humanization. ICU Pediatric ICU. Adult ICU. Nursing	Integrative literature review, with 6 categories selected	Humanized care should be experienced with greater ethical practicality, where the patient is listened to and respected with care performed with love, tenderness, respect and characterized by a holistic, reflective and respectful look



The importance of humanized care provided by nurses in palliative care to terminally ill cancer patients	BARBOSA <i>et al</i>	Article	Brazilian Interdisciplinary Health Journal	2019	Nursing care, humanized care, palliative care and terminal oncology patients	Integrative literature review of publications that investigate the object of study. The inclusion criteria were 25 national and international journals, published in the period 2006 a 2019	The survey revealed that, according to the Worldwide Palliative Care Alliance (WPCA), 34.01% of adults require palliative care for terminal cancer worldwide. A analysis of the statistics revealed alarming projections regarding the increase of cancer deaths in Brazil
--	-------------------------	---------	--	------	--	---	--

Source: Own authorship

From the analysis of the articles, it is possible to name the subtypes that favored the understanding of the study. The grouping of these articles leads us to the following topics: "*Influence of humanized care in the treatment of patients in Intensive Care Units*" and "*Challenges from the perspective of professionals for humanization*".

Influence of humanized care in the treatment of patients in Intensive Care Units

As verified in the studies by Da Silva et al. (2022) and Vieira et al. (2021), humanization has expressive importance during the treatment of patients. In their research, these authors observed that through humanized care patients felt welcomed and understood in relation to their needs, contributing significantly to their recovery, transforming the environment into a more welcoming one. Miname and Leduc (2022) corroborates that humanized care reflected directly on the patient's emotional, providing feelings of gratitude, joy, and well-being, in addition to strengthening the doctor-patient relationship and improving the quality of life of the patient and their families. For Dos Santos (2018) besides the positive results in the treatment and recovery of the critically ill patient in his biopsychosocial aspect, humanization in the ICU environment is a complex, comprehensive, and dynamic process that involves all subjects and the environment.

Silva, Pereira, and Araújo (2018) the humanization process directly influences the choice of the place where the treatment is carried out, when it is possible in private institutions, since hospitality becomes a service capable of generating recommendations to other patients and contact networks. In general, as stated by Dos Santos et al. (2022) humanized care can contribute to the excellence of care, the appropriate use of available management, the reduction of risks for patients, and the increase in patient and family satisfaction.

On the other hand, the absence or low employability of humanization contributes negatively to the patient's clinical picture and is related to a series of factors. For Pereira et al. (2020), among these factors are: "the professional training, the number of professionals available, the labor market, the current legislation, the policies, the structure and organization of the institutions.

Toledo et al. (2019) found that health professionals working in the ICU understand what humanization is, however, they often do not apply what can generate to the patient and his family a



complex situation, awakening negative feelings such as suffering and anxiety. The same scenario was observed by Pereira and Silva (2019) where according to the authors the team is aware of the concept of humanization since the teaching-learning period, however, in practice due to the great demands of the ICU, humanization ends up becoming scarce or little applied. Moreover, in the research of Figueiredo et al. (2018) it was identified that some professionals are unaware of the National Humanization Policy - NHP, and even those who know, also had difficulties to perform, even admitting the significant contribution of humanized care before the patient's recovery.

Challenges from the perspective of professionals for humanization

Silva, Pereira, and Araújo (2018) there are major challenges to achieve humanized care, among which the author cites the difficulty of reconciling quality care with the sociocultural context of the patient, in addition to the availability of adequate and organized spaces with privacy and comfort. For Araújo et al. (2022) among the challenges that health professionals face to humanize intensive care units are: work overload, inadequate dimensioning, lack of communication, lack of resources, limitations and professional comfort, which generate a major failure in humanized care.

Brill et al. (2020) also states as challenges the work overload and the deficit in the continuing education process potentializes the execution of mechanical care, distant from the patient and his family.

Nunes et al. (2019) cites poor remuneration, lack of knowledge and time that generate in the professional discouragement and professional devaluation, in addition to exhaustion and fatigue attributed various factors, reflecting directly on the quality of care offered.

All these factors cause distancing between the patient and the team, being intensified by the use of technological apparatuses. According to Gomes, Souza de Oliveira Araújo (2020), this distancing occurs with the use focused on technology, where professionals incorporate routine activities into their daily routine in a mechanized manner and without human characteristics, such as affection and recognition.

The lack of autonomy of professionals was also one of the challenges observed by Do Nascimento et al. (2021), where, according to the authors, among the factors that lead to a major failure in the care and valorization of users are inequality, lack of autonomy, and deindividuation. Santos (2021) emphasizes autonomy as an important tool that guides patient care in its entirety and subjectivity, stimulating self-care and independence. Deindividuation, on the other hand, according to dos Santos Neto (2021), makes the subject and its singularities central, which makes it possible to seek new perspectives of treatment, being a fundamental point in mental health.

The humanization process can be summarized in three pillars: integration between humanization of assistance and holistic care, empathy and relationship between patient and family



(VIANA, 2022). Da Silva, Dos Santos, and De Passos (2022) reported that this holistic care involves a humanistic approach, which seeks to meet the diverse needs of each patient. Barros and Marin (2020) for the humanization work to be inserted within the environment, the entire team must put first the condition of each patient and their families, favoring an affectionate bond that will aid in recovery. Costa, Espírito Santo and Silva (2020) mention that respect for the autonomy of each professional in the multidisciplinary team favors the construction of a relationship of trust and commitment, reflecting on the quality of the service provided.

To assist professionals in the construction and development of this humanized environment, Public Policies for Humanization - PPH have been implemented. According to Dias et al. (2022) the main objective of these policies is to identify the health needs of each patient with ethics and empathy, so that a specific and adequate care occurs. Reis-Borges, Nascimento, and Borges (2018) verified that PPHs contribute to changes in management and characteristics of the work team through the insertion of work tools that generate ethical, political, and shared reflections among managers, employees, and patients.

Among these tools, qualified listening and communication stand out. In his research, Santos (2019) verified that qualified listening when guided by the guidelines of the National Humanization Policy - PNH - such as welcoming, management, and participatory co-management, enables appropriate welcoming and the discovery of the subjectivity of the individual. Monteiro (2018) observed that the ability to listen and respect the subjectivities of the patient is a humanizing factor that acts as a differential during hospitalization. Regarding communication, when executed accurately and clearly it is capable of establishing reliability. According to Barbosa et al. (2019) communication, whether verbal or nonverbal, in addition to enabling the interaction between those involved in the care process, generates reliability, thus being a premise during the humanization process.

5 CONCLUDING REMARKS

It was possible to conclude that the importance of humanized treatment, besides its positive contribution to the patient's clinical picture. However, this is a complex and comprehensive process that involves different agents. Among them, the challenges the professional faces when implementing the humanization process. It is possible to notice that PNH serves as a guide, where the professional and the entrepreneur could seek guidance and help regarding humanization. However, due to its complexity, the humanization process demands more gestational, subjective (of each professional), and accessibility actions.



REFERENCES

- ARAÚJO, E. G., LEITE, F. N., VIDA, I. A. S., DE SOUZA, R. R., DA SILVA, F. J. A., SILVA, R. A. N., ABRÃO, R. K. The challenges of humanizing in the unit within the perspectives of health professionals: a literature review. *Research, Society and Development*, v.11, n.4, 2022.
- BARBOSA, I. E. B., SOUZA MOTA, B., FONSECA, A. R., SIQUEIRA, D. S. G., de SOUZA MELO, F., de FIGUEIREDO LIRA, F. C., SANTOS, T. M. D. P. Factors that disseminate humanized nursing care in the intensive care unit. *Revista Eletrônica Acervo Saúde*, v. 13, n. 4, p. 2, 2021.
- BARBOSA, A. N., DO NASCIMENTO, I. A., DE CARVALHO, M. J. S., DE ANDRADE AOYAMA, E., LIMA, R. N. The importance of humanized assistance provided by nurses in palliative care to the terminally ill cancer patient. *Brazilian Interdisciplinary Health Journal*, 2019.
- BARROS, M. C. D. C., MARIN, L. F. M. A humanização como uma estratégia no atendimento de pacientes da unidade de terapia intensiva. 2020.
- BREZOLIN, C. A., DE MENDONÇA, H. S. L., LIMA, M. V. R., DE SOUZA NUNES, M. B., MENAGUALI, R. R., & DE CARVALHO, L. The importance of humanization of care in the surgical center. *Saúde em Redes*, v. 6, n. 2, p. 289-295, 2020.
- BRILL, N. G. L., RANGEL, R. F., ZAMBERLAN, C., ILHA, S. Humanization of care in Intensive Care Unit: potentialities, challenges and strategies. *Disciplinarum Scientia Saúde*, v.2, .n.2, p.113. 2020.
- CORDEIRO, F. R., ZILLMER, J. G. V., LUIZ, M. B., DA SILVA, N. K., DA CRUZ CAMPELO, Experiencias corporales en las relaciones de cuidado en unidad de cuidados intensivos: una revisión integradora. *Revista Chilena de Enfermería*, v. 4, n. 1, 2022.
- COSTA, F. B., ESPÍRITO SANTO, D. M. N. D., SILVA, A. T. D. Humanização na Unidade de Terapia Intensiva. *Clinical and biomedical research. Porto Alegre*. 2020.
- CLEM, L.; HOCH, V A. A morte dizendo olá: vivência dos pacientes internados em leitos UTI Covid-19, um olhar a partir dos profissionais de saúde. *Anuário Pesquisa e Extensão Unoesc São Miguel do Oeste*, v. 6, p. 29799, 2021.
- DA SILVA CASTRO, A., ARBOIT, É. L., ELY, G. Z., DIAS, C. A. M., ARBOIT, J., CAMMPOGARA, S. Perceptions of the nursing staff about humanization in intensive care. *Brazilian Journal in Health Promotion*, v. 32, p.2, 2019.
- DA SILVA, J. O., DE SOUZA LEITÃO, F., DA SILVA, A. O., & DE OLIVEIRA SILVA, N. N. Humanized nursing in ICU care. *Revista Coleta Científica*, v.6, n.11, 24-25. 2022.
- DA SILVA CAVALCANTE, I. C. O., & FERREIRA, L. V. F. The importance of hospitality and service quality in hospitality. *Journal of Contemporary Tourism*, v.6, n.1. 2018.
- DA SILVA, A. C., DOS SANTOS, K. A., DE PASSOS, S. G. Atuação do enfermeiro na assistência ao parto humanizado: revisão literária. *JRG Journal of Academic Studies*, v.5, n.10, p.116. 2022.
- DE MORAES AGUSTINHO, L. Humanization of oncological hospital environments. *America College. Repository of course completion papers*, 2021.



DE SOUZA, C. J., DE SOUSA, E. A., ESCUDEIRO, C. L., de SOUZA, D. F., VALENTE, G. S. C., & DE OLIVEIRA, P. V. N. Reasons for the unfeasibility of the humanization policy in the intensive care unit by nursing. *Brazilian Journal of Health Review*, v. 3, n. 4, p. 17, 2020.

DIAS, D. M., BARRETO, J. C., DA SILVA, J. H. R., DA SILVA-BARBOSA, C. E., SANTOS, W. A. B. V., MORAIS, M. G. C., DA SILVA, G. O. Humanization of care in the Intensive Care Unit: integrative literature review. *Research, Society and Development*, v.11, n.4, p.7, 2022.

DO NASCIMENTO E. A., DE LIMA L. N. F., PEREIRA, C. S., FONSECA, S. C. T., DA SILVA, D. O., NEVES, A. F., DE SOUZA VIEIRA, P. C. As dificuldades da equipe de enfermagem frente à assistência humanizada na unidade de terapia intensiva. *Brazilian Journal of Development*, v.7, n. 2, p. 17266, 2021.

DOS SANTOS, R. S., AMORIM, L. P., DOS SANTOS, L. L., MONTEIRO, L. V., DA SILVA DOURADO, G. K. Humanization in adult ICU care. *Enfermagem Brasil*, v.21, n.3, 326, 2022.

DOS SANTOS, E. L., DE ARAÚJO DÓREA, S. N., DE SOUZA, M. D. P. G., DOS SANTOS, L. K. F., DA SILVA, M. B., MORAES, M. G. L. Humanized care: perception of the intensivist nurse. *Revista Baiana de Enfermagem*, v.32, 2018.

DOS SANTOS NETO, F. V. Trabalho alienado, destruição da natureza e crise de hegemonia. In *X Jornada Internacional de Políticas Públicas*. 2021.

FIGUEIREDO, M. D. C. C. M., FERREIRA, T. N., DE ALMEIDA, F. D. C. A., RAÚJO, A. M., ARAÚJO, P. E., DE SOUZA, K. B., SOUZA, G. P. Humanized care to the critically ill patient: an integrative review. *Revista Saúde & Ciência*, v.7,n.1, 94-101. 2018.

GAMA, I. Applicability of the humanized ICU. *Mostra de Inovação e Tecnologia São Lucas*, v. 1, n. 1, 2020.

GOMES, A. P. R. S., SOUZA, V. C., DE OLIVEIRA ARAUJO, M. Atuação do enfermeiro no cuidado humanizado em unidades de terapia intensiva no Brasil: uma revisão integrativa da literatura. *HU Revista*, v.46, p.6, 2020.

MENEGUIN, S., NOBUKUNI, M. C., BRAVIN, S. H. M., BENICHEL, C. R., DE SOUZA MATOS, T. D. The meaning of comfort from the perspective of family members of ICU patients. *Nursing ,São Paulo*, v. 22, n. 252, p. 2882-2886, 2019.

MINAME, S. C., LEDUC, V. R. The impact of humanized care in palliative care patients: A literature review The impact of humanized care in palliative care patients: A literature review. *Brazilian Journal of Health Review*, v.5,n.1, p.835, 2022.

MOURA, F. C.; JUNG, N. E. The hospital building and the human senses. In *Encontro Internacional de Produção Científica*, 2021.

MORAES, C. L. K., TAVARES, D. C., DE FREITAS, G. B., AUED, G. K. Nurses' perspective on the companion in the ICU in times of COVID-19. *Global Academic Nursing Journal*, v.2, n. 2, 2021.

MULLER, R., GOMES, G. C., de OLIVEIRA NORNBERT, P. K., XAVIER, D. M., MINASI, A. S. A., & da SILVA, A. C. F. Humanization in the Pediatric Intensive Care Unit: facilities and difficulties of the nursing team. *Research, Society and Development*, v. 10, n. 16, p. 2, 2021.



NUNES, R. M., NUNES, M. R., DE ASSUNÇÃO, I. A., & DE SOUZA LAGES, L Systematization of nursing care and the challenges for its implementation in the intensive care unit: a literature review. *Uningá Journal*, v.56, n.2, p.80- 93, 2019.

MONTEIRO, M. A. D. S. Knowing the aspects of humanization of health care in the intensive care unit: integrative review. 2018.

OUCHI, J. D., LUPO, A. P. R., ALVES, B. O., ANDRADE, R. V.,FOGAÇA, M. B. The role of nurses in the intensive care unit in the face of new technologies in health. *Revista Saúde em Foco*, v. 10, p. 412-428, 2018.

PEREIRA, M. D. C. C., CASTRO, S. D. F. D., BRITO, E. D. S., CARVALHO, N. D. V., LOPES, D. V., PINHEIRO, J. D. S., LAVÔR, T. B. D. S. L. Nurses' knowledge and practices in the intensive care unit. *Revista Enfermagem. UFPE on line*, p.70-78, 2020.

PEREIRA, D. D. S. S., SILVA, G. R. F. D. Atuação do enfermeiro gestor diante do cuidado humanizado na Unidade de Terapia Intensiva-UTI. *University of International Integration*, 2019.

REIS-BORGES, G. C., NASCIMENTO, E. N., BORGES, D. M. Impact of the National Humanization Policy on the Family Health Strategy and the Health Network. *Communication Disorders*, v.30, n.1, p.200, 2018.

RIBEIRO, B. C. O., DE SOUZA, R. G., DA SILVA, R. M. The importance of continuing education and permanent education in intensive care unit-review of literature. *Journal of Scientific Initiation and Extension*, v. 2, n. 3, p. 2, 2019.

SANTOS, G. D. S. A Humanization of the nursing team in adult intensive care units. *Regional University Center of Brazil*, 2021.

SANTOS, A. B. Escuta qualificada como ferramenta de humanização do cuidado em saúde mental na Atenção Básica. *APS in Review*, v. 1, n. 2, p. 170-179, 2019.

SILVA, I. N., PEREIRA, V. A., & ARAÚJO, L. C. N. Implantation of the National Humanization Policy (PNH): achievements and challenges for health care. *Gep News*, v.1, n.1, p.6. 2018.

TERNUS, B. F.; WOLLMANN, I. Implementation of the humanization policy in Intensive Care Units: an integrative review. *Revista da SBPH*, v. 24, n. 2, p. 76-88, 2021.

TOLEDO, C. A. A., DA SILVA, F. T., TELES, R. C.,VIEIRA, W. D. M. The importance of humanized care in the intensive care unit. *Health Institute Post-graduate nursing intensive care unit*, 2019.

VIANA, R. A. Limitações para implantação de uma assistência humanizada em unidade de terapia intensiva: Revisão narrativa. *Pontifícia Universidade Católica de Goiás*, 2022.

VIEIRA, C., MEDEIROS, E., BARNABE, P. H., ALCANTARA, N.,GRANEIRO, V. Política nacional de Humanização relacionada a assistência da enfermagem ao paciente mental. 2021.