



Humanization in the radiology sector of hospitals that care for children

Humanização no setor de radiologia dos hospitais que atendem crianças

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ABSTRACT

Introduction. Humanization has been one of the issues that has generated a lot of discussion within national guidelines and policies in health courses. He points out that humanization has this direction, as it focuses on patient care, taking into account both the emotional aspects of this patient and the administrative and hospital management aspects, seeking behavioral changes in relation to professional health practices. Objective: To carry out a review of the narrative literature on the humanization of health services in Radiology for children. Methods: This is an integrative literature review study, using the following databases: Lilacs, Scientific Electronic Library Online (SciELO) and PubMed/MEDLINE. Results: 10 articles were selected whose results indicate that humanization in hospital environments should take into account some aspects, such as: physical space, quality care, hospital management itself and, when referring to the humanized care offered to children, observes that he must be patient and respect the child's moment, but stressing the importance of carrying out the service, explaining the procedures step by step, observing in the child, not only a user, but an individual who is restless, afraid and, in this sense, if the care provided is not carried out under the aegis of humanization, it can cause trauma even after the treatments. Conclusion: In this sense, it concludes that humanized care in the pediatric radiological sector is essential, both for the well-being of the child and to reassure the family and companions, therefore, because the humanization process will respect the rights of both health professionals and many users.

Keywords: Humanization, Child, Radiology.

1 INTRODUCTION

The concerns regarding humanization in healthcare became a series of objections and over time developed a series of resources that aim to offer either directly or indirectly improvements in hospital care. Hospitals in the public sector, notably in the last decades,



started to direct thoughts concerning "humanizing" actions, which aimed at creating leisure activities, recreational activities and even changes that were possible in the physical buildings of hospitals (RIOS, 2009).

In this sense, the Ministry of Health implemented in 2000, the National Policy for Humanization of Hospital Care (PNHAS), which aimed at proposing a set of actions that were added to the standardized changes of care, efficiency and quality, whether in care or in services offered to users of public hospitals in the country. After the implementation of PNHAS, in 2003, the National Humanization Policy (PNH) was created, which sought to implement the principles of the Unified Health System (SUS), directing the practices and actions of hospital management aimed at humanization in all spheres (OLIVEIRA, 2010).

When one thinks about humanization nowadays, one has the idea of amenities in the problems, and appreciation of patients, giving them a service that takes into account the dignity of the human person, since humanizing in this perspective is to see the other ethically and with a human prism. (BRASIL, 2004). Humanization within this field, aims to enhance the emotional aspects and also the management, seeking notably behavioral ruptures in management and professional practice of health professionals (CORRÊA; CASATE, 2011).

Going beyond this line of reasoning, it is necessary to emphasize that humanized care starts with the professionals when they provide care from the perspective of reciprocity, when they provide services seeing the patient as their peers, creating bonds of a warm and dignified care. Humanized care provides patients with a positive view of their medical processes and procedures (PESSINI; BERTACHINI, 2004).

Communication is important throughout the care, whether in relation to the protocols of examinations and/or treatments, since in these hospital spaces there is a patient who creates expectations waiting for results, a diagnosis or continuity to a treatment. When there is the implementation of a humanized care, it minimally seeks to meet the first demands of patients, professionals and hospital management (DIAS; COSTA; MARTINEZ, 2020).

When the discussion turns to humanization in radiological care with children, it is observed that the close contact of the professional is of utmost importance for examinations and treatments to be performed, since they often use large equipment and it is also necessary that children stay in environments isolated from their guardians for some time. (BRASIL, 2004).



When the care is directed to children, there is a need for more time and also a more personalized care, where professionals can individually offer their ways of acting and intervening, seeking a humanized care.

Stresses that one of the challenges in the radiological sector regarding the performance of examinations in children, is the requirement of responsibilities, when associating physical and biological factors on the effects of ionizing radiation, when requesting to reduce exposure to levels as low as reasonably achievable, enforcing the principle of optimization (BACCHIM NETO, et al., 2014)

What can be used when caring for children are games and playful activities, since they help both them and their families to feel more comfortable in the hospital environment. The introduction of toys can be done by means of entertainers, giving the treatment and/or exams a softening of the hospitalization (MOTTA; ENUMO, 2004).

It notes that the hospital routine in most hospitals are dull and routine, but when you seek a humanized care is necessary to change this routine perspective, especially when it comes to care for children, where this humanized care is based on a specialized care and not mercantiled (MOREIRA , RESCK, et al., 2009).

Thus, the objective of this paper is to conduct a narrative literature review on humanization in radiology health care services for children.

2 MATERIAL AND METHODS

This is an integrative literature review study, which is a broader review method because it allows the inclusion of theoretical and empirical literature as well as studies with different methodological approaches (quantitative and qualitative). The literature search was carried out in the Lilacs, Scientific Electronic Library Online (SciELO) and PubMed/MEDLINE databases. The keywords used were: "Humanization in the Radiology Sector"; "Humanization in Children's Hospitals"; "Radiology and Humanization for Children".

From this collection, 75 articles were obtained. Initially, an exploratory reading of the titles and abstracts was made. Subsequently, the content of the material in its entirety was analyzed in order to be chosen. Thus, 10 studies were selected for the composition of this review. The studies included in the review are analyzed in an organized way in relation to their objectives, materials and methods, allowing the reader to analyze the pre-existing knowledge on the subject investigated (POMPEO; ROSSI; GALVÃO, 2009).



To construct an integrative review it is necessary to follow six distinct steps: identification of the topic and selection of the hypothesis or research question; establishment of criteria for inclusion and exclusion of studies/sampling or literature search; definition of the information to be extracted from the selected studies/study categorization; evaluation of the included studies; interpretation of the results; and presentation of the review/synthesis of knowledge (ERCOLE; MELO; ALCOFORADO, 2014).

The methods for preparing integrative reviews include: (1) choosing and defining the topic (drafting the question); (2) searching the literature (sampling); (3) criteria for categorizing studies (data collection); (4) evaluating the studies included in the results; (5) discussing the results; (6) presenting the integrative review (MENDES; SILVEIRA; GALVÃO, 2008).

To prepare the research, a search was conducted in the Virtual Health Library (VHL) databases, through BIREME (Latin American and Caribbean Center on Health Sciences Information), in the CAPES (Coordenação de Aperfeiçoamento de Pessoal de Nível Superior) electronic databases, and Scielo (Scientific Eletronic Library Online).

The inclusion criteria were: research articles on the theme; available online in full; in English, Portuguese, and Spanish with a time frame of 2013 to 2023. Exclusion criteria were: articles repeated in the databases; articles without abstracts in the databases or incomplete. Initially, the titles and abstracts of each of the articles found will be read, and from that, it will be decided whether or not the work would be used in this study.

As for the exclusion criteria, there are: course completion papers, dissertations, theses, congress abstracts, and articles for which it was not possible to access the full text or which, after reading the title and abstract, did not present a direct correlation with the descriptors used.

The studies will be evaluated in four stages: exploratory, selective, analytical, and interpretive reading. In the exploratory reading, knowledge of the texts in their entirety will be sought. In the selective reading, an in-depth reading of the method, results, discussion, and conclusions will be carried out. In the analytical reading, the information found will be sorted in order to identify the main ideas of the articles. Finally, in the interpretative reading, relationships will be established between the content of the publications, grouping them (GIL, 2006).



For the extraction of information, a synoptic table was prepared with the following variables: author/year, title, methodology, and objective, aiming to show in a systematic way the articles found for the discussion of the work.

3 RESULTS

Author (s)/Year	Title	Methodology	Goal
FERREIRA; CASTRO /2018	HUMANIZATION IN THE RADIOLOGY SECTOR OF CHILDREN'S HOSPITALS	Documentary research on the websites of two children's hospitals (one public and one private), in order to show how these hospitals have adapted to the humanization policies proposed by the Ministry of Health, thinking exclusively about the well-being of the child patients.	To present the importance of some actions, aiming at the humanization in the radiology area in children's hospitals
SILVA; GAMA; PEREIRA <i>et al.</i> / 2018	THE IMPORTANCE OF PLAY IN THE CONTEXT OF CHILDREN'S HOSPITALIZATION	This is a bibliographic, descriptive, integrative review type study. Articles published from 2010 to 2016 were used and the BVS, MEDLINE, LILACS and BDNF databases were searched, selecting articles published in full, in Portuguese. Data were analyzed using the Categorical Thematic Content Analysis technique	Analyze the importance of play in the context of children's hospitalization.
ANTUNES; CAIRES; ESTEVES/ 2019.	Humanization in pediatric settings: the role of clowns in improving the environment experienced by hospitalized children	Literature review	Point out that the hospital environment can be fun for a hospitalized child.
BATAGLION; MARINHO, 2019.	Play in health care settings: interrelationships with humanized practices.	The research was carried out by means of a field investigation, configured as descriptive and exploratory, with a qualitative approach to the data.	Analyze the importance of play in humanization practices in health care.
DAL'BOSCO; BARANCELLI; GOBATTO <i>ET AL.</i> / 2019.	Hospital Humanization in Pediatrics: "Nurses of Joy" Project.	This is a descriptive, experience report type study of the academic practice in the extension project "Nurses of Joy".	To report on the relevance of hospital humanization in pediatrics, through the academic practice of play therapy.
SILVA, FERRAZ, FARIAS, JANUÁRIO, VIEIRA ACS, MOREIRA,et al./ 2019.	The use of play in the pediatric hospitalization setting.	This is a qualitative, descriptive, exploratory study conducted in the Pediatric Clinic of a university hospital with 18 professionals by means of	To describe the multiprofessional team's perception of the use of play and the factors that interfere with its practice in the



		semi-structured interviews and the use of the Content Analysis technique	context of caring for hospitalized children.
SOUZA; MARTINS/ 2020.	Acting in pediatric oncology and music as a health promoter: meaning for professionals.	A descriptive, exploratory, qualitative approach study.	To understand the meanings for professionals in working in pediatric oncology and in using music as a health promoter in the hospital environment.
PAES; SANTOS; SANTANA; SOUZA, DRAKO; LEITE ; MELO / 2021.	Clowning as a training strategy for the humanization practices of the health professional.	This is a qualitative, descriptive, and exploratory study.	To understand the impacts of clowning as a training strategy for concepts and practices of humanization of the health professional.
KEREK; FREITAS; CERUTTI; RIBEIRO; POWROSNEK / 2021	LITERATURE REVIEW ON METHODS OF PEDIATRIC HUMANIZATION USED IN RADIOLOGY	Literature review	Demonstrate pediatric humanization techniques used in radiology
CROSS;STEPS /2022	The importance of humanization in the radiology sector for patients and their companions	Literature review	Introducing humanization and its benefits for patients and companions

4 DISCUSSION OF RESULTS

4.1 HUMANIZATION AT RADIOLOGY

In the radiology sector, it is very common to demand high productivity, which is understood as the performance of many exams. With this, the professional often forgets that patients are human beings and that the whole discovery of a disease is something that often involves great suffering for the patient. Therefore, one should not forget the technology, but rather notice the patient and provide an increasingly humanized care (FERREIRA; CASTRO, 2018).

It understands that humanization in hospital environments follows basic criteria and standards, such as offering quality care, articulation with technological advances allied to welcoming, improvements in the infrastructure of care, and also a more detailed concern about the appropriate and necessary conditions for professionals to carry out their activities to their satisfaction, This service must first and foremost, and at all times necessary, be of quality and ethical, priming for the respect of the other, thinking that there is not only a patient/consumer of health services, but a citizen, an individual, who needs to minimally be treated with empathy. (ANTUNES, CAIRES, ESTEVES, 2019).

With humanization even in treatments, the patient feels more comfortable,



welcomed, and calm when care is provided based on the principles of medical humanization. Therefore, the goal of humanization is that all contacts, with receptionists, doctors, nurses and technicians, are empathetic, therefore, with the professional listening and giving attention to the patient and their needs (FERREIRA; CASTRO, 2018).

The analysis of the studies shows that children who are hospitalized feel helpless, and may routinely present aggressive behavior, some phobias, behavioral changes and also some previously non-existent changes with regard to sleep. Given this panorama, humanization in pediatrics is of utmost importance, therefore, because they can promote through these humanized activities, actions that will allow children to feel loved, welcomed, and especially cared for (DAL'BOSCO, BARANCELLI, GOBATTO, 2019).

It is worth mentioning that the health sector is overloaded and that sometimes it prevents professionals from seeking an improvement in their care, leaving them mechanized and without opportunities for improvement, which sometimes occurs even involuntarily, given the excess work and demands made within the hospital environment. (CRUZ; PASSOS, 2022).

The humanized treatment should take into consideration the physical space and the approach to the pediatric patient should be pleasant and relaxed, so that the patient distracts the mind from the examination environment, driving away fear and insecurity. The professional must explain in a clear and objective way all the steps for the exam, showing the place of the exam, explaining how the child must stay positioned and why he/she can't move during the exposure to radiation, which will be in a short period of time. (KEREK; FREITAS; CERUTTI; RIBEIRO; POWROSNEK, 2021)

4.2 PLAYING TO HUMANIZE CARE AT RADIOLOGY

Many times, radiological exams are a novelty in the routine of children. With this in mind, hospitals make the exam room into a place where the child is less tense about the exam or the treatment he or she will have to receive. The rooms are decorated with children's themes so that the child, while taking the exam, sees the hospital as a fun, interactive, and pleasant place, a place that will do him/her good, besides, humanization starts from communication, that is, if there is good communication there is humanization. (FERREIRA; CASTRO, 2018).

The use of play has its importance within the context of child hospitalization, since its use brings benefits not only for the child, but also for his companion and the team of professionals, thus providing a more humanized care focused not only on the technique



during assistance and the performance of procedures.(SILVA; GAMA; PEREIRA *et al*, 2018)

The ludic has a very high potential, when talking about humanization in pediatrics, happening through the professional practice that perform their activities resingificant to the health practice.(BARTOGLIN; MARINHO, 2019).

It observes that the hospital process, especially for children, marks in the cycle in a very incisive way, where it can lead to sequelae that can be perceived even after hospital discharge, but when there is the application of playfulness, such as musicalization, taking as an example, this playing in countless ways, will resignify the hospital experience, where this stay and all the process that it goes through becomes less painful.(SILVA, FERRAZ, FARIAS, JANUÁRIO, VIEIRA, MOREIRA, 2019).

Being hospitalized is not comfortable for anyone, even in the best medical centers in the country, since this period of hospitalization changes people's routine and daily life. In this sense, it is observed that when the importance of humanization in the hospital environment is devalued, this occurs because there are still some professionals who believe that the hospital environment is an inappropriate place for play, for ludic, where strategies are not developed and that directly or indirectly hinders the performance of some medical procedures. (SILVA, AZEVEDO, BARBOSA, LIMA, CANTALICE, RAMALHO, 2021)

5 CONCLUSION

Humanization aims at the respect for human life, where it will encompass several aspects, such as: social, ethical, educational, and psychological, present in social relations, where it complements the technical scientific aspects, which seek objectivity, generality, and specialization of knowledge.

The humanization in hospital environments is necessary, since in these spaces, time and again, dehumanizing situations occur, either related to working conditions or related to failures in care. It stresses that changes in hospital environments incur in benefits, such as: reduction in hospitalization time; increase in well-being; decrease in absent employees and reduction in hospital unit expenses, among others.

Faced with these situations, he stresses that humanization in the hospital environment is indispensable when thinking about pediatric care, since this care aims to provide children with a warmth and care.



When the discussion turns to pediatric radiology services, he points out that these will cover both the skills and knowledge of the public who seek these services, and who seek them thinking about a quality and humanized care, from the time and the waiting room to the doctor's office or the operating room, thinking about care for both the physical and mental health of this public and their companions.

Therefore, it is worth mentioning the importance of a professional assistance to health professionals, since they will be the main responsible for the humanization in this type of care. It emphasizes that sometimes these professionals do not receive the necessary and due attention and care, becoming engendered professionals, who do not perform the procedures and protocols of those already recommended, since they are not provided with an adequate structure for the work, the shifts are exhausting, the salaries are not attractive and other situations that directly or indirectly affect their professional work based on humanized care.



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