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RESEARCH ARTICLE

HUMANIZATION OF THE ASSISTANCE TO NEWBORNS IN NEONATAL INTENSIVE CARE UNIT

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ABSTRACT

The integrative review was the choice for the elaboration of this study, since it understands that this method allows the synthesis of completed researches and obtains conclusions from a studied phenomenon. This study aimed to identify nursing interventions described in the literature that contribute to the humanization of care to neonates in a Neonatal Intensive Care Unit (NICU). The criteria used to select the sample were: articles published in Portuguese, listed in the following databases: Latin American Literature in Health Sciences - LILACS, International Literature in Sciences of the Saide - Medline, *Scientific Electronic Library Online* - SCIELO and Google academic. The period of publication of the articles was not delimited during the search. The descriptors used were: Critical Care Nursing, Humanization of Care and Neonatology. For the sample, 6 articles were selected because they met the eligibility criteria. The results demonstrate that nursing actions related to humanization in NICU should be based on the construction of individual care, integrity and in the respect for life.

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INTRODUCTION

The child is a unique being, full of potentialities, experiencing during all his intrauterine life and at birth, a series of transformations that will be decisive in his healthy growth and development (Oliveira, 1998). The environment of the Unit of Neonatal Intensive Care (NICU) a newborn experience quite different from that of the intrauterine environment, since it is ideal for fetal growth and development because it has specific characteristics such as pleasant temperature and warm environment, softness and extrauterine sounds are filtered and diminished. Despite the importance of the NICU for sick neonates, contradictorily, this unit that should care for the child's well-being in all its aspects, it is sometimes a nervous, impersonal environment and even expresses fear for those who are not adapted to their routines.

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Such an environment is full of strong and constant lights, noise, temperature changes, interruption of the sleep cycle, since repeated procedures are necessary, often causing discomfort and pain. In order to account for the complexity of newborn attendance at a NICU, we emphasize the importance of the involvement of the nursing team in the assistance to the mother-child binomial, highlighting the need to humanize this assistance, facilitating the interaction between professional-newborn- mother team. This care provides the growth and development and recovery of the NB in a satisfactory way and contributes to minimize the harmful effects caused by hospitalization, making the parents active elements in the hospitalization process, besides contributing to a good quality of survival of the baby (Reichert, 2007). Humanizing is not a technique or artifice, it is a living process that permeates all the activity of the people who assist the patient, seeking to perform and offer the treatment that he deserves as a person, within the peculiar circumstances that are in each moment in the hospital.

hospital environment humanization represents a set of initiatives aimed at the production of health care capable of reconciling the best available technology with the promotion of reception and ethical and cultural respect for the patient (Ferreira, 2006). The hospitalization should not be a bad experience or an interruption in development. Therefore, it is necessary to use resources that can somehow reduce the effects of hospitalization for newborns. In this assistance perspective, professionals recognize the importance of institutional values related to humanization and care centered on the family as motivators of the team itself, which seeks to encourage and guarantee the presence of the mother/family in the follow-up of the newborn admitted to the NICU (Santana *et al.*, 2013). In spite of the great effort that nursing professionals may be making in order to humanize NICU care, this is a difficult task because it demands at times individual attitudes against an entire dominant technological system. 2. And often the very dynamics of the work in a NICU does not allow moments of reflection about his or her work process. Only by seeing, listening and feeling the newborn and the family as a whole will we be attending to and understanding the essence of human caring. The efforts made by the nursing team in order to humanize NICU care is not an easy task, since it requires taking individual attitudes towards an entire system. Faced with the search for a humanized care, it is necessary for the nursing team to reflect on the care that is being offered to this being. According to this theme, the present study aims to identify in the literature the nursing actions that contribute to the humanization of care in the NICU.

MATERIALS AND METHODS

The integrative review was the choice for the preparation of the present study, considering that this method makes it possible to synthesize already completed researches and to obtain conclusions from a certain theme. The study is based on a qualitative and exploratory bibliographical review. The following steps were elaborated to elaborate this revision: choice of the theme; goal setting; establishing criteria for inclusion and exclusion of articles; definition of the information to be observed in the selected articles; search of articles; and after the analysis of the results obtained to elaborate the discussion and conclusion of the same. To better judge, a research was carried out based on a bibliographical survey that provided concepts and definitions related to the Humanization of Assistance to the Neonate in Intensive Care Unit and from this, the results were composed for later conclusion. The criteria used to select the sample were: articles published in Portuguese, listed in the databases of the Latin American Literature in Health Sciences - LILACS, International Literature in Sciences of Saúde - Medline and in the Scientific Electronic Library Online - SCIELO and Google academic. The period of publication of articles was not delimited during the search. The descriptors used in the online search were: Nursing Critical Care, Humanization of Care and Neonatology.

RESULTS

The articles selected to compose the sample of this integrative review were obtained through the above mentioned databases, where they were selected according to the scientific writing and descriptors for identification of articles that were related to the topic addressed in this review. Six articles were classified.

However, the same articles analyzed bring this theme as an adjunct in their research, being part of an indirect way of the procedure, where only the results on the theme of the present study will be presented in the table below:

DISCUSSION

Over the years, the Hospital has sought to improve the care offered to women and children in the neonatal period, based on the principle of integral and humanized, family-centered care⁵. The view of the nursing professional when promoting care should be holistic, respectful and free from prejudice, reverencing the human being in all his ethical and biopsychosocial issues, only then, care can be considered as excellence (Pessalacia, 2012). Humanization "can not be thought without rethinking the issue of education as a priority in a change agenda, because what we perceive today is that education in the field of health is reduced to computerization and technological instrumentalization to the detriment of the aspects ethical and human values that these technologies imply" (Ratto, 2001) More than this, humanizing is not a technique or artifice, it is a life-process that permeates the whole activity of the people who assist the patient, seeking to accomplish and offer the treatment he deserves as a human person, within the peculiar circumstances that are in each moment in the hospital (Reichert, 2007). In addition, in this environment, humanization represents a set of initiatives aimed at the production of health care capable of reconciling the best available technology with the promotion of reception and ethical and cultural respect for the patient, work spaces conducive to good health and users (Martins, 2011; Moreira, 2001; Lamego, 2005). Nursing care must be ethical, and so it presupposes technical skills, knowledge, sensitivity and experiences (Chediak Pinho, 2006). In this context, regardless of the clinical environment where nursing professionals are performing their functions, all these skills must be put into practice. The NICU environment that is so familiar to health professionals, for parents, is perceived as frightening, which is why they have difficulty recognizing the baby as their own (Reichert, 2007). This difficulty in recognition occurs because, during pregnancy, parents dream of a healthy, perfect and beautiful imaginary baby. Then, at birth, there is a very great contrast between the imaginary child and the one they visualize.

Emphasis is given to the importance of the entire NICU team working with the same goals to reach the common good: comfort and cure of hospitalized neonates. It is up to the nurse to direct his attention to the impact that the stressful environment of the NICU can cause, organizing, planning and performing the nursing care according to the individualized need and the response of each newborn, thus providing an integral, quality and humanized care. The actions of humanization of the care described by the study subjects, directed to the baby and to the family, demonstrate their attempt to modify the way care is being developed. However, it is individual attitudes that need to be discussed by all professionals, constructing forms and implementing projects that allow for collective and comprehensive actions, not as a condescension to the family of some activities, but as respect for the rights of father and mother of each family that has their child in a NICU. Nursing should always be present, interacting daily with the RN and its relatives, helping in the reorganization of these in their adaptation to the situation experienced and the environment of the hospital, promoting

Table 1. Characterization of the publications regarding the authors, year, title, journals, methods and results of the study

AUTHORS	TITLE	JOURNAL	METHODS	RESULTS
(Reichert; Lins; Collet, 2007)	Humanization of care at neonatal intensive care unit	Revista eletrônica de enfermagem	Qualitative of the bibliographic type	The results demonstrate that nursing actions with a view to humanization in NICU should be based on the construction of individual care, integrality and respect for life.
(Martins <i>et al.</i> , 2011)	Neonatal intensive care unit: The role of nursing in the construction of a therapeutic environment	Revista de enfermagem do centro oeste mineiro	Bibliographic review	It has been shown that a serious problem of the neonatal intensive care unit is the over-stimulating environment, aggravating the state of health of the newborn. The health team is aware of factors detrimental to the patient, but presents difficulties in changing their work routine. Despite this, many researches point out NICU with protocols and proposals to reduce the stimuli harmful to the newborns and favoring their cognitive and physiological development.
(Ferreira; Remedi; Lima, 2006)	Music as a resource in hospitalized child care	Revista Brasileira de Enfermagem	Bibliographic research	The results evidenced the benefits of music for hospitalized children, their families and health care team. It was verified that this resource can be used in the hospital space as a low-cost, non-pharmacological and non-invasive intervention, promoting a development process aimed at the health of the child, the family and the workers.
(Santana; Madeira, 2013) ⁵	The accompanying mother in the neonatal intensive care unit: challenges for staff.	Revista de Enfermagem do centro oeste mineiro	Qualitative research	The results reveal the professionals' perception about the importance of parents' presence in the NICU, especially the benefits of maternal presence, for the recovery of the newborn.
(Pinho; Siqueira; Pinho, 2006) ⁶	Nurses' perceptions about integral care.	Revista eletrônica de enfermagem	Descriptive study with a qualitative approach	Integrality should not be transformed into a concept, but rather into a practice of care that deals with the value of life, respect for the other and differences between human beings.
(Moreira, 2001) ⁷	Stressors in mothers of high-risk newborns: systematization of nursing care	Masters' thesis Universidade Federal da Paraíba.	This is a convergent-assistance research of qualitative nature	The accomplishment of this research revealed the relevance of the nursing systematization for high risk mothers of mothers based on the Neuman Systems Model.

the development of the attachment of parents / family with the baby, being this vital importance for the healthy growth and development of the child (Santana, 2013). "One of the roles of nursing is therefore to reduce NICU stressors and to implement actions that result in a therapeutic environment (Martins, 2011)". There are aspects that can minimize stress in the NICU as one of the ways of humanization of care (Martins, 2011). Among them, the care with manipulation, posture, sound, light, stress and pain, in the light of the knowledge of the capacities of the newborn, can not fail to be considered by the team. This same study also includes the responsibility that nursing has of involving the family, centered on the figure of the parents, in the direct care of their babies. Methods and interventions should be implemented with the purpose of fostering their participation in the care of such children, with the assistance of procedures strictly necessary for their evolution, minimizing aggressive and stressful behaviors (Martins, 2011). The literature found that humanizing care for the family and the baby implies offering an integral and singular care to both, emphasizing their beliefs, values, individualities and personality, since each being is unique, however, involved in a family context, which has a life history, and therefore, must be respected in order to maintain the dignity of this group during hospitalization.

Conclusion

Having as objective delimited in the process of conducting this research, namely to identify in the literature nursing actions that contribute to the humanization of care in the Neonatal Intensive Care Unit, we emphasize that the analysis revealed that these actions involve aspects related to the NICU environment, to the affective bond between parents / family and child, with nursing as facilitating agent in the process of humanization. This study presents aspects that can minimize stress in the NICU as one of the forms of humanization of care.

To do so, we believe it is necessary to go beyond and extrapolate individual actions to the search for the construction of collective processes involving all those involved in the assistance. This implies ensuring a sufficient and technically capable staff to improve and extend the life of the RN, to create work environments that promote interpersonal relationships, to humanize working relationships, to promote a safe and comfortable environment for the newborn, family and team. Healthy life and self-esteem are current values, which also point to the humanization of hospital environments in order to contribute to the recovery of the neonate, well-being of the multiprofessional team, as well as of the relatives and companions (Martins, 2011). The humanization of care in the NICU should be based on individual care, integrity and respect for life. It is dependent on the encounter involving caregiver and being cared for. The construction of "wholeness must not be transformed into a concept, but rather into a practice of care that deals with the valorization of life, respect for the other and differences between human beings (Chediak Pinho Ii, 2006). Therefore, moments of reflection about the work process in the daily life are fundamental in order to review the practices. The humanization of care appears related to attitudes of giving attention, having responsibility, taking good care of, respecting the particularities of each one, and especially promoting an integral care to the baby and family. According to the professionals, humanitarian action is related to the way one cares. Care with manipulation, posture, sound, light, stress and pain, in the light of the knowledge of the newborn's abilities, can not fail to be considered by the team. This attitude will greatly enrich the nursing team, as new foundations will be built, with paradigm shifts for a new practice. In spite of the great effort that the nursing professionals can be making in order to humanize the care in NICU, this is a difficult task, because it demands attitudes sometimes individual against a whole system. And, often, the very dynamics of work in a NICU does not allow moments of reflection about its work

process. The effective presence of the nursing team with sensitive listening is as important as the technical procedure, since technical knowledge does not always work so well in the face of stress situations. Only by seeing, listening and feeling the newborn and the family as a whole will we be attending to and understanding the essence of human caring. It is important to highlight the responsibility of nursing to involve family members, focusing on the role of parents in the direct care of their babies. Methods and interventions should be implemented with the purpose of fostering their participation in the care of such children, with the aid of procedures strictly necessary for their evolution, avoiding aggressive and stressful behaviors.

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