

BENEFITS OF PLAY THERAPY IN HOSPITALIZED CHILDREN: AN INTEGRATIVE REVIEW OF THE LITERATURE

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ABSTRACT

Objective: To identify the trend of articles published by nurses in databases on the benefits of play therapy to hospitalized children. Methodology: The PI[C]O method was used to elaborate the guiding question and the definition of inclusion and exclusion criteria for the selection of articles. Keywords were organized with the addition of the Boolean AND: Hospitalized Child; AND Play Therapy; AND Benefits and their combinations in Spanish and Portuguese languages. The study consists of an integrative bibliographical research with qualitative approach, and it was performed in the platforms of electronic databases EBSCO and B-ON, within the 2009-2013 chronological interval. Fifty articles that fitted into the objective of this study were selected. We elaborated a data collection instrument with the variables considered more relevant. Data were analyzed according to Braden and Minayo. Results: After the analysis, we proceeded to the categorization of studies: 1) Meaning of the therapy toy; 2) Ways of play therapy and types of therapy toy; 3) Importance/ benefits of using the therapy toy. **Conclusion**: According to the results, the benefits of play therapy are evidenced in all articles analyzed. Thus, it becomes essential to insert the play therapy in the pediatric nursing care plan for an integral and quality care. **Descriptors**: Hospitalized child ; play therapy; benefits.

INTRODUCTION

Hospitalization is introduced as one of the first crises the child faces. It keeps them away from their everyday life, from the family environment and provides a confrontation with pain and physical limitation, arising feelings of guilt, punishment and fear of death. In this situation, the therapy toy is an excellent way to release the inherent stress and fear and to avoid the adverse effects in the short and long term that may result from hospitalization⁽¹⁾. Besides being a basic need of children, the toy represents distraction and an opportunity for learning and developing skills, considering that, when playing, children may symbolically live fantasies, explore and dominate the external world as well as their anxieties.

The play emerges as a valuable tool for observation and care of hospitalized children, since this is more than a physiological phenomenon or a psychologic reflex, being in reality a function full of meanings⁽²⁾. Hence, it contributes effectively to the physical, emotional, mental and social development of children, in addition to helping them to deal with the experience and dominate reality. The need for playing does not go away when children get sick or are hospitalized⁽³⁾. Thus, the toy should be used to recreate, stimulate, socialize and

also to accomplish its therapeutic function⁽⁴⁾. When playing, children release their ability to create and reinvent the world and explore the boundaries by developing their magical world. By incorporating the play, a new world of colors and smiles emerges in the hospital, then children fit better into the context where they are and settle affective bonds with everyone involved: child, family and health professionals⁽⁵⁾.

The plays are classified as therapy and recreational plays. The last one are plays understood as targeted activities and structured by a professional aiming to provide emotional and physical well-being⁽⁶⁾. Therapy plays are classified into the following types: ludotherapy and therapy toy. The first one refers to a psychotherapeutic technique, used in some types of psychological disorders, while the therapy toy refers to a technique that uses a structured toy, allowing the children to feel relieved of fear and anxiety⁽⁷⁾.

According to the Order of Nurses⁽⁸⁾, its importance is recognized in the 7th Principle of the Declaration of the Rights of Children: "...children should have full opportunity to play and to devote to recreational activities, which must be directed to the same objectives of education". It is recognized that they have the right to develop recreational activities, even in situations in which their health is compromised and requires hospitalization, being the play a privileged way of expression. Children go from a passive to an active role: they become actors and the ones who provide the care and who decide. They go from realistic and objective information to the symbolic game, in which they are free to do what they want, to imagine and to say "no" to refuse a proposal from the hospital. It also allows them to evaluate what they understood or felt, and therefore, it ultimately enables to adapt the clinical practice⁽⁹⁾.

By recognizing the importance of play therapy in child care and being sensitized to the difficulties faced by professionals to fit it into their daily routine, the need to perform this review emerged.

Considering these issues, this study aims to identify the trend of articles published by nurses, in databases, on the benefits of play therapy for hospitalized children.

METHODOLOGY

As we aim to synthesize the state of knowledge about the topic, we referred to the principles of an Integrative Review of the Literature. Considered a resource scientific method, it uses an approach that allows including of relevant experimental and nonexperimental research, which supports decision-making and clinical practice improvement⁽¹⁰⁾, promoting the development of skills that support the Practice-Based Evidence (PBE). In nursing, the PBE involves the definition of a problem, search and critical evaluation of the evidence available, the implementation of such evidence in practice and the evaluation of the results obtained⁽¹¹⁾.

Considering the objective set and in order to guide the elaboration of the review, the PI[C]O method was used, either in the elaboration of the guiding question, as in the definition of inclusion and exclusion criteria for the selection of articles. Following this line of thought, the following question was formulated: What is the trend of articles published by nurses in databases, relating to benefits of play therapy on hospitalized children? Starting from the MeSH Browser descriptor, we organized the keywords by adding the Boolean AND, in the sequence: Hospitalized Child; AND Play Therapy; AND Benefits and their combinations in Spanish and Portuguese languages. In October 2014, the research was performed on the online databases platform, EBSCO and B-ON, with the chronological interval 2009-2013. We found 35 articles of which, after reading the abstracts and applying the exclusion criteria, 15 that fit into the objective were selected. In order to obtain data from the analyzed articles, we developed a collecting instrument, which is presented in Figure 1, with the most relevant variables in order to compare the objectives of the studies and the conclusions reached by the authors.

Authors	Objectives	Conclusions
S1 Li HCW, Chung OK	To clarify the effects of psychoeducational interventions on hospitalized children.	The conception of a psychoeducational intervention project can facilitate the development of holistic care and improve the quality in the preparation of children for hospitalization.
S2 Kiche MT, Almeida FA	To compare the reactions expressed by children during the treatment performed before and after emotional preparation with the therapy toy (TT).	The TT demonstrated to be an effective strategy to reduce fear, tension and the children's pain during the treatment.
S3 Brito TRP, Resck ZMR, Moreira DS, Marques SM	Encourage nursing students to conduct ludic practices with hospitalized children during their professional training.	The presence of ludic practice is not yet a reality, but it will be gradually processed and its insertion implies to review the academic education. There is little motivation, lack of commitment, initiative and impotence due to lack of resources.
S4 Jansen MF, Santos RM, Favero L	To verify the benefits of TT usage for nursing care of hospitalized children.	The TT usage is an excellent resource for nursing care of hospitalized children. Their features helped children's communication, participation, acceptance of procedures and motivation.
S5 Castro PD, Andrade BUC, Luiz E, Mendes M, Barbosa D, Santos HGL	To analyze the benefits of "play as Therapeutic Instrument."	It is suggested that recreational activities during hospitalization improve the mood, encourages distraction, reduces anxiety and cry, increasing the appetite and leading to an improvement in the adherence to the treatment.
S6 Lemos LMD, Pereira WJ, Andrade JS, Andrade ASA	To identify the perception of the nursing team in the preparation of children and adolescents for hospital procedures.	The professionals did not perform the techniques with toys in their daily activities, although they know the importance of such resource.
S7 Fontes CM, Mondini CC, Moraes MC, Bachega MI, Maximino NP	To use the toy as a therapeutic resource in the relief of real and unconscious tensions of the child regarding hospitalization.	Playing interactively provides hospitalized children to interact with the hospital environment, to express feelings, emotions and provides resources for a humanized assistance.

Figure 1. Chart with data from the analyzed studies

Authors	Obiections	Combration
Authors	Objectives	Conclusions
SE8	To understand how the	Teaching about the toy and integrate
Maia EBS,	awareness of the nurse	it in the care provided are challenges
Ribeiro CA,	occurs for TT as a nursing	that still need be overcome.
Borba RIH	intervention instrument.	
	To examine the TT	The study provides empirical evidence
59	efficacy using video games	to support TT efficacy using virtual reality,
Li HCW,	to minimize anxiety	with video games, for psychological
Chung OK,	and the reduction of	preparation of hospitalized children
Ho KY	depression symptoms	with cancer, drawing, therefore, a way
	in hospitalized children	to promote integral and quality care.
	with cancer.	
510	To understand the	This study highlights the importance of the
.im SH,	experience of parents	parents in the treatment of post-operative
Mackey S,	in the management	pain of their children. Parents have expressed
Liam JLW,	of post-operative pain	that this is very important for them and also
He HG	of their children.	for the child to be partners in care.
511	To describe the experience	Nursing students recognize TT as an
Gesteira ER,	of nursing students when	important intervention of nursing care to
Gonçalves DS,	using TT during the	minimize the traumatic effects of children's
Marques F,	internship in Pediatrics.	hospitalization, in addition to promoting
Simões FD		a humanized assistance.
512	To verify the perception	Although most interviewees have
Francischinelli AGB,	of nurses regarding	knowledge about the TT and value its
Almeida FA,	the routine use of TT	use in practice, they do not routinely
Fernandes DMSO	in the assistance to	use it in their daily practice yet.
	hospitalized children.	
513	To describe the	The study reflected the importance
Berteloni GMA,	perceptions of nursing	of the therapy toy application as a positive
Remijo KP,	students regarding	method beyond the academic context,
Bazzo APG,	the TT application.	reaching the professional's routine.
Ferrari RAP, Zani AV		
514	To identify the knowledge	All children reported to enjoy playing
Dias JJ,	of the child with cancer	and think playing is a way to ease the
Silva CPA,	on hospitalization and	hospitalization trauma, being invasive
Freire SLR,	the use of play during	procedures the biggest cause of this trauma.
Andrade ASA	the treatment.	Playful activities are important to minimize
		the effects of hospitalization.
515		The study highlighted the challenge
Nicola GDO,	To know the perceptions	of working in Pediatrics, and provided
ilha S,	of the caregiver regarding	a new look not only for the treatment
Dias MV,	playful care during	of pathologies, but for health promotion
Freitas HMB,	children's hospitalization.	in a wide context, aiming at playful care
Backes DS,		in the provision of nursing care for
Gomes GC		hospitalized children.

Figure 1. Chart with data from the analyzed studies

ANALYSIS AND DISCUSSION OF RESULTS

The data were analyzed according to Bradin⁽¹²⁾ and Minayo⁽¹³⁾. Based on this analysis, we defined the information to be extracted and proceeded to the categorization of studies. Three categories of more prevalent themes emerged: 1) therapy toy meaning; 2) ways of play therapy and types of therapy toy; 3) importance/benefits of using therapy toys.

Therapy toy meaning

In the S2 study, the authors report that the Therapy Toy (TT) is a fundamental tool for professionals to prepare children for invasive procedures, providing greater acceptance and cooperation. They consider the toy as a resource that represents an educational alternative, because it promotes social, emotional and intellectual development, and also the therapeutic development, when it helps to reduce stress, fear, frustration and anxiety (S3). Four basic functions of the therapeutic role of the toy are highlighted: recreation, when the main purpose of the activity is pleasure and distraction; stimulation, when favoring sensorial-motor, intellectual, social development and creativity; socialization, when allowing children to experience social roles and learn relate with others; catharsis, when allowing dramatization of roles in order to relieve emotional tension and resolve conflicts (S2).

Therapy toy is constituted according to study S13 by a structured toy according to age and development, and its objective is to relieve the pain and anxiety of children in atypical experiences that are threatening. This is a method that enables humanization of hospitalized children and a technique that facilitates communication between the nursing team and the children, assuring that professionals will understand their needs and feelings. It can be used by all children without physical or pathological restrictions (S6).

Authors of the S3 study corroborate it by affirming that the use of TT aims to serve as a mean of communication between health professionals and children. Thus, by working as a link (S13), it has the ability to develop empathy and to establish bonds between them. Such authors understand the TT as an instrument that can help to perform certain procedures, since it is a familiar object that generally brings positive feelings. In the S8 study, the TT is pointed as a possibility of nursing intervention on assistance to hospitalized children. Authors of the S4 study share the same idea, stating that the therapy toy as an instrument of care must be implemented by nursing during the child care, being a tool able to assist in the reduction of anxiety and fear.

Ways of play therapy and types of therapy toy

The S13 study refers to the use of toys familiar to the children, such as a doll, allowing the professional to come close and to create an affectional bond with them. The use of the toy simulates an environment close to the everyday life of children, in other words, their home, family or school (S2). Authors of the S15 study suggest games, readings, plays and music as ways to play to be implemented during the hospitalization as well as hospital materials, a doll or materials created by the children themselves before and after the procedure (S11). In the S2 and S7 studies, researchers also used a doll to demonstrate the procedure. Other common hospital materials were also used such as physiologic saline solution, compresses, mask, scissors, tweezers, gloves, syringes, splints, according to the specific care/treatment, using the doll as an example. A demonstration was performed in a ludic stage setting, by telling tales and using dramatization (S7). As pointed by the S5 study, drawing and painting are excellent ways for children to express themselves by playing, and all they need is raw materials such as crayons and paper or colorful paint cans and brushes; or materials to paint with hands, in such a way they can play individually or in a group. Children restricted to sickbed can also take part in playful activities, with the daily visit of play therapists who bring happiness through playful materials according to the age and the age group of the children (S6). Playroom is referred in the S6 study as a privileged space for children to be stimulated to play, through the access to a variety of toys, inside a playful environment, which has a great importance for the understanding and acceptance of the disease and for the evolution of the treatment. Playing with a ball or with ageappropriate toys, watching television, playing video games, plasticine modeling, drawing, coloring books, crossword puzzles, collective games and puppet theater have achieved prominence in the study (S14). In the S9 study, nurses used virtual games as a therapy toy (with interactive stimuli created by computer) in children at school age with cancer, since they are more peer-driven and could benefit from group teaching and learning. By creating a non-threatening atmosphere, they are invited to express their concerns and fears, besides offering the opportunity to interact with their peers. The games were chosen according to children's sex, age, ability, type of disease and general condition.

Importance/benefits of using therapy toys

In the S1 study, children who received the therapy toy in the preoperative period experienced lower anxiety levels, less negative emotions and lower heart beats and blood pressure. In the S2 study, the therapy toy demonstrated to be an effective strategy in the reduction of fear, tension and pain of children during the treatment. The S3 and S7 studies claim that the TT has an important therapeutic value and influences physical and emotional recovery, making the hospitalization process less traumatic and more cheerful, minimizing negative effects. They also say that interactive play allows hospitalized children to interact with the hospital environment, promoting the continuity of child development, as also evidenced in the S14 study, concluding that plays and games develop their potential and promote relaxation, which is essential for children's development. Age-appropriate toys provide the emotional balance of hospitalized children, which reveals an important step on humanization of care (S11). Authors of the S4 study highlight that being these subjects hospitalized children, there is a need for including the therapy toy in the provision of care. Playing must be considered by nurses as the most appropriate way to approach the child, being able to develop empathy between them, to see and understand the world through their eyes, establishing affectional bonds. The importance of a playful space suitable for different age groups outstood (S14). In the same line of thought, authors of the S7, S12, S13 and S15 studies prove and add that the TT improves the interaction between adults and children, promotes a greater cooperation in procedures, makes children cry less, reduces anxiety, and also enables children to express what they feel and think more easily. Thus, a change in behavior is observed, which speeds their recovery. The use of the toy allows a better attention to their needs, favoring the understanding and control of their reactions (S6, S8, S9 and S12) and being an important ally for the recovery of hospitalized children (S13). The existence of a playroom in the hospital contributes to the demystification of the hospital environment, allowing children to see this environment as a good and pleasant one. Besides recognizing the benefits of the use of TT for children, the S4, S8 and S13 studies highlight the benefits for the professional, who thus keeps close relations with the family, in such a way they can better understand the children, experiencing at the same time "pleasurable feelings" arising from the play. Authors of the S2, S4, S5, S6, S7, S9, S11, S13 and S14 studies concluded that the use of therapy toy showed benefits for minimizing the stress of hospitalization, facilitating the understanding and acceptance of nursing procedures, being an excellent resource in the health care to hospitalized children. For nursing students in the S13 study, the use of TT by health professionals is claimed to be beneficial, characterized by the acceptance of the treatment.

They highlight the importance of the use of TT as a positive method for the treatment of hospitalized children, which must go beyond the academic context, being imperative its integration into daily practice of professionals who work in pediatric units. It must be used in order to facilitate procedures in children who undergo surgeries or continued treatments, to make their experience less traumatic and to include the family as a partner in care. In the S4 study, it was verified that mothers feel safer and peaceful to see the use of therapy toys in the care of their children. Participation of the family in playful activities brings confidence to the children and increases the affectional bond, as demonstrated in the S6, S8 and S10 studies. Authors of the S15 study point out that the bond established bet-

ween child and family is strengthened. When children come back from the playful environment, they have fun, feel relaxed, safer, calmer and happier, which provides a greater acceptance of the care. The playful space and the therapy toy offer children/family, on one hand, another way to experience the disease, and on the other hand, a way to face the treatment in a playfully (S11). Authors of the S5 study concluded that playful activities during hospitalization help in physical and emotional development of the child, promote the improvement of mood, favor distraction, reduce anxiety and cry, increase appetite and improve adherence to the treatment. The existence of a playful space in Pediatrics units allows reinventing the children's imaginary world (S15). In the S9 study, the authors concluded that the advantage of using virtual reality as a TT is that it allows great flexibility in how it can be connected with children and adapted to achieve specific therapeutic targets. It is also a real opportunity to provide children a break from rigors of hospitalization and treatment, as well as a sense of control over their disease having fun at the same time. In addition, virtual reality offers a platform in which sick children who are unable to perform leisure activities in real environments can be able to engage in them.

CONCLUSIONS

From the findings, we can emphasize that the objective of the research was achieved, as this review showed that the benefits of therapy play are notorious in all articles analyzed. By the evidence, it is necessary to insert the therapy toy in the care plan of pediatric nursing. Providing care with toys is one of the most effective ways to assist hospitalized children. Toy features facilitate communication, participation, acceptance of procedures and motivation of the children, which enables the maintenance of individuality, decrease in stress and the possibility of implementing a non-traumatic care for children and their family. In a hospital context, the ways to play with evidence of therapeutic benefits are: Doll as a demonstration tool; Materials created by children themselves (modeling); Hospital materials; Drawing and painting, and Video games. Even before the benefits of using the toy, we often observe in practice the simple manipulation, which does not show the potential of playful in the global development of children, which may happen due to insufficient knowledge on the subject. The understanding that playing is a basic need and it must be valued as much as hygiene, food, medication or other procedures is essential. The inclusion of ludic in the hospital has been a slow and gradual process, but some experiences performed prove that creative actions, focusing more on the awareness of the team than in financial resources, are able to produce rewarding results for children and professionals.

Unappreciation of toy usage is associated with the idea that some health professionals have for considering the hospital environment no place for playing. Therefore, the nursing team does not promote playing, does not encourage the use of TT, does not favor acquisition of toys and does not use the available ones either. Recognizing the play as a therapy is a process and requires training. Investing in the adoption of this resource requires transformation of the care and child paradigms and knowledge about the toy. Only by this investment, little consistent justifications, such as lack of time, quality and quantity of toys, can be transformed in order to incorporate the concept of playing as an activity inherent to child behavior, essential to children's well-being and as a support for reality management.

This is a turning point that Capra⁽¹⁴⁾ designates as a "mutation point", defending the holistic or systemic care, seeing the whole as inseparable, since the study of the parts does not allow to know the functioning of the organism. According to the author, we will only be able to overcome the knowledge of our time if we see the present in its entirety and interdependence. In this line of thought, nurses will only succeed in this integral and quality care if they act as promoters of play therapy encouraging its active manifestation in the daily routine. By understanding the importance of the toy as an intervention to be offered to hospitalized children, they will incorporate it in their care.

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