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ORIGINAL ARTICLE

CLIENT AND STUDENT PERCEPTION IN NURSING ASSISTANCE WHEN FACED WITH THE NAKED BODY

PERCEPÇÃO CLIENTE E DISCENTE NA ASSISTÊNCIA DE ENFERMAGEM FRENTE AO CORPO DESPIDO

PERCEPCIÓN DEL CLIENTE Y ESTUDIANTES EN EL CUIDADO DE ENFERMERÍA SOBRE EL CUERPO DESNUDO

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ABSTRACT

Objective: to reveal the perception of the client and Nursing student in the execution of procedures before the naked body. **Method:** descriptive, qualitative approach. Eleven clients of the researched hospital's Blue Wing participated in the study, who experienced or experienced Nursing care, that required the naked body, carried out by the students and 11 Nursing students who were properly enrolled in the 5th year of the course. The data was obtained through individual interviews, with a semi-structured interview script. The data was then organized and analyzed by the Content Analysis technique, in the Categorical Analysis modality. **Results:** besides the constraint that the client and the student can suffer in the accomplishment of the assistance, it was observed that, when taking some care, they can be minimized. **Conclusion:** the interaction with the client and the observance of the ethical principle is important for training and grounding in conducts performed by future professionals. **Descriptors:** Nursing; Comprehensive Health Care; Patient Care.

RESUMO

Objetivo: desvelar a percepção do cliente e discente de Enfermagem na execução de procedimentos diante do corpo despido. **Método:** estudo descritivo, de abordagem qualitativa. Participaram da pesquisa 11 clientes da ala azul do hospital pesquisado que vivenciam ou vivenciaram assistência de Enfermagem, que exige o corpo despido, realizada pelos alunos e 11 discentes de Enfermagem que estiverem devidamente matriculados no 5º ano do curso. Os dados foram obtidos por meio de entrevistas individuais, com roteiro de entrevista semiestruturado. Em seguida, os dados foram organizados e analisados pela técnica de Análise de Conteúdo, na modalidade Análise Categorical. **Resultados:** além do constrangimento que o cliente e o discente podem sofrer na realização da assistência, observou-se que, ao tomar alguns cuidados, pode-se minimizá-los. **Conclusão:** a interação com o cliente e a observância do princípio ético é importante para a formação e o embasamento em condutas realizadas pelos futuros profissionais. **Descritores:** Enfermagem; Assistência Integral à Saúde; Assistência Prestada ao Paciente.

RESUMEN

Objetivo: descubrir la percepción del cliente y los estudiantes de Enfermería en la ejecución de procedimientos sobre el cuerpo desnudo. **Método:** estudio descriptivo de abordaje cualitativo. Participaron de la investigación 11 clientes del ala azul del hospital que experimentan o han experimentado el cuidado de Enfermería, que requiere el cuerpo desnudo realizado por alumnos y 11 estudiantes de Enfermería que esté debidamente registrados en el 5º año del curso. Los datos se obtuvieron mediante entrevistas personales con guión de entrevista semiestructurada, y en seguida, los datos fueron organizados y analizados mediante la técnica de Análisis de Contenido en modo de Análisis Categorical. **Resultados:** además de la vergüenza que pueden sufrir el cliente y los estudiantes en la aplicación de la asistencia, se observó que teniendo algunos cuidados podemos minimizarlos. **Conclusión:** la interacción con el cliente y el cumplimiento del principio ético es importante para la formación y embasamiento en conductas logradas por los futuros profesionales. **Descriptores:** Enfermería; Atención Integral de Salud; Atención al Paciente.

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INTRODUCTION

Nurses and their staff are the ones who most closely maintain close contact with the patient in performing various procedures and who are in direct contact with them during their hospitalization, where they often touch, manipulate and expose the body when performing Nursing care.¹

When performing Nursing care and procedures, the professional often has very close contact and there may be bodily exposure or invasion of the client's intimacy in an unintentional manner. When the user faces a difficult situation such as pain, malaise or even risk of death, due to a particular pathology or accident, the same is seen in the hands of health professionals. In this situation, lies the Nursing team, who by manipulating it to perform techniques and care to alleviate, prevent or remedy symptoms, deals with the body and the entire vital universe of the client.^{2: 238}

Thus it is observed in the Code of Ethics, rights, duties and prohibitions that many students and nurses do not give due attention to their importance and, often, do not know or do not do, and even do not know the rights of the patient in a hospital stay. One of the prohibitions is listed in Art. 78 of the Code of Ethics - "Abusive use of the power conferred on them by their position or job, to impose orders, opinions, indecently expose, to sexually or morally harass, belittle people or hindering professional practice".^{3:40}

During hospitalization, the client needs care and can sometimes be invaded in their privacy and intimacy. Observing the care in the hospital environment, one can see how urgent it is to rethink and reflect on the ethical principle of privacy, on disrespect for bodily exposure and on the little zeal for the client's modesty and dignity. Due to the condition of the disease, feelings of impotence and fragility, insecurity and dependence reinforce even more the feeling of loss of autonomy, leading the patients to consider that in hospitalization they become objects of care, losing their identity and their privacy.^{4: 45}

Thus, as humans are social beings, the patient must feel that the professionals consider them. In this sense, some aspects related to Nursing care must be adapted according to their preferences, always respecting their individuality. A basic care to maintain a social comfort is that the professionals need to be attentive with respect to the client's modesty, since it is

something that should be maintained in all situations.^{5: 3}

The motivation to approach this theme was based on comments that the researcher heard from some students when talking about how they would react in a certain procedure performed on the naked patient, knowing that they will still have these classes in the discipline of Nursing Work Processes II. Even before learning and having practices, they report thoughts. Some students talk about being embarrassed, while others demonstrate that they developed the technique without any problem, as well as not knowing how to react in certain situations.

Thus, considering the problems that may exist during the execution of procedures performed by Nursing students, and of some difficulties in dealing with nudity, which are manifested through feelings such as shame and embarrassment, It is relevant to ask the questioning question: What perceptions do the students and clients experience regarding procedures that require dismissal? The hypothesis is that there is a student's embarrassment at the client's nudity, and vice versa, where they can compromise teaching, leading the student to not perform the procedure; such as customer dissatisfaction.

OBJECTIVE

- To unveil the perception of the client and Nursing student in performing procedures before the naked body.

MÉTHOD

A descriptive, qualitative study, conducted at the General Hospital and the State University of the northeast region of the State of Alagoas. The data collection took place from February to March 2016, with inclusion criteria for clients of the blue wing of the General State Hospital who experience or experienced Nursing care that require the naked body, performed by the students, as well as the students of that are properly enrolled in the fifth year of the course.

The initial population of the study consisted of 22 clients and a Nursing student, but the final sample comprised 11 clients, six of them male and five female, 11 Nursing students and only one male and ten female.

The instrument used was a semi-structured script. For an interview, recorded in an electronic audio device, with duration

of 20 minutes, ten assertions in total were used, five for the clients and five for the students, distributed in five dimensions: the embarrassment in performing the procedure that requires the body to be dismissed; communication as a way of caring; the preparation and care of Nursing students; the attitude and reaction to suffer embarrassments and the feelings of the students and the clients before the naked body.

This interview was applied with some Nursing students and clients hospitalized in the blue wing, after ethical analysis, approved with protocol No. 50333415.8.0000.5011, and accepted by the permanent education sector of the General State Hospital and the State University.

The interviews were carried out in the university, in a reserved room, with the students, and in the hall and ward of the blue ward, with the clients, after approval of the subjects of the research and signing of the Informed Consent Term (TCLE), emphasizing about the secrecy of the information collected And the possible risks and benefits brought to the institution. After the recording, they were transcribed and re-submitted to the interviewees, in order to confirm the grant for the study. Anonymity of the participants was ensured through the general name "clients" and "students", plus the numbering from ONE to 11.

After all the authorized data, a reading was made in order to find cores of meaning, from which the categories of analysis for discussion will be extracted, so that, in this way, the general objective of the study can be answered according to the Content Analysis Technique, the data was organized around three poles: 1. Pre-analysis, 2. The exploitation of the material; and, finally, 3. The treatment of results: inference and interpretation.^{6:121}

RESULTS AND DISCUSSION

It is important, first of all, to know some characteristics of the Nursing students and the clients who accepted to participate in this study. When analyzing the data collected from 11 clients, six were male and five female; and of the 11 students only one was male, predominantly those surveyed were females.

♦ The embarrassment in performing the procedure.

All the clients, in their speeches, report that they never felt embarrassed to know that a student of Nursing would carry out the procedure in them, although 18.8% of the

students said to have already suffered some type of embarrassment when carrying out some procedure in the client, like bed bath , Probe passage and cytology in the client, for example, as can be seen below:

I did not suffer embarrassment, to this day I was well treated (Client 11).

Yes, the fact of being invaded by his intimacy, I am already embarrassed, in the procedure as: Bath in the bed and sounding passage (Student 04).

The author of another study states that:

The testimonies show the patients' embarrassment in situations that expose their body and the body of the other, even in the presence of their relatives, because the fact that they are accompanying the patient during hospitalization does not mean having access to their intimacy. It is important to emphasize that the Nursing team, when touching and exposing the patient, should consider aspects such as cultural diversity, gender, age, social class, carefully evaluating their reactions to situations involving privacy, in order to adopt acceptable behaviors For him.^{7: 4}

It is noted that such feelings emerge associated with the shame of manipulation in the intimacy of the other. The fear of embarrassment, for being a student, getting worse, when he is male, besides the anguish of suffering some denial of the clients in the accomplishment of the procedure..

The role of Nursing is to maintain patient privacy and help you deal with the loss of privacy when needed. However, this role is not easy and there is often an invasion of the client's intimacy during the care.^{8:5}

The Code of Ethics of Nursing Professionals recommends, in article 18 of Chapter I, the duties and responsibilities of nurses: "To respect, recognize and carry out actions that guarantee the right of the person or his legal representative to make decisions about his or her health, treatment, comfort and well-being, "and in Art. 19:" Respect the modesty, privacy and intimacy of the human being throughout his life cycle, including death and postmortem situations. ".^{3:34}

♦ Communication as a way of caring

It is observed that all clients and Nursing students consider the interaction between them important in performing the procedure. Already, about 18.8% of clients complain about attendance of Nursing students in that sector, as mentioned:

Yes, but there are a lot of people who do not know how to serve people (Client 03).

Yes, because you will know more about the patient and what he had (Client 06).

I think it is important, especially for the professional to come and introduce themselves, to talk about what they are going to do in the procedure, to identify themselves, to talk with the patient, to ask him how he is and what he feels at the moment, to have at least a previous knowledge of the person that you will Perform the procedure (Student 02).

The Code of Ethics reports one of the duties of the nurse, in Article 17: "Provide adequate information to the person, family and community regarding rights, risks, benefits and interurrences." ^{3:33}

Moreover, the process of communicating effectively demonstrates respect from being a caregiver to being cared for and translates into establishing an effective relationship with the individual. Its daily application provides ways to innovate in the quest to overcome the difficulties faced in effecting communication. ^{9: 178}

Thus, it is necessary to work and develop strategies of interpersonal relationship and, with this, to effect the communication between nurse and patient, since the process of therapeutic communication should be prioritized as a relevant and essential Nursing activity. In order to achieve satisfactory communication and humanized care, nurses need to be involved and believe that their presence is as important as performing technical procedures. ^{10:5}

♦ The preparation and the assistance of Nursing students

When analyzing the reports of the clients, it was noticed that about 81.2% feel well assisted by the Nursing students. However, they still report the dissatisfaction and disorganization of the service and the bureaucracy in general care, in addition to the feeling of dissatisfaction with hospitalization. The others, about 18.8%, complain of the general care, from the environment in the care until To the accomplishment of the procedure, where it could be observed in his lines:

No, here it is very disorganized (Client 03).

[...] here they take the medical records and leave, they do not even look at the patient (Client 04).

The hospital environment is stressful, noisy, with its own rules and routines. In this environment, the patient loses his identity, privacy and his perception of freedom. Hospitalization brings, to the patients and their families, feelings of insecurity that accentuate when these patients have dependence on basic Nursing care, such as food, hygiene and physical mobility. ^{11: 5}

When we analyze the preparation of these students by their speeches it is observed that about 63.6% do not feel prepared and confident to perform assistance alone. It is observed that autonomy only happens in the last year of graduation, because they report that they will be alone and will have to perform the procedures.

Prepared not, but it is something that is improving with day to day practice (Student 05).

In practical activities, especially in the first contact with the client, insecurity may occur and clients perceive this insecurity. However, at no time, did customers mention lack of technique or errors made by academics. However, they need to apply and associate the acquired scientific knowledge with the practice and it is with the practice that will develop this technical-scientific ability that, consequently, will make it more secure in relation to the procedures. ^{12: 4}

And the other 37.4% feel prepared, but report having difficulties such as anxiety, nervousness, blockages and doubts during the procedure. They report that they think they will be able to overcome these barriers in the last year of graduation.

I feel prepared, but, there are some things that involve anxiety and nervousness. Because the issues of difficulties that I have been going through, since when I entered college, make me have this emotional insecurity, but safety in practice I have in itself (Discente 02).

When other studies of different courses were observed, it is noticed that insecurity and fear surround many academics, regardless of the course. In a research with students of the medical course, students reported doubts about the performance of procedures, insecurity before Decision-making, and frustration with reality, while others cited that contact with the patient depended on teachers and counselors. ^{13:4}

♦ Attitude and reaction to being constrained

When they observed how they would react in certain situations when they were embarrassed, 18.8% of clients stated that they would seek to be responsible or denounce, but 81.2% of them would only express feelings of sadness, coldness and rejection when they were constrained. This is verified in the following speeches of the subjects:

I would feel terrible, I would not leave (Clients 01).

It would maintain the coldness and the character in the accomplishment of the procedure (Client 02).

I would look for the person responsible for the sector (Customer 06).

Denounced (Customer 07).

On the part of the students, 81.2% would take some action when they are embarrassed, like trying a dialogue, looking for someone responsible or letting another professional perform the procedure, and only 18.8% would not know what to do when they are embarrassed. This consideration can be contemplated in the following statements:

I think I would be embarrassed, I would not expose myself, I would screw up and I would not do what the person was asking me for (Student 1).

I do not know, I would be embarrassed and nervous (Discente 08).

I do not know, I would not have an answer, I would leave the place, then I would talk to the team coordinator, something like that (Student 10).

I would try to talk to the patient and if it was not possible to perform the procedure then I would wait and then talk to him again after the procedure (Student 07).

It can be seen, from Sehnem's study, that it is possible to infer from some statements that students react by keeping sexuality veiled in situations involving Nursing care, with attitudes such as silence, withdrawal and concealment of their existence.¹⁴

In Constitutional Law, it was observed in article 5, paragraph X, the following sentence: "the privacy, private life, honor and image of the people are inviolable, and the right to compensation for material or moral damages resulting from their violation is guaranteed."^{15: 1}

"It is understood that respect is an ethical principle of Nursing and serves as a basis for the attitudes made by the profession, consisting in recognizing the dignity, individuality and cultural heritage of every human being who needs care."^{8:942}

♦ The feelings of clients and students about the procedure with the opposite sex

When analyzing if there is any embarrassment in the procedure with the opposite sex, it was possible to perceive that 54.5% of the clients have no problem in receiving assistance from a student of the opposite sex, it is necessary to emphasize that about 45.4% of these clients were, in their majority, male and only 9.1% were female. The study showed that most women are the ones who suffer embarrassment, although the same sex is the person who performs the procedure. The other 45.4% of the interviewees said they felt ashamed. Of these, the predominant was

the female sex, with about 36.4% women and only 9% male. This aspect can be observed in the lines:

No problem at all (Customer 01).

Embarrassed, it is different with a woman, you already feel embarrassed, imagine a man (Client 05).

I will not like it, I would feel ashamed (Client 11).

This embarrassment, regarding the performance of the procedure with the opposite sex, is proven in other studies also, with Nursing professionals from Rio Grande do Sul, mentioned in the following paragraphs:

Patients' reactions, which are perceived by Nursing professionals as embarrassment, shame, fear, anxiety, sadness, worry, insecurity, fragility, discomfort, invasion, among others, are totally unavoidable. Such reactions are evidenced mainly in the elderly, when attended by the opposite sex. Thus, they often request that the care be performed by their sex workers. This is commonly, manifested by women, who are benefited since the female gender is still prevalent in the profession. In contrast, the male patients, who can not always be cared for by the same sex, because of the small number of these in the hospital institutions. 16: 4

Some students see no problem performing a procedure in the opposite sex; 63.6% of them reported that they have already passed this stage, and that, in the course of the practice, they have overcome this problem, but there is still a part of the students, about 36.4%, who find it embarrassing, invasive and embarrassed to perform the procedure with The naked body. This can be observed in the following statements:

I would act with professionalism and, when I see that the patient was embarrassed I try to explain everything to him professionally (Discente 11).

Shameful, annoying, embarrassing, but, in our profession, it is necessary to perform (...), although the fear suddenly becomes flushed and I do not know how I would react (Discente 10).

There is always a bit of taboo on the part of the student who, often, did not come in contact with the naked body, but I believe that this taboo can be overcome with time, through practices in the internship camps or even in their profession, which I think time will determine if you will still continue with this behavior for the rest of your life or not (Student 07).

In Nursing, sexuality has appeared associated with taboos and prejudices, which surpass both academic training, and professional practice. It is in the moment of

care, from the interaction of the bodies of those who practice it and of those who receive it, that sexuality gains space to emerge. However, when veiled, it may consist of a mechanism generating mutual anxieties, uncertainties and constraints.^{12: 91}

Thus, the lack of a consistent approach with Nursing students about the subject of sexuality can harm them in their future daily practice, regardless of their area of action, considering that they may not be prepared for it. Therefore, it is necessary to insert this theme in the curricular grid of Nursing undergraduate courses, involving the teaching staff as a whole, in view of the multidisciplinary nature of the subject.^{15:9}

CONCLUSION

This study made it possible to identify that the fact of being a student in performing the procedure is not what makes the client embarrassed by an assistance, but, rather, their lack of attention in performing the technique, the dialogue and the safety in their conduct, which End up transferring to the client the fear and the insecurity. Therefore, it is concluded that the interaction with the client and the observance of the ethical principle are important for training and base in conducts performed by the future professionals, besides making a care without risks and damages .

The data show that the procedure with the opposite sex is embarrassing for both, which can be minimized in several ways. Both the client, knowing their rights and duties during hospitalization, being able to question and fight for their guarantees, as the students, doing a good assistance, based on the code of ethics of the Nursing professionals, following the techniques to carry out the procedure, allowing for Damage is reduced in the most diverse situations.

The way the individual speaks, acts, or behaves, in a given situation produces a positive or negative effect. With this, it is important that students, already in university, to learn how to react in different situations and, if they are out of control, to know which organ to look for their rights, either as a student or as a professional.

It is clear that this theme should be discussed in a transversal way in all the formation of the student so that he or she feels prepared to deal with the other, respecting their individuality and values. Respect for "being" care is a priority when realizing customer care, being ethical and humanized,

based on scientific evidence and also on the intuitive and aesthetic "being" nurse.

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