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To unveil the client’s perceptions hospitalized to medical surgical units in a midsize hospital in the interior of Goiás on body exposure during nursing care. Method: descriptive study with qualitative approach, with 20 customers, through taped interviews with digital camera, semi-structured script. The interviews were transcribed and analyzed, according to content analysis technique. The research project has been approved by the Research Ethics Committee, Protocol No 0155/2011. Results: after analyzing three categories emerged: 1. Body exposure: a difficulty faced by the client during hospitalization; 2. Invasion of personal space; 3. Interpersonal communication: a need to be followed by the nursing staff during the client body exhibition. Conclusion: the lines imply that participants (clients) demonstrate great embarrassment, when their privacy is not protected. It is important to better prepare the nursing staff, to circumvent this kind of situation, respecting their individuality and feelings. Descriptors: Nursing Care; Body Exposure; Hospitalization; Patient Care; Personal Space.

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ABSTRACT
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RESUMO

RESUMEN
Objetivo: desvelar las percepciones de clientes internados en unidades médicas quirúrgicas en un hospital de medio porte sobre exposición corporal durante la asistencia de enfermería. Método: estudio descriptivo, con abordaje cualitativa, con 20 clientes, por medio de entrevistas grabadas con cámara digital, con guía semi-estructurada. Las entrevistas fueron transcritas y analizadas, según la técnica de análisis de contenido. El proyecto de investigación fue aprobado por el Comité de Ética en Investigación, protocolo nº 0155/2011. Resultados: después del análisis surgieron tres categorías: 1. Exposición corporal: una dificultad enfrentada por el cliente durante la hospitalización; 2. Invasión del espacio personal; 3. Comunicación interpersonal: una necesidad a ser seguida por el equipo de enfermería durante la exposición corporal del cliente. Conclusión: los discursos dejan trasparecer que los participantes (clientes) demuestran grande constrainmentiento, cuando su privacidad no es resguardada. Es importante una mejor preparación del equipo de enfermería, para contornar ese tipo de situación, respetando su individualidad y sentimientos. Descriptores: Asistencia de Enfermería; Exposición Corporal; Hospitalización; Asistencia al Paciente; Espacio Personal.
Constant changes come following the history of nursing in society, with multiple charges with reflections on caregiving are addressed by professionals in this area. By requiring a specialized assistance, hospitalization, often requires invasive care, that ends up invading the privacy of the client and, consequently, cause a stressful hospitalization, uncomfortable and insecure.

Disharmony and conflict for a long time makes the job becomes a routine of suffering and dissatisfaction, then there is a great need for nursing staff to rescue the client in its context, respecting their culture, religion, beliefs and customs, in order to promote a supportive and respectful care during the work process.¹

Body exposure is when the human being is discovered. The man learns in his entire existence moral and ethical values, among which is the right and duty to protect its privacy. The professional for assistance must respect the customer that need help to meet their needs.² When care is natural exposure of the body, so it is necessary that the nursing seeks communication techniques to build a therapeutic relationship and the collaboration of the hospitalized. In this way, their privacy will be maintained and their mental and physical wellbeing will be preserved.³

Privacy allows a sense of expression of freedom, autonomy, personal domain of health and body, in addition to being an essential element in the development and maintenance of human life. Several consequences for the client can occur when the intimacy is not maintained, that is, when the body is exposed, leading to a possible loss of individuality and identity.⁴

The vast majority of professionals consider the care as unique process, in which customers need to undergo the routine hospital during hospitalization. It is important to build a relationship of courtesy and hospitality, between the professional and the client, and may generate feelings of freedom, respect, security and dignity, which favors autonomy statements related to decisions about them.⁵

Some invasive care is required during hospitalization and, in most cases, is carried out by nursing staff. It is necessary that the professional identifies, orient the client about the procedure to be executed and excuse to the execution. The responsibility of a subsequent improvement of the assistance is the responsibility of the professional nurses, because the nursing profession is defended as effective and holistic care.⁶

Consider the ethics in the health field becomes increasingly paramount and leads to an increasing demand for quality health care.⁷ It is necessary to find nursing stabilization between scientific knowledge and the practice of humanization and provide active and integral service to its clients, respecting their values, hopes, cultural aspects, maintaining their privacy and individualize the assistance against the indifference of each one, with the goal of providing a better quality of life.

The interest to develop this present study is to enable new reflections and perceptions about the actions, involving customer ethics and rights. Maintaining customer privacy in assistance demonstrates a visible challenge to nursing professionals. This theme aims to customer privacy in the daily work of nursing in hospitals, with a view to the humanization of professionals during health care, the effectiveness of the interaction between the team and the client and establish a relationship of respect and trust.

It is believed that this study will contribute to the scientific knowledge of the health area, especially the professionals who deal in customer care assistance, mainly nurses, seeking the improvement of care, with subsidies that could serve as a support. It is expected that the results of the study can collaborate effectively, for the continuity of the Process of Systematization of Nursing Care within the hospital.

OBJETIVE

- Unveiling perceptions of customers admitted to medical surgical units in a
midsize hospital about body exposure during nursing care

**METHODOLOGY**

Article extracted from the monograph presented to Nursing Degree from UniEvangélica University Center of Annapolis, as part of the requirements for obtaining a Bachelor’s degree in Nursing.

This study is qualitative in nature based on thematic analysis. It was conducted with 20 customers admitted to medical surgical wards in a mid-size hospital in a municipality Goiás State, Brazil. The project was submitted and approved by the Research Ethics Committee of the UniEVAngélica University Center under nº 0155/2011.

For data collection, we select a semi-structured interview, all recorded in digital camera, which was followed a script previously established and whose questions were pre elaborated, with the following issues: Gender; Age; What are the difficulties you encounter during the body exhibition, when nursing care? Tell me what was your behavior before the exposure of your body during the care provided by nursing? Can you remember how many times have you ever been hospitalized? Did you receive some guidance from the nursing staff when you were receiving body care? When the nursing staff provided some care when you expose your body, do you prefer to be alone? After collecting data, the interviews were transcribed in full, study participants were identified by “subject”, followed by the ordinal number of the respective order of the interview, thus ensuring their anonymity, in accordance with the requirements of Resolution 196/96, the National Health Council, which rules on standards and regulatory guidelines for research involving human beings.

Then the reading of the lines of the subject, of which withdrew the words and phrases of greater relevance to the search, moved to a table made according to Bardin’s thematic analysis.

Content analysis was used consisting of three steps: Pre-analysis, step where it can determine the keyword, the demarcation of the context, the cutouts, the form of categorization and the more general theoretical concepts; Exploration of the material, the transformation of the raw data on which aims to understand the context; Treatment/interpretation of the data obtained, the raw results were submitted to simple statistics operations, which allowed put into sharp relief the information obtained, from which were performed interpretations laid down in a theoretical framework.

The analysis of information listed by subject of research emerged three categories, namely: Body Exposure: a difficulty faced by the client during the hospitalization, with subcategories (Discomfort/shame); Invasion of personal space; Interpersonal communication: a need to be followed by the nursing staff during the exhibition the client body.

**RESULTS AND DISCUSSION**

The data were collected in a mid-size hospital in a municipality OF Goiás State, Brazil, in the period December 2011 and January 2012. 20 subjects took part in the study covered in bed, of both sexes, being nine males and 11 females, who were admitted to medical/surgical wards for at least 48 hours, all subjects met the criteria established by research.

Study participants are age between 18 to 78 years. In large part, 90% of customers have already experienced the internment previously, while 10% of the subjects were admitted for the first time. It was realized throughout the interview that hospitals and nursing care not interfered in the emotional response of customers, who have been through previous hospitalizations.

The data analysis was achieved from reading the interviews, seeking to determine categories of senses, which together reported perceptions on the lines of the subject. It was focused then three thematic categories presented and analyzed below.

♦ **Category 1: Body Exposure: a difficulty faced by the client during hospitalization**

Among the 20 respondents, mostly consisting of 12 (60%) subjects, expressed
discomfort and shame in the nursing care during the care in which expose the body which are: bath, change dressings, exchanges of personal clothing among others. While the other part, represented by 8 (40%) individuals showed indifference to body exposure in the team care. In the subcategory below are drawn the lines of respondents.

**Subcategory 1: Discomfort/shame**

In front of the analyses reported by customers, it was noticed embarrassing situations in care provided by nursing staff in which privacy is not protected (bath, change dressings, exchanges of personal clothing), generating so feelings of discomfort and embarrassment, and noticed also unpleasant experiences, when assistance is carried out by the professional of the opposite sex. These data reinforce the body exhibit (nudity) makes the client more vulnerable, because it does not have to be a complete exposure to be meaningful. This can be identified in the following lines:

Tenho vergonha principalmente de homem [...] (sujeito nº 9)

Minha maior dificuldade é ter que tirar a roupa (sujeito nº 7)

I'm ashamed mainly of man [...] (subject no. 9)

My biggest difficulty is having to get undressed (subject no. 7)

 [...] is complicated [...] Because we're not used, this is the first time. So we get more shame, although that was not so much because it comes with a sheet and leaves only the place that needs to be exposed (subject, paragraph 13)

 [...] I feel shame when you have to take the bottom (subject, paragraph 14)

My embarrassment is at bath time, I cannot do it alone so I need the help of the nurse (subject, no. 16)

A study of 15 nurses who work in Intensive Care Unit (ICU) for adults, in Maringá-PR, reports that it is a challenge for the nursing care of client's privacy, it is clear also that the team does not know how to deal and circumvent problems involving the exposure of the body.  

In this same line of thinkers, another study with the participation of 34 patients in six hospitals in Maringá-PR, patients report that the touch and the exposure of the body are part of their intimacy and the team is not part of this sphere. It is clear the discomfort and discontent, even though some indirectly consider requiring the exposure and manipulation of the body.  

People who are healthy are able to satisfy their requirements of hygiene, although people sick, frail, need support to perform these routine activities. It should be noted that the speech of nursing values the importance of maintaining individuality during the provision of care.  

In another study involving 22 nursing professionals, who work in the ICU for over three years, in two hospitals in a city in the interior of Rio Grande do sul, they report that, during customer service, conservation measures taken by the team are determined based on imagination, because the client could be a family member, or even their own professional could be in reversed roles, moving from caretaker to the condition to be careful.  

We emphasize here the great importance that during procedures carried out by nursing staff, especially those in care that expose the body of the client, seek to preserve to the maximum their intimacies, trying thus minimize the awkwardness and provide safety, comfort and satisfaction with the service being provided, because privacy is a right of the client and a professional ethical commitment.

**Category 2: Invasion of personal space**

This category describes the area occupied by the patient's body in the hospital environment, being compromised their privacy physics in the presence of others, exposure may occur and manipulation of the body for the assistance provided. In this category, 65% of clients feel invaded in their personal space, while 35% are apathetic to the issue.

As regards the invasion of personal space, when nursing provides some care, which exposes the client's body, it was
noted according to the statements below, respondents prefer to be alone with someone from the nursing staff at the time to expose the intimacy or with any member of the family. The lines below confirm the above:

I'd rather be alone, I don't like anyone looking at me. Just me and the nurse (subject, paragraph 11)

it's always nice to be alone, there's no way, we share room with others (subject, paragraph 10)

Oh! [...] I'd rather be alone. Just me and God, we embarrassed, I ask to my nurse to ask my roommates for excuse and put the folding screen [...] (subject, paragraph 5)

No ... at the moment I prefer to stay with my mother. (subject, paragraph 18)

In a study with 30 elderly inpatients in units of medical and/or surgical clinic, in a public hospital in the interior of São Paulo (SP), the application of the Scale of Measure of sentiment against the Territorial and Personal Space Invasion shows that, when the patient feels invaded without necessity, appear discomfort, annoyance, anxiety and restlessness. It was noticed that customers feel humiliated, when they need to expose the body and need to be cleaned by a professional. 13

In the same study, customers demonstrate the dissatisfaction to maintain privacy in shared rooms, where other people and professionals have constant access. Customers express also expect more effort of the nursing staff in adopting ways that preserve their intimacy of the vision of others, especially when held in care that expose the body. In Brazil and in other countries, there are few people who have the privilege of hospitalization in individual rooms, factor that increases customer dissatisfaction with regard to the problem. 10

According to the study which involved 40 subjects admitted in Units of Clinical and Surgical Emergencies in a teaching hospital of the interior of the State of São Paulo-SP, customers report that the nursing staff exchange their clothes and also perform technical nursing procedures in intimate regions without using some folding screens. These situations trigger feelings of invasion of personal space, because the use of screens during the care essential constitutes a form of respect to privacy.14

Another study, whose sample was composed for 102 customers in all units of hospitalization of a Government general hospital in Ribeirão Preto-SP, reveals that the invasion of personal space and the territorial space of the client, unnecessarily, can lead to an indifference to their well-being and dignity, so it is important that the professional try to minimize these factors of invasion of space ensuring customer comfort.15

It is comprised in the lines of customers that personal privacy is something necessary. It is important that the nurse adopt measures, which provide comfort as, for example, the use of screens, asking for excuse to roommates, trying to minimize the invasion of intimacy during carrying out the procedures.

♦ Category 3: Interpersonal communication: a need to be followed by the nursing staff during the exhibition customer body

It was observed in this category the great importance of communication of nursing staff during care, giving the client the necessary guidelines on the procedures to be performed. This form of assistance shall send the client trust, respect and professional approach with the patient, contributing to their recovery.

Among the respondents, a little more than half, represented by 55%, showed satisfaction about the orientation service, 20% say they are not all professionals that guide and 25% reported dissatisfaction in the orientation of the nursing staff for the provision of care. Such reports may be confirmed in the lines below:

Usually the nurses guide but not all of them (subject, paragraph 4)

They give guidance, they have to give straight people-orientation, is our right [...] (subject, paragraph 6)

Thanks to God I always get guidance from all of them. They explain the
entire procedure, what good is everything (subject, paragraph 15)

[...]

Some guide me... other nurses I have to ask (subject, paragraph 11)

No, they just want to take my clothes off [...] you even question it. You ask for explanation of everything (subject, paragraph 20)

Study of 8 customers admitted in hospital wards from the ICU, shows that in order to have a quality of nursing care it needs to be concern about intensify guidance-related forms of the disease, treatment and procedures performed, explaining why and what should improve on his rehabilitation, in order to remove doubts, fears about what is unknown, contributing in this way to reduce stress factors, which can aggravate their emotional state and also their health.¹⁶

According to the study that participated in 7 nursing professionals who worked in the Intensive Care Unit of the Santa Casa de Misericordia de Pelotas-RS, identified the existence of gaps in the humanization of care. According to the professional reports, material conditions hamper and interfere with employees' feelings. It is necessary that the professionals develop emotional abilities and be able to make sensitized with the circumstances experienced in daily life, avoiding paying careful technical, but, to be prepared to provide humanized assistance.¹⁷

In an article reports that the care provided by nursing staff always entail a range of clients' values as to their own values. So it is important to understand that the ethical decision has to walk side-by-side in the care process.⁷

With the talks, it is understood the customer satisfaction to nursing orientation. They express the importance that the team makes when explaining the need to perform each procedure. It deduces that these professionals consider important performing care activities, guiding and informing the client about the assistance, thus creating a relationship of care, making the harmonious environment and respecting the limitation that each client faces in bed.

The results of this study enabled a reflection on the look which the client faces during the hospitalization, on the grounds of body exposure at the time of the caution, which is accomplished by nursing. The reactions manifested during physical and intimate exposure should be discussed by the nurse, seeking ways and attitudes to minimize them, particularly in the managerial field in the process of care.

It is clear that the maintenance of customer privacy is obstacle for nursing, so we emphasize the importance of a humanized care, treat the individual as being holistic, knowing hear, understand each other's feelings, pay attention to factors related to the physical environment and integrated to the disease, making the hospitalization less stressful and more comfortable. The client has a set of feelings, values, and cultures. It is necessary that the caregiver has a unified vision and articulate about these aspects, which are essential to their professional competence.

Nursing must sensitize, to understanding the individuality of each person, which will facilitate the recovery process. To advance in the care professionals must put themselves in the place of the other and drive their team to feel the authentic needs of hospitalized. The human essence is effective for nursing because she leads the professional in order to build a safer and less invasive.

We emphasize the ethical principle of professional, related to the behavior, which affect the completeness and individuality of customers. We believe this path is maintained, seeking professionals to offer love, compassion and respect to those who need their care.

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