

J Nurs UFPE on line. 2019;13:e242812 DOI: 10.5205/1981-8963.2019.242812 https://periodicos.ufpe.br/revist as/revistaenfermagem

ORIGINAL ARTICLE

MUSIC AS THERAPEUTIC AID FOR HOSPITALIZED CHILDREN* A MÚSICA COMO AUXÍLIO TERAPÊUTICO DE CRIANÇAS HOSPITALIZADAS

LA MÚSICA COMO AYUDA TERAPÉUTICA PARA NIÑOS HOSPITALIZADOS

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ABSTRACT

Objective: to analyze the repercussions of the use of music in the hospitalization process of children in a tertiary pediatric hospital. *Method*: this is a qualitative, descriptive, exploratory study through an interview with a semi-structured questionnaire to three hospitalized children, five parents and/or legal guardians and six health professionals, identified according to musical notes (DO, RÉ and MI). The data analysis process was performed by the Content Analysis technique. *Results*: music was found to be a lightweight technology capable of developing and reaching potentials in the daily life of the pediatric hospital. The musicality ends also empowering the health team in order to favor the consolidation of activities and the expansion of the value of care. *Conclusion*: it was identified that music mitigates suffering and integrates children and family members in a place that, for them, is unsafe and unknown, as well as captivates, engages and thrills. It is therefore suggested that such a strategy could serve as a model for other pediatric hospitals. *Descriptors*: Music; Terapeutics; Music Therapy; Hospitalization; Nursing; Hospitals, Pediatric.

RESUMO

Objetivo: analisar as repercussões da utilização da música no processo de hospitalização de crianças em um hospital pediátrico de nível terciário. *Método*: trata-se de um estudo qualitativo, descritivo, exploratório, por meio de uma entrevista com um questionário semiestruturado a três crianças hospitalizadas, cinco pais e/ou responsáveis legais e seis profissionais da saúde, identificados de acordo com as notas musicais (DÓ, RÉ e MI). Realizou-se o processo de análise dos dados pela técnica de Análise de Conteúdo. *Resultados*: verificou-se a música como uma tecnologia leve capaz de desenvolver e atingir potenciais dos integrantes da vida diária do hospital pediátrico. Acaba-se a musicalidade também empoderando a equipe de saúde de modo a favorecer a consolidação das atividades e a ampliação do valor do cuidado. *Conclusão*: identificou-se que a música ameniza sofrimentos e integra as crianças e familiares a um lugar que, para elas, é inseguro e desconhecido, bem como cativa, envolve e emociona. Sugere-se, desse modo, que tal estratégia possa servir de modelo a outros hospitais pediátricos. *Descritores*: Música; Terapêutica; Musicoterapia; Hospitalização; Enfermagem; Hospitais Pediátricos.

RESUMEN

Objetivo: analizar las repercusiones del uso de la música en el proceso de hospitalización de niños en un hospital pediátrico terciario. *Método:* este es un estudio cualitativo, descriptivo y exploratorio a través de una entrevista con un cuestionario semiestructurado a tres niños hospitalizados, cinco padres y/o tutores legales y seis profesionales de la salud, identificados de acuerdo con notas musicales (DO, RÉ y MI). El proceso de análisis de datos se realizó mediante la técnica de Análisis de Contenido. *Resultados:* se descubrió que la música es una tecnología liviana capaz de desarrollar y alcanzar potenciales en la vida diaria del hospital pediátrico. La musicalidad termina también empoderando al equipo de salud para favorecer la consolidación de actividades y la expansión del valor de la atención. *Conclusión:* se descubrió que la música disminuye el sufrimiento e integra a los niños y miembros de la familia en un lugar que, para ellos, es inseguro y desconocido, así como cautiva, involucra y emociona. Por lo tanto, se sugiere que dicha estrategia podría servir como modelo para otros hospitales pediátricos. *Descriptores:* Música; Terapéutica; Musicoterapia; Hospitalización; Enfermería; Hospitales Pesiátricos.

^{*}Article extracted of an Undergraduate Thesis << Music as a therapeutic aid in the hospitalization process in patients of a pediatric hospital in the Federal District >>. Paulista University. 2018.

INTRODUCTION

Music therapy is understood as an intervention method that helps in the promotion of mental health through musical experiences. It is considered as one of the fastest and most effective ways to promote the balance between the physiological and emotional state of the human being, bringing a physical and mental wellbeing.¹

It is known that the cognitive, cultural, bodily and affective aspects, musically created, unfold into the daily field, helping the subject in the potentialization of coping with the difficulties present in everyday life.²In this perspective, in addition to music being a way for patients to cope with adversity, stressful and traumatic events, it also contributes to welcoming and communicating with health professionals, constituting bonds and commitments that should guide intervention projects.³ It has also been pointed as a complementary therapeutic resource in the management and control of signs and symptoms, as well as in the field of communication, making care more humanized.4

In this perspective, it is emphasized that the musical sensation begins in the child, as an emotion of pure auditory pleasure, evolving to the integrative regions of the brain, such as brain reflexes, evaluative conditioning, emotional contagion, visual imagination, episodic memory and musical expectation, thus composing amplifying schemes that enable the child to verbalize their stresses, anxieties, fears and frustrations.⁵

Thus, it is noteworthy that, among the physiological results obtained with the musical intervention, there are changes in metabolism, adrenaline release, regulation of respiratory rate, changes in blood pressure, reduction of fatigue, muscle tone and increase of sensory stimuli, as well as reducing pain, stress and anxiety, promoting comfort, muscle relaxation and dignity to hospitalized children.⁴⁻⁵

Given this, the following question arises: "What is the opinion of children, parents and/or guardians and health professionals about music in the hospitalization process?".

It is noteworthy that studies of this nature are considered important, as they seek to understand subjective issues in the work organization processes that have musical therapy as an instrument. It becomes the initiative to provide a valuable and differentiated tool in the search for more humanization and interdisciplinarity of relevant care to broaden the scope of actions in child health.

Thus, it is hoped that, with the help of music, the space of hospitalization and interventions will become moments that refer only to the experience, not to suffering.6 Therefore, it is necessary to encourage research that raises the importance of the applicability of music in the hospitalization process.

OBJECTIVE

• To analyze the repercussions of the use of music in the hospitalization process of children in a tertiary pediatric hospital.

METHOD

This is a qualitative, descriptive, exploratory study with hospitalized children, parents and/or guardians of hospitalized children and health professionals in a tertiary pediatric hospital located in Brasília-DF, Brazil.

Inclusion criteria were: children admitted to the pediatric hospital for more than one week and in the age range from seven to 18 years old; parents and/or legal guardians of children admitted to the pediatric hospital and health professionals who work directly with children admitted to the pediatric hospital. All those who did not agree to participate in the study, as well as patients under the age of seven or over 18 years of age, were excluded.

All participants were explained and read for subsequent signing of the Free and Informed Consent Term (FICT) and/or the Consent Form, and participants could withdraw at any time from the research.

Afterwards, the study participants were identified according to the musical notes (DO, RÉ and MI), and the respective number assigned to the order of their interview to preserve the confidentiality and anonymity of the interviews: DO - children; RE - parents and/or legal guardians and IM - health professionals. Thus, three hospitalized children, five parents and/or legal guardians of hospitalized children and six health professionals participated in the study.

Data was collected from an interview using a semi-structured questionnaire. The contents of the interviews were recorded and transcribed faithfully.

The process of explanation, systematization and expression of message content was used through the content analysis proposal, namely: pre-analysis, material exploration, treatment of results obtained and interpretation.

The research project was submitted in order to comply with the guidelines of Resolution 466/2012 of the National Health Council, regarding research with human beings, initially, to the Research Ethics Committee (REC) of Paulista University (UNIP), the same being evaluated and approved by the opinion n° 2.966.104 CAAE 90411718.1.0000.5512. The project was later

analyzed and approved by the CEP of the Foundation for Health Sciences Teaching and Research (FEPECS), through Opinion No. 3,124,610, CAAE 90411718.1.3001.5553.

RESULTS

From the analysis of the testimonies, it was observed that the use of music during the hospitalization process of children brings benefits ranging from comfort to physiological repercussions, as follows.

One of the main powers of music therapy is to create a world within children. So, when she has in the outside world, a demand for her in the health area, be it emotional or be relational [...], music therapy helps the child to strengthen in her inner world so that she can have solutions for the demands of the outside world. So, I say this: that the development of subjectivity empowers the person to work with the demands of the external world. (MI6)

The song teaches me how to have fun, to contract (in this case, to relax) with it, to help me to sing much nicer and to help me to sing much nicer and much cuter and more detailed. (DO3)

Treatment is it? The music is? It helps. She is good to me. (DO1)

Happy! (DÓ2)

Thus music greatly alters the mood of boys. So no matter how discouraged and sad they are, when someone comes, singing or playing, they get happier. And so what I observe in all this time of treatment and working with the children of oncology is that their mood directly influences the treatment. So, this way, the children who are so much livelier, so much happier, they recover better and the music changes their mood. (...) they feel less sick and complain less about pain. So this is very visible in their daily lives. It changes completely and the complaints diminish and they respond better to treatment [...]. This is how music helps in their therapeutic process. (MI1)

It was acknowledged that the reach of music also reached the family level, according to the testimonials, and people who live with hospitalized children on a daily basis perceive the development and a gradual improvement, both physical and psychological, in response to treatment.

The coordination part too, because they mess with instruments, right? The part of communication, which is what I told you, which is one of the things we saw most improving was communication. Try to communicate with people [...]. (RE1)

[...] there are children who cannot cope with writing. In my son's case, he can't handle writing. His problem is more in motor coordination, so he can't handle it right and found a development in music. In playing, the screen found an instrument to develop and help, right? Thank God, I saw it in him! (RE4)

Oh, I think they make them more relaxed because when he comes here, he becomes tense, right? They only have exams, consultations [...] that is already an alternative to make children more interactive [...]. He gets calmer, comes to the hospital with more cheer. Before that, he didn't like to come, but when he talks about music therapy [...]. (RE2)

[...] the music itself gives children an opportunity to suddenly, so-so, go through the cancer process [...] may have a way of easing their tensions. It's a way for them to release this tension they have, a way for them to express their feelings. (RE3)

It has several contributions and one of them I speak for my son, which is his way to socialize. He, when he started, didn't even babble he babbled. After he started music therapy, he started trying to talk more and he can already speak a few words. Not to mention even socializing with people, because he is much quieter and not afraid to be around people. Even being alone. When he does music therapy, he is alone with the music therapist. And nowadays he has no such fear and formerly had. (RE5)

It was also verified that the adaptation to the hospital environment is essential for the patient's adherence to therapy, but an environment conducive to this is essential to create a bond between the members of this hospitalization process (patient, family and health professionals), as observed in the following statements.

The hospital environment itself is no longer such a hostile environment, but we try to bring better hospitality to this patient and we also try to bring a more playful environment to the child because their desire was to be at home. Since she can't, due to treatment, she needs something to interact with. (MI4)

This is one of the hospitals he's not afraid of and he even likes to come here. So, the interaction with people in general at the hospital is very good and it ends with us as well. We can understand him more. He was a very traumatized child because he was practically living in the ICU. So we had a very long process of getting him to adapt to going to a hospital and coming here too. (RE1)

It's good because we feel a support. People are very clear and explain. They try to help in the best way. (RE2)

Music is a link and ends up being a link because we at Nursing also participate. When it's a song we know, we help sing too and we also participate in the whole process, right? So unite us! (MI3)

When the professional likes it, he goes and goes into the dance. Then the patients seem to see you at that moment not as a nurse, but as a normal person who is having fun there. So change the view a little bit like this. (MI5)

It is pointed out that health professionals reported that music, while performing procedures, contributes to the improvement of the care

provided to children during the hospitalization process, as follows.

They get calmer and get distracted. They rely more on the professional they are doing. When you start singing, when you turn on your cell phone and put on a little song for them to listen to, they get more relaxed and they end up trusting and feeling safer. (MI1)

We even had a little tablet that we used to just be playing music to them at the time of puncture, as this distracts the child and eases the pain. So while the mother was there holding the little tablet with the little song or video, we were preparing the child to puncture. The experience I have with music at the time of procedure is this and it helped and softened a lot. (MI2)

It greatly interferes with the patient's calmness. She brings a calm, especially during the procedure. The patients can interact with the music therapy staff and it's as if their attention is focused on the music and not on the procedure itself, right? [...]. Distract, distract this child more from the suffering or trauma that the procedure may bring, turning their attention and the whole interaction to the music. (MI4)

Sometimes in pediatrics we do it when the child is very young. We use some music to sort of distract the child while we do the procedures. She complains, but the music temporarily distracts the child. Will she feel the pain of the needle? It will, but it is less traumatic with music and we use it a lot. (MI5)

DISCUSSION

It is known that the human being, when experiencing a process of illness, may perceive reality in a different and unique way. There are several important structural and emotional changes involving sensations, feelings, pains and uncertainties to integrate their existence, as well as new relationships and interrelations, impacting, directly or indirectly, their quality of life. Thus, any disease process experienced in childhood that spends long periods of treatment, frequent medical returns or even recurrent hospitalizations can lead to serious complications in child development.⁷⁸

Thus, when understanding the impact of hospitalization on children, potentiating measures to improve children's health are essential. Thus, in recent years, music in hospitals is consolidating its presence, which can be understood as one of the integrative and complementary therapeutic strategies directed to care through the embodiment of hospital spaces.⁹

It is noteworthy that the use of this strategy in hospitals portrays the addition of nonpharmacological agents as pathfinders of care, as well as the term music therapy, whose intention is the elaboration of a care plan based on music, aiming at meeting the physical, social and psychological needs. 10

Scientifically, music has been found to influence and affect the cranial nerves, as well as hormone levels such as cortisol, because it is an element that stimulates the ability to retain and memorize, improving attention and concentration. Touch, hearing, breathing, circulation and reflexes are physically activated. 3-7

Thus, it is stated that some research has identified that the physiological effects of music involve sensory, hormonal and physio motor reactions, such as changes in metabolism, adrenaline release, respiratory rate regulation, changes in blood pressure, reduced fatigue, muscle tone and raising the threshold of sensory stimuli, improving attention and concentration. It is also known that it is an excellent therapeutic tool that is easy to use, affordable, has no side effects and can be used in various contexts and for various diseases. 11-7

In a Brazilian study, the efficacy of musical intervention in reducing the average anxiety scores and in the statistical and clinical reduction of systolic and diastolic blood pressure, as well as pulse rate and respiratory rate, has been demonstrated. These results point to the possibility of having a low-cost adjunctive intervention that enables greater well-being and quality of life for patients.⁴

In this sense, music is presented as a therapeutic possibility that can be conceived as a light technology, since it influences implications for the health team and stimulates the expression of subjectivity, reinserting broad care as the core of professional practice.⁶

Thus, music is confirmed as a universal art form, revalidating its fundamental role of putting the patient in direct contact with his emotions, the sensations he brings and situations that arise. Thus, nonverbal expression via music can allow, with the health team, an emptying of anguish, pain and feelings, exhausting their apprehensions about disease, life and death, fostering perspectives of a transformative performance.⁶

From the testimonies, music was verified as a therapeutic intervention capable of developing and reaching potentials of the members of the daily life of a hospital. Therefore, as limitations of this study, the qualitative approach is not able to determine the statistical efficacy of clinical repercussions in hospitalized children from musical interventions. Thus, it is necessary to carry out clinical trials and systematic reviews on the subject in order to expand the current knowledge on the subject, since most publications are inferior to the year 2015.

CONCLUSION

It is concluded that playfulness plays an important role in the hospitalization process and refers to mental and emotional health as an integral part of general health. Therefore, this research was based on the importance of music in the treatment of pediatric patients, since it is a resource that financially does not reveal to be an impediment, much less in the administrative situation, since the professionals themselves constantly use it, and support this practice, as well as policies that advocate humanization.

It was identified by the testimonies that music mitigates suffering and integrates children and family members in a place that, for them, is insecure and unknown, as well as captivates, involves and thrills. In this sense, musicality also ends, empowering the health team so that it favors the consolidation of activities and the expansion of the value of care that can contribute to the quality of life at work.

It is noteworthy that this study provides new spaces for the applicability of music in the pediatric hospital environment, in addition to knowing the opinion of the patient, guardians and professionals on the subject. It is therefore suggested that it may serve as a model for other pediatric hospitals.

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Submission: 2019/09/04 Accepted: 2019/10/28

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