

# Humanization in multidisciplinary care in times of a COVID-19 pandemic

Humanização no cuidado multidisciplinar em tempos de pandemia por COVID-19

Humanización en la atención multidisciplinaria en tiempos de pandemia de COVID-19

## RESUMO

**Objetivo:** Identificar na literatura disponível, estudos que abordam sobre a humanização no cuidado da equipe multidisciplinar aos pacientes com Covid-19. **Métodos:** Trata-se de um estudo de revisão integrativa, realizada no ano de 2022, seguindo-se 6 etapas preconizadas. Para a elaboração da questão norteadora, utilizou-se o acrônimo PICOT, com isso, a pergunta que norteou o estudo foi: Como está sendo o ato de humanizar dos profissionais de saúde em tempos de pandemia do Covid-19. Realizou-se uma pesquisa bibliográfica, por meio das bases de dados PUBMED, SCOPUS, SciELO, Periódicos CAPES e a BVS, utilizando-se descritores obtidos nos Descritores em Ciências da Saúde (DeCS), combinados por meio de operadores booleanos como AND e OR, sendo utilizados para a seleção dos estudos alguns critérios de inclusão. Após isso, realizou-se uma matriz de síntese para a sumarização dos resultados obtidos. **Resultados:** Foram encontrados nas bases de dados 145 estudos, sendo selecionados apenas 5 após a leitura na íntegra. **Conclusão:** Destaca-se que foi possível identificar significativo avanço na humanização do atendimento médico/hospitalar, possibilitando um maior diálogo entre profissional e paciente, acolhimento e resolução de problemas.

**DESCRIPTORES:** Humanização, Equipes de Saúde, Pandemia por COVID-19

## ABSTRACT

**Objective:** To identify, in the available literature, studies that address humanization in the care of the multidisciplinary team for patients with Covid-19. **Methods:** This is an integrative review study, carried out in 2022, following 6 recommended steps. For the elaboration of the guiding question, the acronym PICOT was used, with this, the question that guided the study was: How is the act of humanizing health professionals in times of the Covid-19 pandemic. A bibliographic research was carried out through the databases PUBMED, SCOPUS, Scielo, CAPES Periodicals and the VHL, using descriptors obtained from the Descriptors in Health Sciences (DeCS), combined using Boolean operators such as AND and OR, and some inclusion criteria were used for the selection of studies. After that, a synthesis matrix was carried out to summarize the results obtained. **Results:** 145 studies were found in the databases, and only 5 were selected after reading them in full. **Conclusion:** It is noteworthy that it was possible to identify a significant advance in the humanization of medical/hospital care, enabling greater dialogue between professional and patient, reception and problem solving.

**DESCRIPTORS:** Humanization, Health Team, Covid-19 Pandemic..

## RESUMEN

**Objetivo:** Identificar, en la literatura disponible, estudios que aborden la humanización en el cuidado del equipo multidisciplinario a pacientes con Covid-19. **Métodos:** Se trata de un estudio de revisión integradora, realizado en 2022, siguiendo 6 pasos recomendados. Para la elaboración de la pregunta orientadora se utilizó el acrónimo PICOT, con esto, la pregunta que orientó el estudio fue: ¿Cómo es el acto de humanizar a los profesionales de la salud en tiempos de la pandemia de la Covid-19? Se realizó una búsqueda bibliográfica a través de las bases de datos PUBMED, SCOPUS, Scielo, CAPES Periódicos y la BVS, utilizando descriptores obtenidos del Descriptores en Ciencias de la Salud (DeCS), combinados mediante operadores booleanos como AND y OR, y se utilizaron algunos criterios de inclusión. para la selección de estudios. Posteriormente, se realizó una matriz de síntesis para resumir los resultados obtenidos. **Resultados:** se encontraron 145 estudios en las bases de datos, y solo 5 fueron seleccionados después de leerlos en su totalidad. **Conclusión:** Se destaca que fue posible identificar un avance significativo en la humanización de la atención médico/hospitalaria, posibilitando mayor diálogo entre profesional y paciente, recepción y solución de problemas.

**DESCRIPTORES:** Humanización, Equipos de Salud, Pandemia COVID-19

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**INTRODUCTION**

**W**ith the discovery of the SARS-CoV-2 virus, which causes Covid-19, at the end of 2019, in the city of Wuhan, China and the high capacity of mortality worldwide, in 2020 it was declared a pandemic by the World Health Organization (WHO).<sup>1</sup> Thus, professionals face risks daily when providing care to patients.<sup>2</sup>

In this way, humanistic care has been implemented in the care of patients and their families, providing greater reception and comprehensive care, using the National Humanization Policy (PNH - Política Nacional de Humanização) for its implementation.<sup>3,4</sup>

It is evident that the implementation of the National Humanization Policy, which initially took place in 2003, enabled an improvement in the quality of care provided to the patient, making the health process

occur in an articulated and systematized way, strengthening interaction between professional and patient.<sup>5</sup>

In addition to providing greater dialogue, humanization allows the professional to understand what the patient's needs are at that moment, ensuring the exchange of knowledge between the team, seeking greater efficiency in solving problems.<sup>6</sup>

It is noteworthy that the implementation of humanized practices by professionals who work on the front line of Covid-19, guarantee a greater dialogue between the team, patients and their families, seeking to discuss the stressors and experiences resulting from the emergence of the disease. In addition, it is worth noting that humanized care aims to demonstrate the importance that a support network has in relation to the patient's recovery process.<sup>7</sup>

It is noteworthy that humanization goes far beyond the cure of a disease, being directly linked to the construction of bonds,

which occur through social interaction between professional and patient, dialogue and active listening. Therefore, the importance of the multidisciplinary team in this care is highlighted, emphasizing humanization during pandemic times, ensuring an involvement and understanding of these patients in the health and disease process.<sup>8</sup>

Therefore, it is necessary that health professionals are able to deal with stressors that arise in the midst of their work routine, seeking strategies to solve problems, such as the techniques used by Hildergard Peplau, based on the Theory of Interpersonal Relations, which aims at professional-patient interaction, in which its main purpose is to provoke changes capable of positively assisting in the patient's recovery.<sup>9</sup>

Despite the challenging scenario that included overcrowded hospitals and ICUs, humanization in care in all areas was still fundamental: from primary care to critical

life support. So that in this way, the psychological damage resulting from the pandemic would be minimized to the patient. With this, the object of the study was: To identify, in the available literature, studies that address humanization in the care of the multidisciplinary team for patients with Covid-19.

## METHODS

The integrative review study was carried out in January 2022, built through 6 recommended steps, the first step being identification of the theme and the guiding question of the study, the second stage refers to the establishment of inclusion and exclusion criteria for the selection of studies and then the third stage, which is about the identification of pre-selected and selected studies, the fourth and fifth steps, which refer to the categorization and analysis of the data obtained and finally the presentation of the results.<sup>10</sup>

For the elaboration of the guiding question, the acronym PICOT was used, the target audience (P), patients with Covid-19, the intervention (I), refers to the humanization in the multidisciplinary care provided to the patient affected by the disease, the comparison (C), does not apply, the outcome/outcomes (O), are the implementations of humanized practices in patient care with Covid-19 and the time (T), during the Covid-19 pandemic. In view of this, the question that guided this study was: How is the act of humanizing health professionals in times of a pandemic by Covid-19.<sup>11</sup>

For data collection, a search was carried out in January 2022, by a researcher, independently, through the databases PubMed, SCOPUS, Scientific Electronic Library Online (SciELO), Portal of Periodicals of the Coordination for the Improvement of Higher Education Personnel (Periódicos CAPES) and Virtual Health Library (VHL), using descriptors obtained from the Descriptors in Health Sciences (DeCS), combined through the Boolean operators AND and OR, such as: “Humanization of Assistance (Humaniza-

ção da Assistência)” OR “Humanization (Humanização)” AND “COVID-19” OR “Pandemics by COVID-19 (Pandemias por COVID-19)” AND “Health Teams (Equipes de Saúde)”.

For the selection of articles, some inclusion criteria were used, such as: full articles, published in Portuguese, English and Spanish, from 2019 to 2022 and that addressed the guiding question of the study. Thus, incomplete and duplicate articles, theses, dissertations, editorials, comments, experience reports and literature reviews were excluded.

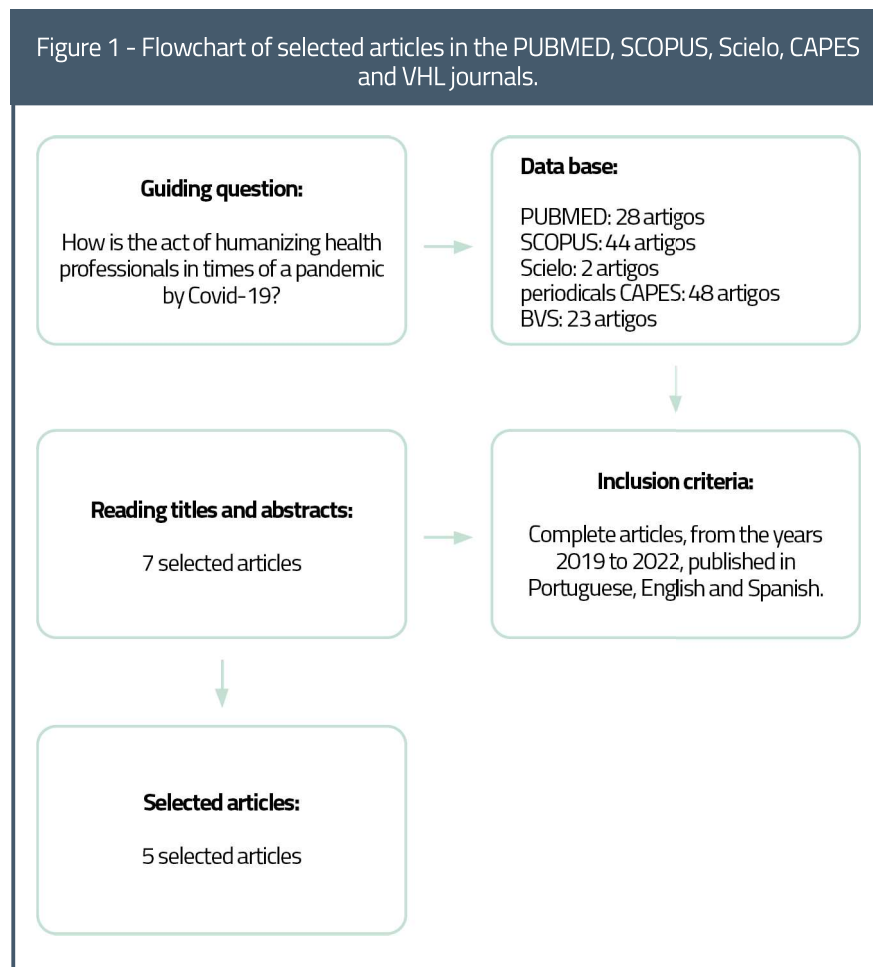
The selection of articles occurred through the reading of the titles and abstracts in full, by two researchers, excluding articles that at the time of the research were in

more than one database, studies unavailable for reading and those that did not address the guiding question of the study, with no disagreement between the selected studies. Then, a synthesis matrix was elaborated for the categorization of the selected studies.

## RESULTS

145 articles were found in the PUBMED, SCOPUS, Scielo, CAPES Periodicals and VHL databases, 28 from PUBMED, 44 from SCOPUS, 2 from Scielo, 48 from Periodicals CAPES and 23 from the VHL. After reading titles and abstracts, seven articles were selected. Then, the articles were read in full, by an author, inde-

Figure 1 - Flowchart of selected articles in the PUBMED, SCOPUS, Scielo, CAPES and VHL journals.



Source: Barbosa ACS et al12. (2021)

Table 1- Identification of selected articles in the databases, methodology used by the authors and synthesis of the results, obtained through the PUBMED, SCOPUS, SciELO, CAPES and VHL Periodicals, in the year 2022.

TÍTULO	AUTOR(ANO)	OBJECTIVE	OUTLINE	NÍVEL DE EVIDENCIA	RESULTS
SSpiritual care in critically ill patients during COVID-19 pandemic	DDe Diego-cordero R, et al. (2021)	To investigate the perceptions and attitudes of nurses working in intensive care units and emergency services in Spain about the spiritual care provided to patients and families during the COVID-19 pandemic.	Qualitative study	Level of evidence V	It was evidenced that spirituality helps these patients in coping with diseases and provides an improvement in the relationship between professional and patient.
Humanizing intensive nursing care for people with COVID-19 (Humanizando a assistência intensiva de enfermagem a pessoas com COVID-19)	Silva Junior SV, et al. (2021)	Understanding the impact of music in intensive care for COVID-19 as an instrument for humanizing care from the perspective of care nurses.	Qualitative study	Level of evidence V	The participants of this study highlighted that music therapy refers to an important instrument for the recovery of patients with COVID-19, as music provides feelings of humanization, relieves stress and causes good mood.
Contribution of the humanitude care methodology to the management of emotions in the pandemic. (Contributo da metodologia de cuidado humanitude para a gestão das emoções na pandemia.)	Dos Santos ATD, et al. (2021)	To describe the emotions perceived by the management of 6 residences for the elderly in the period of confinement, due to the COVID-19 pandemic, and to identify the contribution of the Humanitude Care Methodology (MCH) to the management of these emotions.	Descriptive multihull study with a qualitative approach	Level of evidence V	Destaca-se que a implementação da Metodologia de Cuidado Humanitude (MCH) amenizam sentimentos negativos provocados pela pandemia por COVID-19 e potencializando sentimentos positivos.
Gestión de la comunicación de los pacientes hospitalizados, asilados con sus familias por la COVID-19	Avellaneda-Martínez S, et al. (2020)	Describe the process designed to facilitate communication between patients hospitalized and isolated by COVID-19 with their families, within the hospital's quality and humanization plan.	Qualitative study	Level of evidence V	The use of Communication and Information Technologies (ICT) was evidenced, for the communication of patients with their families during isolation, as they refer to tools that alleviate feelings of loneliness, in addition to making the hospital a more humanized environment, as it enables socialization.
Acupressure therapy and Liu Zi Jue Qigong for pulmonary function and quality of life in patients with severe novel coronavirus pneumonia (COVID-19): a study protocol for a randomized controlled trial	Zhang S, et al. (2020)	To evaluate the effectiveness and advantages of Traditional Chinese Medicine Rehabilitation (TCMR) to treat patients with severe Covid-19.	Randomized controlled clinical trial	Level of evidence II	It is worth mentioning the performance of Liu Zi Jue Qigong exercises and acupressure therapy in patients diagnosed with COVID-19. They refer to actions that improve the clinical symptoms and physical and mental health of these patients.

Source: Barbosa ACS et al12. (2021)

pendently, totaling five selected articles, which are shown in Figure 1.

It should be noted that of the five articles selected, three are from the year 2021

and two from the year 2020, with two published in English, two in Portuguese and one in Spanish. Regarding the design of the selected studies, four studies have a

qualitative approach and one is a randomized controlled clinical trial.

Soon after, a synthesis matrix was prepared for the construction of the discussion



categories, containing: title, author, year, objective, design, level of evidence and results, as shown in Table 1.

## DISCUSSION

The pandemic scenario brought many insecurities and fears on the part of health professionals and patients affected by the disease, due to the high number of deaths, scarcity of resources, complexity and severity of the disease that led to an environment of insecurity, fear and anxiety, which highlights the importance of humanized care.<sup>13,14</sup> No matter how great the access to available hard technologies, these are not capable of replacing human contact, sensitivity, attention and care. In this sense, humanization in the hospital environment is essential for quality care.<sup>15</sup>

Light technologies are fundamental for health practice, being considered a mechanism for humanization in care, bringing personal values and understanding of the true meaning of care. Humanization is a subjective process that implies the autonomy of the subject and his ability to act in relationships, centered on patients, family members and professionals<sup>13,16</sup> Therefore, it is extremely important that professionals are trained to know and use the main humanization strategies in the care of patients and their families.<sup>16</sup>

A qualitative study carried out in Spain demonstrates that spirituality is a humanization mechanism that can provide benefits, when put into practice in patient care, but many professionals experience difficulties, due to several factors such as: lack of understanding, fear of imposing one's beliefs, preferences for biological issues and lack of training. In addition, during the pandemic, work overload, insufficient time and high professional-patient relationship made it difficult to implement humanized practice.<sup>14</sup>

Another mechanism that can be used as a humanization strategy is music therapy. Therapy through music presents itself as a mechanism of the humanization process in nursing care, aiming at both the ambience and the care provided to patients. In this

way, the nursing professional putting this tool into practice will be able to reduce the patient's stress and anxiety, in addition to providing a more peaceful and pleasant work environment.<sup>17</sup>

Communication is a humanization strategy, when performed effectively between professional, patient and family.<sup>16</sup>

**It is noteworthy that the implementation of humanized practices by professionals who work on the front line of Covid-19, guarantee a greater dialogue between the team, patients and their families, seeking to discuss the stressors and experiences resulting from the emergence of the disease.**

In this sense, due to the pandemic, it was necessary to use technological tools to facilitate communication around the world. A hospital in Spain carried out research on the subject, providing communication through video calls between patients and family members, in addition to offering medical news from professionals to family

members, during social isolation, being beneficial for patients and their families.<sup>13</sup>

Traditional Chinese medicine is characterized by a medical system created thousands of years ago in China. Its language symbolically portrays the laws of nature, valuing their interrelationship, aiming at integrality. It has as a form of treatment several modalities such as: acupuncture, medicinal plants, diet therapy, body and mental practices.<sup>18</sup>

Acupressure is a non-invasive treatment, defined by pressing the acupuncture points with the hands, aiming to achieve clinical efficacy. In addition, Liu Zi Jue Qi-gong exercises have also been widely used in pulmonary rehabilitation training; These exercises not only relieve symptoms of shortness of breath, but also have benefits in mental illness, which aids in the recovery of patients with Covid-19.<sup>19</sup>

These clinical methods of Traditional Chinese Medicine Rehabilitation (TCMR) can increase respiratory muscle strength and endurance to relieve shortness of breath. In addition, during the technique, patients are focused on themselves, which can help relieve anxiety, stress and tension, harmonizing the environment in which professional and patient find themselves.<sup>15,19</sup>

## CONCLUSION

Humanization in multidisciplinary care has become essential in the pandemic scenario. It is noteworthy that the deaths and the spread of the disease in different regions of the world, led to the development of negative feelings, such as fear and loneliness. Several strategies were used for effective humanization in care, from more common practices such as adopting effective and reassuring communication and welcoming patients and families, to innovative practices.

However, the main limitations of the study refer to the scarcity of studies that address the humanization in multidisciplinary care in patients with Covid-19, highlighting the need to develop other studies related to the theme.

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