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RESEARCH

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MUSIC AS A HEALTH PROMOTER IN THE SURGERY WAITING ROOM: COMPANIONS' PERCEPTIONS

Música como promotora da saúde na sala de espera de cirurgia: percepções de acompanhantes

La música como promotora de salud en la sala de espera de cirugía: percepciones de los acompañantes

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ABSTRACT

Objective: to understand the perceptions of companions awaiting news from their loved ones who are undergoing surgery, about the use of music as a strategy to promote health in the hospital. **Method:** a descriptive, exploratory, qualitative study, based on the theoretical assumptions of Health Promotion, with the participation of 15 companions who were waiting for news from their loved ones in a waiting room in the hospital environment. Semi-structured interviews were carried out and the data were organized and analyzed according to content analysis. **Results:** the participants highlighted some possibilities to promote health in the hospital surgery waiting room, such as music, which provides distraction from the worrying reality, happiness, life, joy, hope, good feelings, cheer and tranquility. **Final considerations:** music stands out as a technology to promote health, arousing positive feelings during musical interventions in the hospital. Therefore, it is necessary to expand the discussion and use of music as a strategy to promote health in the hospital environment.

DESCRIPTORS: Music; Health promotion; Nursing; Waiting rooms; Operating room nursing.

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RESUMO

Objetivo: compreender as percepções dos acompanhantes que aguardam notícias de seus entes queridos que estão em cirurgia, sobre a utilização da música como estratégia para promover saúde no hospital. **Método:** estudo descritivo, exploratório, qualitativo, fundamentado nos pressupostos teóricos da Promoção da Saúde, com a participação de 15 acompanhantes que aguardavam notícias de seus entes queridos em uma sala de espera no ambiente hospital. Realizaram-se entrevistas semiestruturadas e os dados foram organizados e analisados conforme análise de conteúdo. **Resultados:** os participantes destacaram algumas possibilidades para promover saúde na sala de espera de cirurgia do hospital, como a música, a qual proporciona distração da realidade preocupante, felicidade, vida, alegria, esperança, sensações boas, ânimo e tranquilidade. **Considerações finais:** a música destaca-se como tecnologia para promover saúde, despertando sentimentos positivos durante as intervenções musicais no hospital. Portanto, faz-se necessário ampliar a discussão e utilização da música como estratégia para promover saúde no âmbito hospitalar.

DESCRITORES: Música; Promoção da saúde; Enfermagem; Salas de espera; Enfermagem de centro cirúrgico.

RESUMEN

Objetivo: comprender las percepciones de acompañantes en espera de noticias de sus seres queridos que están siendo operados, sobre el uso de la música como estrategia de promoción de la salud en el hospital. **Método:** estudio descriptivo, exploratorio, cualitativo, basado en los presupuestos teóricos de la Promoción de la Salud, con la participación de 15 acompañantes que esperaban noticias de sus seres queridos en una sala de espera del ambiente hospitalario. Se realizaron entrevistas semiestructuradas y los datos fueron organizados y analizados según el análisis de contenido. **Resultados:** los participantes destacaron algunas posibilidades para promover la salud en la sala de espera de cirugía hospitalaria, como la música, que proporciona distracción de la realidad preocupante, alegría, vida, alegría, esperanza, buenos sentimientos, alegría y tranquilidad. **Consideraciones finales:** la música se destaca como tecnología para promover la salud, despertando sentimientos positivos durante las intervenciones musicales en el hospital. Por lo tanto, es necesario ampliar la discusión y el uso de la música como estrategia de promoción de la salud en el ámbito hospitalario.

DESCRIPTORES: Música; Promoción de la salud; Enfermería; Salas de espera; Enfermería de quirófano.

INTRODUCTION

The hospitalization process brings transformations in people's routine, and emotional need may emerge. Furthermore, feelings of fear, anguish, and insecurity affect the hospitalized individual who is in a strange place. These feelings tend to worsen when the individual needs a surgical procedure.¹

However, it is not only the hospitalized individual who experiences these feelings, but also the person accompanying him/her, who is the person who is willing to support him/her.² It is noteworthy that during the trans-operative period, the companion is unable to enter with his/her loved one, and it is necessary to wait for news in the waiting room. This waiting period often generates feelings of helplessness, fear, and uncertainty.¹

Thus, health professionals who work in the operating room need not only to assist the patient in surgery, but also to care for the companions who are anxiously waiting for news. Since they are anxious for health professionals to provide a space for understanding and welcoming so that they can demonstrate their insecurities while waiting for news.³ Therefore, the need to promote the health of these people in the hospital waiting room is perceived.

At the first International Conference on Health Promotion, in 1986, the Ottawa Charter emerged, which considers the expanded concept of health and its determinants, aiming to improve the quality of life of the population and equity within the health system.⁴ In this sense, in 2006, Brazil created the Política Nacional de Promoção de Saúde (PNPS), reformulated in 2014

and revoked by the Consolidation Ordinance in 2017, aiming to ensure the integrality, autonomy, and uniqueness of the individual, the collectivity, and the territories in which they are inserted. The PNPS highlights the articulation with other public policies, seeking to face the determinants/conditioners of health, to improve the population's ways of living.⁵

Therefore, promoting health is extremely relevant, since it can expand the possibilities of improving the population's health through ways that do not focus on the disease. Moreover, in the Charter, among the strategies to promote health is the creation of healthy environments.⁴ Therefore, health promotion must be carried out in various sectors and in different ways in order to maintain favorable environments.

One of the possible strategies to promote health in the hospital environment is through music. This can be considered a soft technology of care, presenting benefits in several scenarios, such as reducing anxiety, promoting well-being, helping in palliative care, and reducing behavioral symptoms in psychiatric patients.⁶

In view of the above, the following research question emerged: What are the perceptions of companions who are waiting for news about their loved ones who are in surgery, about the use of music as a strategy to promote health in the hospital? It is noteworthy that the studies involving the benefits of music in the hospital environment are more focused on the treatment and recovery of hospitalized people, which justifies the relevance of this study, which focuses on music as a health promoter.⁷ Added to this, the scientific evidence on the use of music in the hospital environment can subsidize practices for health care and nursing,

especially for companions waiting for news in the waiting room of the surgical center. Thus, the objective of this study was to understand the perceptions of companions waiting for news of their loved ones who are in surgery, about the use of music as a strategy to promote health in the hospital.

METHODS

This is a descriptive, exploratory study, of qualitative approach, based on the theoretical assumptions of Health Promotion.⁸ The research setting was a public hospital in Southern Brazil, which assists about 1.3 million people a year, covering the cities of Western Santa Catarina, Southwestern Paraná, North and Northwestern Rio Grande do Sul.

Fifteen companions who were waiting for news of their loved ones in a waiting room of the hospital's surgical center participated in the study. Inclusion criteria were: companions and family members waiting for their loved ones in the waiting room of a public hospital in the west of Santa Catarina, who were physically and communicatively able to answer the questions. Companions who did not receive any musical intervention in the hospital environment and people under 18 years of age were excluded from the study.

This study originated from the actions of an extension program of the undergraduate nursing course of a public university in southern Brazil, composed of eight students and two teachers. This extension program aims to promote the health of hospitalized people, their families, and professionals who work in the hospital environment, using music as a technology of care. The musical intervention occurs weekly in the hospital's rooms, corridors, and waiting rooms, with songs about joy, love, friendship, hope, perseverance, and faith, with the support of violin, ukulele, and percussion.

Data collection occurred after the musical intervention, in the waiting room of the surgical center, by means of semi-structured interviews, with the support of a script containing questions about the experience of hospitalization, the possibilities of promoting health in the hospital, the meanings of the use of music as a health promoter in the hospital environment, and the sensations aroused by the musical intervention. The interviews were carried out in the waiting room itself, conducted by the authors, being recorded and transcribed with the help of smartphones, with due authorization from the participants.

To organize and interpret the data, content analysis was used, in the thematic modality, which is presented in three phases: 1) pre-analysis: the transcribed data was read, seeking to approach the initial objective, with hypotheses of the elements found in the collection; 2) coding of the data: the writing of textual fragments was developed, in order to approach the meaning of the research; 3) categorization and subcategorization: the material was classified and interpreted, with the organization of theoretical categories, seeking to meet the research objectives.⁹ After that, two categories emerged, which will be presented below.

Regarding the ethical aspects, it is noteworthy that data collection began after the approval of the matrix project in the Research Ethics Committee of a Federal University in Southern Brazil, with opinion number 4.934.184, on 09/09/2021. Before the beginning of data collection, the study objectives were first shared and the Informed Consent Form was presented for signature by the participants. To ensure anonymity, the companions were named by musical instruments, these being: Acoustic Guitar, Guitar, Ukulele, Cavaquinho, Bandolin, Double Bass, Banjo, Violin, Piano, Xylophone, Trumpet, Flute, Drums, Pandeiro, and Viola.

RESULTS

The participants of the study were 9 females and 6 males, between 23 and 53 years old, being children, parents and spouses of people admitted for surgical procedures. The participants had different professions, such as housewife, hairdresser, teacher, mechanic, farmer, gardener, among others. They waited to hear from their loved ones in the waiting room of the surgical center for two to twelve hours.

After data organization and analysis, two categories were identified: 1) Possibilities to promote health in the hospital surgery waiting room; 2) Music as a health promoter in the surgery waiting room.

Possibilities to promote health in the hospital's operating room

In this first category, ways to promote health in the OR waiting room environment were mentioned. The use of personal protective equipment was mentioned, as well as compliance with social distancing and respiratory hygiene, due to the pandemic situation and because it is a contaminated environment. Moreover, they talked about the need to work on psychological health, through contact with other people:

Taking the necessary precautions, using the mask, taking care, taking all kinds of care because here is an environment that is full of bacteria and diseases. So, we have to take care to prevent it. (Xylophone)

Look, I think that I collaborate the way I can, keeping hygiene, keeping distance and talking about psychological health. This is what we were able to see here today, the contact with people, helping them in some way, reassuring them. (Flute)

In addition, companions also cited prayer, clowning, Animal-Assisted Therapy (AAT), good care, and music as ways to promote health within the hospital environment:

Going to church up there to pray, these are things that you do to cheer up a little, to take that negative thought out of your head. (Violin)

These days I was seeing that the staff was bringing the animals inside the hospital for the children, for adults too, it promotes a moment of distraction, or even you guys, when

they were singing, a moment that distracts you so you don't stay focused on what you are doing here. (Guitar)

Look, besides the good service, this kind of work that you just did, that I was anxious about, I paid attention to you singing and it already gave me a relief. Just as I saw the other time that I accompanied the mother, the clowns working, how they cheer people up, the children laughing. (Cavaquinho)

In addition, it was discussed how the simple act of dialoguing, orienting and receiving good news, enables the promotion of health during the waiting for news at the hospital:

In every way, from a conversation, an orientation, even for the professionals, they also need, even a different moment, a conversation. (Drums)

Receiving good news (Banjo)

The companions mentioned interesting strategies to promote health in the waiting room of the surgery center, such as prayer, clowning, AAT, good care, dialogue and music, which will be presented specifically in the next category.

Music as a health promoter in the OR waiting room

The study participants highlighted positive feelings about the musical intervention, such as: distraction from the troubling reality, happiness, life, joy, and hope:

Here in the hospital you are not well, and with you guys coming to sing, you forget that moment of worry and are happy to listen. (Guitar)

[...] it brings joy. When the person is sad, he needs music, something, to make his day better [...]. A feeling of hope. (Piano)

We were very distracted [...]. Suddenly, you arrive with all this joy and it makes us rethink that we are in an environment that has joy too! There is sadness, but there is joy. (Xylophone)

For those interviewed, music promotes health by providing motivation, happiness, positivity and the rescue of good memories:

For me, when I am sad, I listen to a song and it cheers me up, it makes me feel good. (Banjo)

Because it (music) takes away that negative thought. And you start hearing the lyrics of the song and it cheers you up and takes that bad thing away from you... you remember the person that is there, how good it is to live with her. (Violin)

Music always lights up people's memories, good things, good memories, music is everything! You can be sure that it helps a lot. (Xylophone)

Also, after the experience of the musical intervention in the waiting room, the participants described the awakening of cheerfulness, spirituality, tranquility, relaxation, peace, feeling embraced and welcomed:

I was thinking, I was really worried, then you guys came singing and the mood already gave me that "up", it already improved [...]. (Banjo)

It takes away that bad thing, cheers you up spiritually, emotionally, it's good yes. (Violin)

A huge tranquility, because you can relax and it's very good, the music seems to renew us. (Ukulele)

[...] When we are here we are usually in a moment of pain, of anxiety, and music brings peace, this tranquility to this environment, which is very heavy. The essence of music, when well chosen, will bring this both to the patients and to the companions who are here afflicted. (Cavaquinho)

[...] came a moment of peace that you take away that pre-occupation of only thinking about your family member [...]. (Ukulele)

We feel like... embraced, welcomed, we feel good. (Bandolin)

Another feeling intensely evidenced by the companions was the relief of tension and stress, as well as the relaxation of the time:

Relief, relaxation of time, in these hours here that are interminable, relieves the feeling of anguish, of waiting. (Pandeiro)

[...] we were here, kind of idle in this wait and then suddenly [...] a song, it kind of woke us up like that. (Drums)

You arrived with music, music that you like to listen to, that takes away a little bit of that pain in your chest, that anxiety, it relieves. (Cavaquinho)

Relief, joy, calm, it distracts a lot and it is something that certainly makes a lot of people happy, it was very good, I liked it. (Flute)

Likewise, sensations that were difficult to describe, in which different feelings were mixed together, such as crying and laughing, were pointed out:

There is no explanation, I felt like crying, I felt like laughing, I felt like everything a little bit. (Guitar)

Crying, I even told my husband, that if you sang a little more I would start to cry, but with joy. (Banjo)

I almost cried with emotion [...] cry in a good way. (Violin)

In this study, it was evident the complexity of sensations that music awakens when, for the participants, it was even difficult, at some moments, to describe in words what they felt, using descriptions that revealed a mixture of emotions. They also mentioned the positive surprise of receiving the music, feeling

welcomed and in a better mood, in contrast to the negative feeling before the intervention.

DISCUSSION

It is known that the hospital arouses negative feelings of fear and anguish, in addition to generating insecurity, for patients and their companions.^{1,2} Moreover, for the companions, the fact that they are waiting for news of a loved one may generate more negativity, bringing up feelings of fear, doubt, and helplessness.¹

Thus, activities that are able to promote the health of companions waiting for news of their loved ones in the hospital waiting room are indispensable. However, it is evident the presence of confusion between the concepts of prevention and health promotion, very common not only with users, but also among health professionals. Although these concepts complement each other, they do not correspond. Prevention has a biomedical character, in which health is considered as the absence of disease, focusing on pathology. Promotion, on the other hand, considers the expanded concept of health, highlighting the determinants and conditioning factors of health.¹⁰

In view of this expanded concept, since 1988 the WHO has recognized spiritual well-being as an indispensable factor for the balance of an individual's life.¹¹ This is why spirituality is important and considered a way to promote health. Spirituality and prayer help to face the discomforts in life, reducing stress, hypotonia, and restoring courage and vigor to face pain and suffering.¹¹

Clowning is another way to promote health, since it provides a more humanized and integrated environment, transmitting vivacity and joy, which allows the construction of a more effective communication, enabling the formation of bonds, stimulating communication, autonomy, and participation in care.¹² Communication is a fundamental part in autonomy and care, and is considered a lightweight health technology, essential to develop empathy and bonding. It can be verbal or nonverbal, promoting the recognition of feelings and experiences of the other person, making him/her feel understood.¹³ Therefore, adopting communication as a care tool is essential, in order to connect with individuals and communities, enabling the understanding and communication of health promotion strategies. Thus, a relationship is intersubjectively established that promotes wisdom, autonomy, and possibilities of dealing with issues of health and existence.^{14,15}

Another possibility for promoting health in the hospital is AAT and music. The former is seen as a therapeutic model that uses the animal as a protagonist, with the main objective of providing physical, mental, and social health. Within the hospital environment, the most commonly used animal is the dog, because it shows greater affection and is easier to train. In addition, AAT acts directly on the performance of interpersonal relationships, facilitates communication, the exchange of affection, the notion of security, and reduces anxiety levels.¹⁶

As evidenced, having good care is also a way to promote health within the hospital environment. Therefore, the importance of

good care in technical procedures and welcoming, developing the sensibility of putting oneself in the other's place, becomes evident.¹⁷

With music, there is direct interference in the listeners' well-being, relieving negative feelings such as stress, sadness, and anxiety, with the cultivation of good feelings such as tranquility, peace, and joy. Furthermore, it is evident that music creates a space for distraction and leisure.¹⁸ In addition, it tends to provide better acceptance of unfavorable situations for hospitalized patients, companions, or professionals, facilitating adaptation to hospital routines. Still, it is emphasized as possible results the improvement in the disposition towards health and life.¹²

Music is considered to be a language of the emotions.¹⁹ In this sense, it promotes improvement in psychological, physical, and spiritual aspects, transmitting peace, hope, encouragement, stress relief, and joy. Music directly influences brain areas, justifying the physical and emotional reactions produced.²⁰ In addition, music and its lyrics bring about deep reflections, causing each person to have a different experience. Thus, the importance of the choice of the musical repertoire is given.^{19,20}

In view of the above, it can be said that music is characterized as a soft technology of care, which promotes well-being, involving the listeners, with repercussions on mental health, since it reduces stress and mitigates sadness, whether related to hospital or personal experience.²¹ It also provides a break in the hospital routine, deconstructing the loneliness and insecurity resulting from a stay in an unfamiliar environment.⁶

Soft technologies enable humanization of care, with emphasis on the bond between the professional, the person who is hospitalized, and the companion, qualifying the work process of nurses and other team members in terms of autonomy and co-responsibility in health care.²¹ Moreover, music is a low-cost technology, capable of promoting the health of people in different scenarios.¹⁸

However, it is necessary to have a holistic vision for the provision of humanized care, which should be dynamic and also include the companion, especially the one waiting for news in the operating room.²¹

FINAL CONSIDERATIONS

The possibilities of actions to promote health during the hospitalization process are numerous. In this study, in the context of the surgery waiting room, the companions listed some strategies, such as: prayer, clowning, AAT, good care, dialog and music. In addition, in the experience of the pandemic situation, they also mentioned the use of personal protective equipment, social distancing, and respiratory hygiene, focusing on disease prevention.

It was evident that music is a health promotion tool, which should be applied to hospitalized people and their companions who are waiting for news. The positive feelings generated by musical interventions and the removal of negative thoughts and feelings are evident. Allied to this, music proved to be effective in

transmitting affection, moving and distracting the companions in the waiting room, who are usually in a routine of long waiting for information.

As limitations of the study, difficulties were encountered due to several closed and objective answers from the participants, which can be justified by their concern about the situation during the interview. Added to this, there was the need for several days of data collection, given the scarce presence of companions in the waiting room as a result of the pandemic scenario, because the hospital institution restricted the number of people in order to maintain social distance.

The present study brings up a necessary discussion for the validation of music as a health promotion tool, besides focusing on the companions in the surgery waiting room, a public that can often be forgotten within the hospital environment and the discussion about health promotion in the health and nursing fields. It is suggested that there are more studies on the theme for the continuity of scientific evidence on the use of music as a care technology to promote health in the various hospital sectors. It is noteworthy that this study contributes to nursing, which develops health-promoting actions to achieve qualified and holistic care, in the constant search for the consolidation of the principles of the Unified Health System, from the perspective of integrality and humanization of care.

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