

Federal University of Rio de Janeiro State



Journal of Research Fundamental Care On Line

Doutorado
PPgEnfBioMestrado
PPgenfISSN 2175-5361
DOI: 10.9789/2175-5361

RESEARCH

TAKING CARE OF YOURSELF TO TAKE CARE OF THE OTHER: REFLECTIONS OF NURSING PROFESSIONALS ABOUT SELF CARE

CUIDAR DE SI PARA CUIDAR DO OUTRO: REFLEXÕES DE PROFISSIONAIS DE ENFERMAGEM ACERCA DO AUTOCUIDADO

CUIDARSE PARA CUIDAR DE LOS DEMÁS: REFLEXIONES DE PROFESIONALES DE ENFERMERÍA SOBRE AUTOCUIDADO

Tássia Henny S. Justino Targino¹ Priscilla Maria de Castro Silva², Elisângela Braga de Azevedo³, Alynne Mendonça Saraiva⁴, Renata Cavalcanti Cordeiro⁵, Maria de Oliveira Ferreira Filha⁶

ABSTRACT

Objective: To analyze the practices of nursing professionals of a Hospital Emergency and Emergency, directed to self-care; characterize them as the weekly schedule of work and ascertain the difficulties that are to take care of themselves. **Method:** This exploratory-descriptive and qualitative, performed with a nursing team in July 2009 in a Hospital Emergency and Emergency Campina Grande / PB / Brazil. The empirical material was analyzed using content analysis, having obeyed the precepts of Resolution 196/96, submitted to the Ethics Committee of the Centre for Higher Education and Development (CESED) which approved on 25/05/2009, No. 1846.0.000405-09. **Results:** There was a perception of nursing professionals related to self-care; Practice of nursing directed to self-care for health maintenance, and difficulties encountered by practitioners for self-care. **Conclusion:** The practice of nursing directed to self-care showed negative aspects related to the theme. **Descriptors:** Self care, Nursing, Quality of life.

RESUMO

Objetivo: Analisar as práticas dos profissionais de enfermagem de um Hospital de Urgência e Emergência, direcionadas ao autocuidado; caracterizá-los quanto à carga horária semanal de trabalho e averiguar as dificuldades que encontram para cuidarem de si. **Método:** Estudo exploratório-descritivo e qualitativo, realizado com uma equipe de enfermagem, em julho de 2009, num Hospital de Urgência e Emergência de Campina Grande/PB/Brasil. O material empírico foi analisado através da análise de conteúdo, tendo obedecido aos preceitos éticos da resolução 196/96, submetida ao Comitê de Ética do Centro de Ensino Superior e Desenvolvimento (CESED) que o aprovou em 25/05/2009, nº 1846.0.000.405-09. **Resultados:** Evidenciou-se percepção dos profissionais de Enfermagem relacionada ao autocuidado; Práticas dos profissionais de enfermagem direcionadas ao autocuidado para manutenção da saúde; e Dificuldades encontradas pelos profissionais para o autocuidado. **Conclusão:** As práticas dos profissionais de enfermagem direcionadas ao autocuidado demonstraram aspectos negativos relacionados à temática. **Descritores:** Autocuidado, Enfermagem, Qualidade de vida.

RESUMEN

Objetivo: Analizar las prácticas de los profesionales de enfermería de un Hospital de Emergencias y Urgencias, dirigida a los cuidados personales; caracterizarlos como el horario semanal de trabajo y determinar las dificultades que se van a cuidar de sí mismos. **Método:** Este tipo exploratorio-descriptivo y cualitativo, realizado con un equipo de enfermería en julio de 2009 en un Hospital de Emergencias y Urgencias Campina Grande / PB / Brasil. El material empírico fue analizado mediante análisis de contenido, después de haber obedecido a los preceptos de la Resolución 196/96, presentada al Comité de Ética del Centro para la Educación Superior y el Desarrollo (CESED) que aprobó el 25/05/2009, N ° 1846.0.000405-09. **Resultados:** Se observó una percepción de los profesionales de enfermería relacionados con el cuidado personal, la práctica de la enfermería dirigida a los cuidados para el mantenimiento de la salud, y las dificultades encontradas por los médicos para el cuidado personal. **Conclusión:** La práctica de la enfermería dirigida a los cuidados personales mostraron aspectos negativos relacionados con el tema. **Descriptor:** Cuidado de sí mismo, Enfermería, Calidad de vida.

¹Nursing Hospital Trauma Campina Grande-PB. E-mail:tassiahenny@hotmail.com. ²Nursing, MS in Nursing UFPB. Professor, Department of Nursing UFCG and FCM Campina Grande E-mail: priscillamcs@hotmail.com. ³Nursing. PhD in Nursing Program at the Graduate UFPB. Professor at the Faculty of Medical Sciences of Campina Grande. E-mail: elisaaz@terra.com.br. ⁴Nursing. PhD in Nursing Program at the Graduate UFPB, Professor at the Federal University of Campina Grande. E-mail: alynnems@hotmail.com. ⁵Nursing. MSc in Nursing Graduate Program of the UFPB. Address: Street Newton Estilac Leal, nº 986. Alto Branco. Campina Grande/PB. Tel.(83)8806-0118. E-mail: renataacc@outlook.com. ⁶Nursing. PhD in Nursing, Federal University of Ceará, Adjunct Professor of the UFPB.

INTRODUCTION

Care is essential and inherent to human beings, is present in human history since the evolution of time, however, has no definite meaning or a concept, however, it is understood that this practice is characterized by seeking the welfare the individual holistically. In the professional field of health care before understood as an act of charity and vocational contemporaneously was losing its essence and assuming increasingly mechanistic and individual character.¹

Currently care is gaining expanded dimensions, with respect to the completeness and collectivity. In this perspective, Nursing, regarded as the science and art of caring, whether at the individual, family or community, has as main objective to provide full assistance to the human being, in their basic needs, working on promotion, prevention and rehabilitation of health.

Thus, this profession has been consolidated as from the science of caring, so think about health and nursing is thinking of promoting quality of life, so this reflects that commitment is essential for this rebuild their specific way of caring, which is unrelated to a model that focuses on disease detriment to their health. This posture has emphasized the autonomy of knowledge and consolidated this profession as a science.²

The training in healthcare is driven by the biological model, where the human body is viewed as a machine, its parts and analyzed according to disease is seen as a malfunctioning of biological mechanisms, in this sense the care aims to repair the defect in accordance with the specific problem. This is what happens from the academic to the professional practice daily.³

In this sense, the nurses during exercise professional encounter situations and abstract concepts related to this subject at all times when performing procedures, tasks, diagnostic, when J. res.: fundam. care. online 2013. out./dez. 5(4):440-48

administering a drug, however, that care must be recognized in ontological perspective of its existence, scrutinizing everything that can contribute to a nursing care committed to the well, with ethics, with respect to each other.⁴

So this has been a challenge for health professionals, including the nurse, because the structures constrain the actions of health care rationally, mechanical and impersonal, however, cannot be overlooked that the way to act with the other is embedded to the way the individual relates himself, making relevant Heidegger's thought that highlights the man as a subject of its own realization.⁴

Therefore, there is no thought of caring for lives after reflecting about their own health, making it a matter of personal improvement, which is necessary for the nurse is to provide good care effectively and satisfactorily to another.

According to the World Health Organization (WHO), health is a state of complete physical, mental and social, and not merely the absence of disease or infirmity. That way involves various aspects such as healthy eating, engaging in physical activities, leisure, as well as disease prevention, among others, where they should be in harmony to determine patterns of health stable.⁵

So, what implies careful in knowing yourself, the caregiver must invest to meet each other, but also to him, because as more seek to realize the more you realize the other and vice versa. Consequently self-care promotes improved quality of life as well as benefits that can be observed through the care that is provided to others, which brings a quality service and humanized, where one who cares, knows their values, duties and limits, seeking comprehensive care without reducing the other and himself to the state of objects.

Targino THSJ, Silva PMC, Azevedo EB *et al.*

The process of care in health is related to how affects the actions taken as a result of the knowledge and abilities of each professional in every moment essential in caring, which ends up showing what each professional is and the way they care.

The issues discussed have relevance justified, since before the current situations we note that human care performed by nursing professionals must overcome the perspective of clients and their families to achieve their own self-care in order to improve relationships and professional success and is focused on the needs of the human being and his own care needs.

Analyze the subject matter thus becomes a necessity at the same time for reflection and self-assessment on the part of nursing professionals in search of an awareness of the seriousness of self-care as a condition for the care given to the other.

The literature indicates that the night shift nurses are the least have been devoted to the care of itself. Insofar as the night service ends exerting influence on the pace of work of the body (biological rhythm) directly interfering in the sleep / wake cycle, causing disruptions in family life, depressive tendencies, gastric problems arising from the changes in hourly food intake, changes psychic (moodiness, sadness, discouragement, stress) and physiological (gastric disorders, cardiovascular and sleep) for nursing staff.

Due to the importance of the proposed topic, felt the need to conduct this research, which aimed to: examine the practices of professional nursing night shift, a Hospital Emergency and Emergency Campina Grande / PB / Brazil directed to self-care for health maintenance. Specifically sought to characterize these nursing professionals regarding the weekly schedule of work area and work experience in the profession, as well as ascertain the difficulties that they are to care for you.

J. res.: fundam. care. online 2013. out./dez. 5(4):440-48

Taking care of yourself to take

METHODS

This is an exploratory and descriptive, outlined mirroring themselves in qualitative studies, predominantly in the premises of oral interview, a condition that is considered essential for achieving goals.

The scenario chosen for this study was a Hospital Emergency and Emergency, private and accredited by the Unified Health System (SUS), referenced in this study for Hospital X. This institution is located in Campina Grande / PB / Brazil. The choice of the location of the research was based on fact be the same landmark in the city in emergency care, and in turn, has a large demand for daily attendance, and consequently a large number of professionals, providing a satisfactory sample for research.

The sample consisted of all nurses in night shift, 46 nursing technicians and 6 nurses, according to the following inclusion criteria: 1) belong to the permanent staff of the institution, 2) have a weekly schedule of night work at least 12 hours, 3) Being the framework of nursing professionals. Aiming to preserve anonymity, they were identified by the letter P followed by a cardinal number in ascending order of the interviews.

The empirical material was acquired through the application of a semi-structured interview guide with questions objective and subjective, so for its construction were considered some of the information found in the manual Caregiver Ministry of Health.⁷

The collection of empirical material was held on schedule previously established between the researcher and the officials, in July 2009. Thus, the material was discussed by the technique of content analysis-categorical theme, proposed by Bardin⁸. But he also used the narrative technique that allows the confrontation with the meanings of literature concerning the matter discussed.

Targino THSJ, Silva PMC, Azevedo EB *et al.*

The research was conducted according to the ethical aspects of research involving human subjects recommended by Resolution 196/96 of the National Health Council, which addresses the rights and obligations of the researcher and subject. Because this was a study involving humans, the research was submitted to the Ethics Committee in Research of the Center for Higher Education and Development (CEP / CESED) which gave its assent on 18/06/2009, according CAAE-1846.0.000405-09.

RESULTS AND DISCUSSION

The perception of nursing professionals related to self-care

In nursing care represents its essence and what led her to become a science, however, self-care was first mentioned in this profession, through the Nurse Dorothea Elizabeth Orem, however, this was only mentioned because it is understood to be relevant encourage patient self-care, not thinking about taking care of health professionals as an effective strategy in practice in nursing.¹

So when it refers to self-care, this is characterized as paramount to the quality of care in any health care professional, and especially the nurse, because it has a closer relationship of patients, and therefore to be disregarded and not maintain a healthy relationship with him is unable to perform its role of caregiver with excellence.¹

In this way, participants describe their lines through a perfect understanding of self-care, and the need of it for good health maintenance:

*I understand that it is the act of taking care of him, body, and mind. (P.17).
(...) Is related to the way we care for, or how we treat our health, our bodies, and physical, spiritual side also. (P. 19).*

Self-care expressed, then, take care of yourself, are the actions, behavior that people have for their own benefit, in order to promote health, preserve, ensure and sustain life.⁷ Thus, participants add even through the speeches the

J. res.: fundam. care. online 2013. out./dez. 5(4):440-48

Taking care of yourself to take ...
importance of self-care as a condition to take care of other people:

*First take care of them in order to take care of others. (P. 5).
Taking good care of me and others. (P.13).
Are you devoted to yourself, your body, in order to prevent diseases to you and your patient? (P.26).*

These authors confirmed the speeches delivered by the participants when he said that care of yourself is an attitude linked to a sense of being in the world, relate to others, to himself and change.⁹ That way people understand and practice the actions for personal care provides wellness for themselves and for whom they maintain relationships daily.

Practice of nursing professionals directed to self-care for health maintenance

Health professionals are direct caregivers of sick individuals, their families, and also of themselves, however, these are often ignored, becoming lax about their needs regarding health and gregarious, even living everyday situations of loss, pain and suffering, acting in high workdays. Thus, they have become cold and indifferent to care for others, for the effective care to the patient, takes place from care professional himself.¹⁰

Considering that to maintain health is necessary to adopt a healthy lifestyle, self-care was analyzed with regard to issues related to nutrition, physical activity, recreation and preventive behavior. So notorious was the annoyance of the discourse of nursing professionals, therefore they know about self-care, however, act negligently with their own health, as perceived through the following lines:

*Normal without any regime. (P. 7).
Rich in fat mass, with enhanced power for breakfast. (P. 30).
Disorganized due to schedules. (P.44).
Eating everything. (P. 54).*

In the above reports, it is evident that the participants did not have adequate food,

Targino THSJ, Silva PMC, Azevedo EB *et al.* considering that each individual has different dietary requirements according to the characteristic of your body and its biological situation. Where the body requires for its development and maintenance, an adequate amount of food that contains recommended values for various nutrients to meet the needs.

Irregular eating habits worsened when the worker does not have a good food education. Generally meals are night worker and rapid preparation rich in fats.¹¹

Thus, not only the power is an important factor to measure the quality of life, but also the practice of regular physical activity as sedentary lifestyle is a risk factor for health problems more prevalent in the world population and Brazilian, and currently identified as a major public health problem in many different segments. Physical activity involves components and determinants of biopsychosocial and cultural order. Thus there are several types of physical activities practiced by society and should thus the choice of any physical activity provide them with motivation and pleasure.¹²

The association between physical activity and functional capacity has been considered and this finding may suggest that measures be taken in order to indicate and guide the practice of regular physical activity or sport, by nursing staff, to improve their health conditions. The workers, mostly older, are encouraged to participate in regular physical activity programs that are age-appropriate, because exercise is a form of leisure and restore health from the harmful effects that the stressful routine of work and Study brings.¹³

Although they have said these activities develop the study shows that 67% of participants have malpractice physical activity as shown in the following discourse:

Sporadically walk. (P. 17).
Sometimes walk. (P. 39).
I do not practice physical activities. (P. 28).

Taking care of yourself to take ...

Note by means of speeches then, that only 33% of the participants of this research, practice some physical activity, in turn, choose these kinds of physical activities according to what suits them best:

Walking, running and weight training. (P. 16).
Cooper 40 minutes every day. (P. 43).
Aerobics and walking. (P. 51).

Balancing food intake and energy expenditure is the basis of weight control throughout life. The patterns of healthy eating and regular physical activity should begin in infancy and continue throughout adult life.

Health professionals generally have a high workload, which also occur at night, causing a disruption of circadian rhythm sleep, which has been one of the factors in the health of professional commitment.⁶

Thus, we found that although most participants reported trying to balance the time devoted to work and leisure, is still small weekly time they have to devote to leisure in view the weekly work and confirmed by following statements:

Only in the gaps from time to time have leisure [...]. (P. 15).
In the week I have no pleasure, only once a month when I travel [...]. (P. 16).
Two hours at most have leisure. (P. 20).

It is evident, then, that the demand for professional achievement, personnel and subsistence faces wear the pace of work, which brings a need for rest, to feel affronted by the limitations that belong to the routine of work, especially in the hospital.⁶ Therefore, it is clear that the representations issued in participants' responses resemble literature:

Fun with family. (P. 7).
Hanging out with friends, dinner, going to the movies. (P. 18).
Dancing, talking with friends, dating. (P. 24).
Watching movies, going to the pizzeria. (P. 31).
Watch TV and sleep in his spare time. (P. 42).

Targino THSJ, Silva PMC, Azevedo EB *et al.*

These moments of leisure in life should be frequent since these professionals ensures that feel good to be off of productive activities and feel better to be working up a goal of quality of life that every worker should follow, where to feel good, or better, the leisure activities must be present in the daily life of every professional care.¹³

Difficulties encountered by practitioners for self-care

The table precarious and degradation-is the professional jobs require double and triple workday, good practices disseminated among health care workers as a way to ensure better remuneration to ensure survival.¹⁴ The speeches delivered by the participants corroborate the idea of authors:

Time and sometimes available, because after the work day is very tiring. (P. 7).

The time since I leave one hospital to another. (P. 23).

Lack of time, discouragement. (P. 32).

Time is very short. Work, home, I'm almost out of time to look after me. (P. 34).

Therefore, it is necessary to have directed attention to caregivers' health, as in the daily work of these days there is extensive and uninterrupted shifts, insufficient salaries, heavy workloads, in addition to coping with the pain and suffering of others loaded own feelings.¹⁵ What is noticeable when participants add financial conditions combined with a lack of time:

Lack of time and money. (P. 24).

Financial. Too much time to work. (P. 43).

These facts lead to daily discomfort experienced these professionals, resulting in barriers to care for you, thus impairing the health and quality of life.

However, when asked about what could be done to overcome the difficulties encountered in the proper care revealed that participants have

Taking care of yourself to take ... more time available can facilitate the practice of self-care among health professionals:

A load more favorable. (P. 3).

Would you like more time to take care of health. (P. 15).

Within the working time should have access to self-care. (P. 28).

Learning to appreciate the time and care is available. (P. 39).

Work less in order to have time. (P. 50).

Thus, from the above reports, it can be inferred that the hospital for care and treatment of health problems of the population must have suitable conditions to provide these health professionals, given that different scientific investigations have shown that overloading work is associated with health problems. Moreover, the job is stressful or not depending on what he still represents for people.¹⁶

Thus, from the awareness for self care professionals revealed that:

Find synchronize and health profession. (P. 18).

Be more aware of the importance of self-care. (P. 25).

Give priority to take care of my health. (P. 29).

Only slightly aware of the importance of prevention. (P. 33).

It is clear, then, that the human being is the product of a natural base that does not occur in isolation, but interact with the world around him, in continuous social transformation, where man is both the creator of the product as their own society, depending the same awareness of self-care.¹⁷

The health involves changing habits and living standards, which include a change in the subject's perception towards life, and how to take care of, so the change of form of life refers subjectivity of the subjects, their conscious or unconscious motivations.¹⁸

Studies have shown that because of these difficulties encountered by nursing professionals in Intensive Care Units on self-care, they are

Targino THSJ, Silva PMC, Azevedo EB *et al.* increasingly likely to develop Burnout Syndrome, which is characterized as emotional exhaustion related to work, being expressed on stage ultimate stress and reaching psychosomatic diseases, high rates of absenteeism, temporary absences functions, reaching disability retirement.¹⁹

CONCLUSION

By analyzing the practice of nursing night shift directed to self-care for health maintenance, considering that this is related, among others, a healthy diet, physical activity, leisure, as well as the behavior appropriate preventive, showed up in the majority of negative aspects in that professionals were being questioned and the matter was contextualized.

Related to nutrition, most participants did not have adequate food, since they do not consume quantities and types of foods that benefit health maintenance. Regarding physical activity seems to be something far from being achieved in 67% of participants who are sedentary.

As leisure participants leave something to be desired, since for the same leisure is possible in a short time and without regularity, since they have the time. Another relevant factor is related to preventive behavior where this is not appropriate, since 52% of participants do not seek health services when they are sick, even part of health care, which is worrying, considering that the Prevention is one of the key factors to stay healthy.

The biggest obstacle for self-care is the lack of time available, which clearly state that this is a difficulty to care, which is obvious when we analyze the aforementioned aspects that require to be achieved moments of dedication to themselves, which is not always occurs.

It is believed, therefore, that to take care of themselves need time availability, as well as being aware of the importance of self-care for health

Taking care of yourself to take ... maintenance, which is already a big step forward in this process, since the self-care is only possible from the initiative of each one. Thus, the adoption of the Law N ° 2295/2000 is needed because there is hereby reducing the workload of the nursing category for 30 hours, providing subsidy for self-care, which benefits the health of nurses as well as the health of people receiving assistance.

From the results of this study, we observed the beginning of a process of reflection on the part of nurses, as did a brief analysis when they answered the questions, voicing concern against the proposed theme at work, by stating that hereby found that they were "evil" and "do not care".

In this study we sought not only an analysis of the process of self-care nursing professionals, however, it is expected that this research will contribute to the awakening of professionals more sensitive to the need for investment in self-care so that from then on, they can take better care of others.

It is suggested that issues like these are part of discussions and meetings within the hospital, in order to identify obstacles related to the maintenance of health professionals and encourage the adoption of healthy habits, given that these are part of the institution and image constitute a considerable group of professionals representing a major portion of the care provided to patients.

REFERENCES

1. Silva IJ, Oliveira MFV, Silva SED, Polaro SHI, Radünz V, Santos EKA, Santana ME. Cuidado, autocuidado e cuidado de si: uma compreensão paradigmática para o cuidado de enfermagem. *Rev esc enferm USP* [periódico on line] 2009 [citado 16 set 2012]; 43(3): 697-703. Disponível em: <http://professores.faccat.br/moodle/pluginfile.php>

Targino THSJ, Silva PMC, Azevedo EB *et al.*
p/10657/mod_resource/content/1/3-
%20cuidado%20de%20si.pdf.

2. Santos I, Alves ACS, Silva FS, Penna LHG, Alvin NAT. Fundamentos filosóficos e teóricos para novas concepções do cuidar em enfermagem: contribuição da sociopoética. *Rev Bras Enferm* [periódico on line] 2010 jul/ago; [citado 16 set 2012] 63(4): 644-651. Disponível em: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0034-71672010000400022.

3. Sousa FGMS, Erdmann ALA. Integralidade do cuidado: do Real a fantasia. In: Koerich MS; Sousa FGMS. *Cuidar-Cuidado: reflexões contemporâneas*. Florianópolis (SC): Papa livro; 2008.

4. Oliveira MFV, Carraro TE. Cuidado em Heidegger: uma possibilidade ontológica para a enfermagem. *Rev Bras Enferm* [periódico on line] 2011 [citado 16 set 2012]; 64(2): 376-380. Disponível em: <http://www.redalyc.org/src/inicio/ArtPdfRed.jsp?iCve=267019461025>

5. Sciliar M. História do Conceito de Saúde. *PHYSIS: Rev Saude Colet* [periódico on line] 2007 [citado 16 set 2012]; 17(1): 29-41. Disponível em: <http://www.scielo.br/pdf/physis/v17n1/v17n1a03.pdf>

6. Vegian CFL, Monteiro MI. Condições de vida e trabalho de profissionais de um Serviço de Atendimento Móvel de Urgência. *Rev Latino Am Enfermagem* [periódico on line] 2011 [citado 16 set 2012]; 19(4): 1018-1024. Disponível em: http://www.scielo.br/pdf/rlae/v19n4/pt_22.pdf

7. Ministério da Saúde (BR). Secretaria de Atenção a Saúde. Secretaria de Gestão do trabalho e da Educação na saúde. *Guia Prático do cuidador*. Brasília (DF): Ministério da Saúde, 2008.

8. Bardin L. *Análise de conteúdo*. Lisboa: Edições 70; 2009.

Taking care of yourself to take ...

9. Bub MBC, Medrano C, Silva CD, Wink S, Liss PE, Santos EKA. A Noção de Cuidado de si Mesmo e o conceito de Autocuidado na Enfermagem. *Texto Contexto Enferm* [periódico on line] 2006 [citado 16 set 2012]; 15 (Esp): 152-7. Disponível em: <http://www.scielo.br/pdf/tce/v15nspe/v15nspea18.pdf>

10. Oliveira Júnior JO. Cuidando do cuidador. *Rev Pratica Hospitalar* [periódico on line] 2009 set/out [citado 16 set 2012]; 1(65): 117-9. Disponível em: http://www.dor.org.br/profissionais/arquivos/cuidando_do_cuidador.pdf

11. Moreno CRC, Fischer FM, Rotenberg L. A saúde do trabalhador na sociedade 24 horas. São Paulo *Perspec* [periódico on line] 2003 [citado 16 set 2012]; 17(1): 34-46. Disponível em: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0102-88392003000100005

12. Siqueira FCV, Nahas MV, Facchini LA, Piccini RX, Tomasi E, Thumé E, et al. Atividade física em profissionais de saúde do Sul e Nordeste do Brasil. *Cad Saude Publica* [periódico on line] 2009 [citado 16 set 2012]; 25(9): 1917-1928. Disponível em: <http://www.scielo.br/pdf/csp/v25n9/06.pdf>

13. Silva RS, Silva I, Silva RA, Souza L, Tomasi E. Atividade física e qualidade de vida. *Cienc Saude Colet* [periódico on line] 2010 [citado 16 set 2012]; 15(1): 115-120. Disponível em: http://www.scielo.br/scielo.php?pid=S1413-81232010000100017&script=sci_arttext

14. Vieira SB, Seligmann SE, Athayde M. Dimensões ocultadas no hospital: o "trabalho sentimental" e as violências presentes na relação de serviço. In: ARAÚJO A, et al. *Cenários do trabalho: subjetividade, movimento e enigma*. Rio de Janeiro (RJ): DP&A; 2004.

15. Vieira ABD, Alves ED, Kamadai I. Cuidando do cuidador: percepções e concepções de auxiliares de enfermagem acerca do cuidado de si. *Texto e Contexto Enferm* [periódico on line] 2007 jan/mar

Targino THSJ, Silva PMC, Azevedo EB *et al.*
[citado 16 set 2012]; 16 (1): 15-25. Disponível em:
http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0104-07072007000100002

Taking care of yourself to take ...

16. Lautert LA. Sobrecarga de trabalho na percepção de enfermeiras que trabalham em hospital. *Rev Gaucha de Enferm* [periódico online] jul 1999 [citado 16 set 2012]; 20(2): 50-64. Disponível em:
<http://www.lume.ufrgs.br/bitstream/handle/10183/23479/000290068.pdf?sequence=1>

17. Neves MY, Seligmann SE, Athayde M. Saúde mental e trabalho: um campo de estudo em construção. In: Araújo A. et al. *Cenários do trabalho: subjetividade, movimento e enigma*. Rio de Janeiro (RJ): DP&A; 2004.

18. Teixeira ER. Saúde Mental e Enfermagem psiquiátrica. In: Figueiredo NMA. *Práticas de enfermagem: Fundamentos, conceitos, situações e exercícios*. São Paulo (SP): Difusão Enfermagem; 2003.

19. Sousa AQ, Barros AG, Dias ACS, Santos VEP. Perspectivas de Síndrome de Burnout na Equipe de Enfermagem da Unidade de Terapia Intensiva. *R. pesq.: cuid. fundam. online* 2012 jul/set; 4(3): 2672-78.

Received on: 18/09/2012

Reviews required: no

Approved on: 01/04/2013

Published on: 01/10/2013