

83 - THE BENEFITS OF RECREATION FOR CHILDREN: A HOSPITAL PLAYROOM IN PLAY

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INTRODUCTION

One feature common to all humans are diseases. However, some lead to hospitalization, directly interfering in people's lives for a certain period of time and deteriorated further when it comes to sick children. The hospitalization process usually comes along with an atmosphere of tension and fear, which entails other unpleasant situations: new schedules, exams painful estrangement from the family environment, school dropout and other changes (ABRÃO, 2012).

In 1988 it developed in the Dutch city of Leiden, the "Charter of the Hospitalized Child". This document is prepared in order to summarize and affirm the needs and rights of children in hospital. At this level, some clauses deserve: a hospitalized child has the right to have their parents or their substitutes, with her day and night, whatever their age or their status, children and parents have the right to receive information about the disease and treatments, appropriate to the age and understanding, in order to participate in decisions that concern them children should not be admitted to adult services; should be gathered by age groups to enjoy games, recreation and educational activities appropriate to the age, safely, the hospital must provide children in an environment that meets their physical, emotional and educational, that in the aspect of the equipment, either in personal appearance and safety, the intimacy of each child must be respected, the child should be treated with care and understanding in all circumstances, among others (PORTUGAL, 1998).

Accordingly, the hospital replaced recreation highlighted as a result of hospitalization, often, the child is seen as a patient, since the features conducive to childhood give rise to an adverse reality we expected this period the life of any human being (ABRÃO, 2012). Subtly, becomes a growing concern with the preparation of a cozy atmosphere to any individual who requires hospitalization. With the proposal to guide the conduct of health professionals in the hospital, the Brazilian Society of Pediatrics prepared and presented at the Annual Meeting of the National Council for the Rights of the Child and Adolescent - CONANDA - through resolution number 41 on October 17 1995 right of children and adolescents have with the presence of mothers and permanently or a family member, as the security that these individuals are in the process of admission, since the absence of the mother breaks the emotional contact that gives security to the child and, in future, could be adult unbalanced emotionally and socially. For a long time, the conservative behavior of many hospitals maintained a detachment from the doctor and the patient. The interaction between them was cold, impersonal and totally imbued with lack of affection (MUGGIATI, 2006). The reality of patient care with a view to the humanization process has changed, but still impersonal, being patient treatment too formal. Many employees perform their activities in a mechanical and systematic forgetting, in most cases, we are dealing with children frightened and scared.

The child has a way of structuring your thinking different from the adult form, their way of thinking, feeling, and therefore also react differ. However, many adults believe they do not have the right to know the truth about the situation that surrounds them, making it ignored their wishes (SIGAUD, 1996).

The health care of the sick child, implies not only the care to her biological dispensed by the hospital staff, but also both psychological and social care. Such assistance, under the law, must be complete, taking into account that the sick child has doubts, anxieties and fears about the disease process, because the process of illness of the child is in a provocative phenomenon of maladjustment in it.

Thus, the intention of this work is to observe and analyze the recreational activities that occur in the teaching hospital of the Catholic University of Pelotas. For this, we made a mapping of professionals and volunteers who work with hospital recreation, as well as games, toys and games that exist in these locations.

Benefits of recreation for children: A hospital playroom in play

During hospitalization the child may be impaired in the biological, psychological and social withdrawal due to family medical interventions, interrupted schooling, and especially to the commitments arising from the disease. Generally, the hospital does not meet your child's condition with regard to their social, emotional, intense and disorganizing permeate the environment, profoundly affecting the behavior and disposition of the small patients (Sigaud, 1996). While remaining hospitalized, the child is at a point in their life where they have the need to maintain contact with different situations and activities that aim to reduce this uncomfortable moment that goes from the acceptance of the disease to the preservation of his life. Because of this, there must be a balance, provided by the recreation, there is a space for the expression of playfulness.

According to Dias (2005), when the body of the child has to suffer some disease the natural desire to play not cease to exist because its development process is continuous. The body becomes ill during activities in a living body, cheerful, expressive, creative. Despite being diagnosed with a serious illness, it can not lose its status as a child, having equal need to play and have fun.

The infant hospitalization promotes a confrontation with pain, physical limitation and passivity, emerging feelings of guilt, punishment and fear of death. To account for this experience to develop, it is necessary that the child can have his tools and domain knowledge. In this perspective, the play appears as a chance to express feelings, preferences, fears, habits, family mediation between the world and new or threatening situations and preparation of unknown or unpleasant experiences.

However, it is not easy for the child to play or move around while she was in hospital. In most cases, she is confined to bed as a probe for devices, drainage, oxygen mask, serum and drug drivers by splinting effect of the medication that they fall asleep, the disease that causes pain and makes you depressed.

The promotion of recreational activities in the hospital brings the ability to meet the child holistically, even though it in a limited space, to be affected by the malaise of the sick body and have to face some difficulties as the hospital routine, the hegemony of adult and children's own fragility resulting from disease, which make it difficult for the child to have his space. Thus, the playroom is the place where children can develop their psychomotor ability through playful, using the games and toys. At the origin of its history, the Brazilian playrooms differ from these early spaces ever heard. In other countries such as the United States, the toy libraries are seen as local borrowing toys.

The playrooms Brazilian emerged in the 80s, being considered spaces created with the objective of providing

incentives for the child to play freely. Even to the author, the functions of the toy are:

- Be a resource center that lends toys, educational materials and material infancy, in order to meet the changing moment of the child with special needs;
- Offer professional advice informally to guide parents in the selection of educational games, according to age and evolutionary moment;
- Serve as a meeting place for parents, facilitating exchange of information and experiences;
- Provide physical space where children, youth and teens can play (Negrine, 1996, p.46)

These spaces is of various toys, colorful, new, used, wood, plastic, metal, cloth, antique, contemporary, cheap ones, the expensive ones. Toys that will fulfill dreams, fantasies demystify or simply encourage the child to play spontaneously (CUNHA, 1998).

In this sense, the playrooms are deposits of objects that have no life in boxes and shelves, but when they arrive the hands of children create life. From this, the functions of the playrooms are characterized as: Therapeutic, in which the recovery of several psychomotor disturbances is made by or with the help of toys; Community, playrooms that are made, organized and maintained by the community; Sucatoteca, where toys are made by the users. The material used for manufacturing of such toys are recyclable; School, are toy libraries of educational institutions; Pedagogical are laboratories for studies on toy universities that have courses on character degrees; Itinerant, mobile toy libraries are built within buses or trucks that allow the toys go to children even in distant places or difficult access; Hospital, toy libraries are installed in hospitals (CUNHA, 1998).

Lindquist (1993) reported the importance of the act of playing in the hospital environment to ease the suffering arising from the admission, as well as create and improve communication and expression of feelings of children hospitalized with peers, family and hospital staff. In this sense, the space instituted as toy encourages the child to express themselves symbolically their suffering. Hospitals using the toy and play in recreation hospital seeking relaxed and pleasant moments that provide the nearest child with the reality that exists outside of the hospital. In some hospitals there is a toy that is a place to purchase toys, but also serves as a meeting environment for patients and caregivers, assisting in the socialization process of the child for the presence of others, the child will not feel isolated in their room, but had shared his passing at the hospital with other friends (CUNHA, 1998).

From the Federal Law 11.104 of 21/03/2005 (BRAZIL, 2005), the existence of a playroom in hospitals becomes mandatory, legally supported by Associação Paulista de Medicina, in partnership with the Brazilian Association of Toy-Libraries To ensure the play activities for hospitalized children in 1999 was created the project Law No. 2087, later transformed in the above. This requires hospitals that provide pediatric care, installing its dependencies in a recreation room. In this sense, the toy hospital aims to ease the stay of the child, allowing her time less traumatic happier during his recovery.

The existence of recreational activities and even in some hospitals Hospital Toy-Libraries is inspired, in part, on psychological studies and medical conducted in other countries. There are also volunteer prior to this determination of justice, as the Doctors of Joy, Play Project, Living Library, Mother Program Participant, among others. Especially, the Doctors of Joy, is the most prominent global project regarding recreation hospital. Doctors, actors, volunteers and others working with the young hospitalized patients and charge to treat "comic vein" performing actions like red nose transplants, tests stethoscopes soap bubbles and transfusions milkshake. This type of work is not carried out for the play by play, but there is a concern about the development of children's abilities.

The toy hospital works, preferably close to the pediatric beds, and a colorful environment to distance from pale colors and traditional hospitals in general. The furniture of this environment are adapted to the needs of children. It is suggested that the toys there fit within hospitals which are easy to clean. All materials used in the toy, including tables, washable and should be cleaned periodically. The washing should be done with water or with soap or alcohol.

Professionals and volunteers who work in or playrooms hospital should have a care the most for being in this environment, for example, wear clothes with long sleeves avoiding direct contact with the child. The use of a specific coat, hair pulled and short nails is almost a standard for these professionals. Encourages the displacement of children into playroom, as well as they leave the hospital setting and step into the world of children. However, if this is not possible due to the same diagnosis or desire of his own, the job becomes individualized and chosen by her toy taken to the bed so that together perform. Is still a small number of hospitals that have a space for recreation. However, this will determine the results obtained using the shape of the toy is acting professionals who will attend the same.

The hospital playroom, as a manifestation of recreation enables free play as an end in itself can create the child, invent, transform, build and express their inner reality. It also offers the opportunity to choose, rescuing the exercise of autonomy, enabling personal growth and the acquisition of habits of responsibility, which contributes to social integration. About the benefits, Ortiz (2005) points out that the toy hospital today is an alternative real improvement in the quality of care and ensuring the right to play. Visible results in relation to the approach of the family have been achieved, often even indirectly leading to better adaptation of the whole family during the period of hospitalization and less wear of the relationship with the child.

METHODOLOGICAL PROCEDURES

This research takes shape as a descriptive, exploratory and qualitative nature conducted with the Hospital Escola São Francisco de Paula, located in the southern state of Rio Grande do Sul According to Richardson (2002), descriptive research aimed at evaluating, record and analyze certain phenomena. Already exploratory perspective, for this author, refers to the study of a current phenomenon that is not yet possible to deepen due to the construction of a theoretical framework before.

Thus, it has been a research problem: As the teaching hospital of the Catholic University of Pelotas is organized pursuant to resolution no. And 41 October 1995, item 9, which ensures children admitted some form of recreation? The hypothesis for this question was that by Resolution no. And 41 October 1995, the hospital provides recreational activities for patients hospitalized in the pediatric ward, not only because of the law, but by believing in the effectiveness of aid in the treatment of diseases.

Within the hospital system, the research participants were professionals recreationists who work in the hospital as well as students, initially from an exploratory study of those involved with recreation in these spaces was possible to map the professionals in these areas. There was direct observation of these. Thereafter, hospitalized children became part of the research, as noted its reactions the activities proposed by recreationists. From the informed consent of these professionals, we applied an instrument in the form of qualitative open interviews, semi-structured type, for subsequent content analysis. It is understood that to obtain good response is required from good questions. In a second stage of the interview, the goal was to ask more specific questions, thus improving the data obtained to obtain new, because if some information from the previous step has not been made clear, it was possible to return the questions and acquire new ones. According Ludke & Andre (2003), this type of

tool allows the researcher to better densification of the information collected. The observation of both practices as recreational space is given in a non - interventional, recording the events in the recreation room. This took into account the description of the individuals involved, their singularities and externals.

The locations where the hospital appears recreation were minutely detailed descriptive way. The provisions of furniture, toys and objects are important elements in this analysis. A description of the activities in these places had in principle observe what activities made and how these children are presented. The reaction and behavior of both recreationists / volunteers and children face these were also observed. Based on the Discourse Textual Analysis (GALIAZZI & MORAES 2007), from existing texts, interviews and observations produced the material necessary for understanding the phenomena that the study seeks to understand. Thus, the study does not confirm the hypothesis seeks to test, nor refute them. The ultimate goal of the research was the understanding, or the understanding of the research object. therefore, the analysis was organized as defined by Disassembly of texts or unitarization, this means , scrutinize the materials , breaking them towards achieving units; Establishing relationships or categorization, build relationships between units base, combining them and ranking them in order to understand how these elements can become unitary categories; Capturing the new emerging, this stage works with the densification of materials analysis triggered by the two preceding stages, allowing the emergence of an understanding renewed the whole, and the metatext .

Throughout the data analysis, it was the complaint that the qualitative textual analysis can be understood as a self-organizing process of building understanding that new understandings emerge unitarization sequence, categorization and capture the new emerging, reaching concept named storm of light. Thus, Textual Discourse Analysis has shown significant importance to the study of the analysis approaches which require referrals which are located between the solutions proposed for content analysis and speech analysis.

The Recreation hospital of the Catholic University of Pelotas

Recreation hospital, Hospital São Francisco de Paula is a psychologist in charge that develops activities related to Psychology course in space for the brinquedoteca. In the room , the recreationists are 2 Baggies paid, students of psychology. A shift in the morning, another in the afternoon. The room is open Monday to Friday from 8 am to 11 am and 30min and 30min. Already in the afternoon is the time between 13h and 16h and 30min and 30min.

Besides Bolsitas exists in every bout, a scholar of the psychology course that develops practical observation stage that space , totaling 10 trainees, one per shift, Monday to Friday. Each stage lasts one semester, and the academic forbidden to continue in that space after completion.

Unlike what happens in other teaching hospitals observed, this is vetoed volunteering . Anyone except family and students of psychology can remain in the room.

The space is large playroom, with toys separated by age. The shelves are stripe separating and classifying books, movies, games and toys. Each child is responsible for catching and storing the material caught on the shelf. In the room there is a poster asking users to leave the room exactly the same way they found it: clean and tidy .

When reporting the activities undertaken , both the scholar and the intern report that they call themselves recreationists , but monitors children , as reported by the grantee :

We are here to take care that they do not get hurt, break something, quarrel with someone. We are also responsible for receiving, cataloging and toys or other materials to the room.

In that sense, there is a book in which they record the donations received, and note which children came by that day, what your age, pathology and responsible. According to the report of the grantee:

This practice is seen as important to keep a kind of control the number of children served, and that many come into the room without a charge. Therefore, if something happens quickly know the disease, and the person responsible thereof.

If a child can not get out of his bed , the same must apply to their responsibility to apply to the recreation room and ask the fellow or intern and a toy box. This box contains only objects that can leave the playroom. They usually are damaged or broken toys and they are not exposed in the room for not being more attractive . In this sense, the child who in most times is deprived of various activities to be in a hospital bed , shall be excluded in the exclusion process. A child, under any circumstances can withdraw some toy room. The same goes for books. The answer to such a denial is given to the fact that the child can go high in the period in which the toy is closed and , therefore, there was no one to receive the borrowed material back in time .

In festive periods (Carnival , Easter , children's days , Christmas), there is no manifestation of celebration . The psychologist responsible for Pediatrics reports that there is no reason to celebrate the child's hospitalization. From this, it is clear that there is no directivity in the proposed activities. Accordingly, recreation this happens in a free space (Dias , 2005). Each child chooses the activity you want to accomplish , being mostly dolls and objects that represent a house.

It is noticed that many view as the coordination of fellows and trainees understand that space as a place for observation of human behavior. The imprint is the recreational side. Fellows and trainees, and observe behaviors of the children, also observed the behavior of the family there in the room. Through the observations, it is clear that according Mugiati (2006) these activities are classified as games projective used at different ages. This type of game is to express that someone or something has some feeling or thinking about something when in reality it is the person who performs the projection that feels or thinks . During data collection, one of the children, a girl of 8 years old says :

My doll is in pain, but she did not want to take any medication and she does not like injection

At that moment, the child doll designs for their troubles and pains related to the hospitalization process. From this fragment, when asked about why that space there other professionals in other fields, the scholar, student of psychology, says that understanding the human psyche is, above all, more important than work your body, uttering the final sentence Healthy mind in a healthy body".

CONSIDERATIONS

Based on observations, interviews and data analysis, it can be perceived that childhood is characterized by boundless energy, curiosity, restlessness , great bodily activity , intellectual and emotional child. Several studies indicated the corpus of

work, confirmed that the use of recreation in the treatment of hospitalized people has contributed in improving health in pursuit of quality of life. Thus, it has been seen as one of several ways to improve the psychological aspects of health, as this rule by the Catholic University of Pelotas.

The Hospitalization is considered a stressful event in the life of a child. Factors such as separation, loss of control and injury are considered major. It is noticed that the child can not be something as distressing as the removal of the parents, the family, the usual routines for physical and psychological environment completely foreign. Many of these, when separated into prolonged periods of their mothers, develop a framework of severe depression that often leads to a progressive decline in the development, indeed mitigated through therapeutic recreational activities and toys.

The institution analyzed there is an agreement among professionals in health and education that play is a child's need at every stage of your life. The recreation and therapeutic purposes, this space aims to rescue the child healthy side serving as agency of creativity and expressions of joy while the same has its future behavior analyzed by psychologists. At the hospital, it is understood that recreation should work only with the care of the mind, as if the individual is sure of himself, understand its reality, it will accept your illness and therefore to behave better front the new situation. The analysis allowed the reflection that recreation is considered positive and important in the hospital setting, it has the function of stimulating the creativity of individuals involved, through activities imprint spontaneous and pleasurable, trying to bring the child a moment of escape and distraction that the disease often does not allow.

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THE BENEFITS OF RECREATION FOR CHILDREN: THE HOSPITAL PLAYROOM IN GAME

ABSTRACT

This article aims to map the professional as well as recreational activities in a hospital located in the southern state of Rio Grande do Sul, based on the Federal Law 11,104 of 2005, which provides for the existence of a playroom in hospitals. The methodology used to collect as much as for the data analysis was the Discursive Textual Analysis, drawing on numerous sources of evidence such as document analysis, interviews and observations. From the data collection, it was revealed that the hospital analyzed school relies upon Federal believing that the use of recreation in the treatment of hospitalized people has contributed in improving health in pursuit of quality of life, such as a forms view the various ways to improve the psychological health of the sick child.

KEYWORDS: Recreation. Childhood. University Hospital.

LES AVANTAGES DE LOISIRS POUR LES ENFANTS: UNE SALLE DE JEUX HÔPITAL DE JEU

RÉSUMÉ

Cet article vise à cartographier le professionnel ainsi que des activités récréatives dans un hôpital situé dans l'État méridional de Rio Grande do Sul, sur la base de la loi fédérale sur 11.104 de 2005, qui prévoit l'existence d'une salle de jeux dans les hôpitaux. La méthodologie utilisée pour recueillir, autant que pour l'analyse des données a été l'analyse discursive textuelle, en s'appuyant sur de nombreuses sources de données telles que l'analyse des documents, des entretiens et des observations. De la collecte des données, il a été révélé que l'école de l'hôpital analysé repose sur fédéral croire que l'utilisation des loisirs dans le traitement des personnes hospitalisées a contribué à l'amélioration de la santé dans la poursuite de la qualité de vie, comme une vue des formes les différentes façons d'améliorer la santé psychologique de l'enfant malade.

MOTS CLÉS: loisirs. Enfance. University Hospital.

LOS BENEFICIOS DE LA RECREACIÓN PARA LOS NIÑOS: UN CUARTO DE JUEGOS EN EL JUEGO

RESUMEN

Este artículo tiene como objetivo trazar el profesional, así como actividades recreativas en un hospital ubicado en el sureño estado de Rio Grande do Sul, con base en la Ley Federal 11.104 de 2005, que prevé la existencia de una sala de juegos en los hospitales. La metodología utilizada para recoger tanto como para el análisis de los datos fue el análisis del texto discursivo, a partir de múltiples fuentes de evidencia, tales como el análisis de documentos, entrevistas y observaciones. A partir de la recopilación de datos, se reveló que la escuela del hospital analizado se basa en la creencia de que la Federal uso de recreación en el tratamiento de las personas hospitalizadas ha contribuido a mejorar la salud en la búsqueda de calidad de vida, tales como una vista formas las diversas formas de mejorar la salud psicológica del niño enfermo.

PALABRAS CLAVE: Recreación. Infancia. University Hospital.

OS BENEFÍCIOS DA RECREAÇÃO PARA A CRIANÇA: A BRINQUEDOTECA HOSPITALAR EM JOGO**RESUMO**

Este artigo tem por objetivo mapear os profissionais, bem como as atividades recreativas em um hospital escola localizado na região sul do Estado do Rio Grande do Sul, tendo por base a Lei Federal 11.104 de 2005, que prevê a existência de uma brinquedoteca nos hospitais. A metodologia utilizada tanto para a coleta quanto para a análise de dados foi a Análise Textual Discursiva, valendo-se de inúmeras fontes de evidência como análise documental, observações e entrevistas. A partir da coleta de dados, foi possível perceber que o hospital escola analisado vale-se da Lei Federal por acreditar que a utilização da recreação no tratamento de pessoas hospitalizadas vem contribuindo na melhora da saúde em busca da qualidade de vida, dessa forma vista como uma das diversas maneiras de melhorar os aspectos psicológicos da saúde da criança enferma.

PALAVRAS-CHAVES: Recreação. Infância. Hospital Universitário.