

NURSING RESIDENTS AND ART THERAPY

RESIDENTES DE ENFERMAGEM E A TERAPIA PELA ARTE

RESIDENTES DE ENFERMERÍA Y TERAPIA DE ARTE

Bismarck Liandro de Freitas¹

Rosâne Mello²

Lucinda Maria Santiago Souza Santos³

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Objective: to report the results of art therapy through expressive workshops to intern nurses. **Method:** exploratory descriptive study, with a qualitative approach, with thematic analysis, which presents the experience felt and lived by seven nursing professionals of the first year of residence, who participated in expressive workshops in a large hospital located in the city of Rio de Janeiro, Brazil. **Results:** the following themes emerged: the hospital environment as a stressful factor; art as a cathartic mechanism in the midst of emotional suffering; looking inward and finding balance; the use of art as an instrument to relax, relax and acquire new experiences; expanded concept of health and disease. **Final considerations:** art through expressive workshops brought positive impacts to nursing interns. Research shows that it is possible to promote health through art.

Descriptors: Nursing. Art Therapy. Complementary Therapies. Mental Health.

Objetivo: relatar os resultados da terapia pela arte por meio de oficinas expressivas aos enfermeiros internos. *Método:* estudo descritivo exploratório, de abordagem qualitativa, com análise temática, que apresenta a experiência sentida e vivenciada por sete profissionais enfermeiros do primeiro ano de residência, que participaram das oficinas expressivas em um hospital de grande porte localizado na cidade do Rio de Janeiro, Brasil. *Resultados:* surgiram os seguintes temas: o ambiente hospitalar como fator estressante; a arte como mecanismo catártico em meio ao sofrimento emocional; olhando para dentro e encontrando equilíbrio; o uso da arte como instrumento para relaxar, descontrair e adquirir novas experiências; conceito ampliado de saúde e doença. *Considerações finais:* a arte por meio das oficinas expressivas trouxe impactos positivos aos internos de Enfermagem. A pesquisa mostra que é possível promover saúde por meio da arte.

Descritores: Enfermagem. Terapia pela Arte. Terapias Complementares. Saúde Mental.

Objetivo: reportar los resultados de la arteterapia a través de talleres expresivos a enfermeros internos. *Método:* estudio descriptivo exploratorio, con abordaje cualitativo, con análisis temático, que presenta la experiencia sentida y experimentada por siete profesionales de enfermería del primer año de residencia, que participaron de talleres expresivos en un gran hospital ubicado en la ciudad de Río de Janeiro, Brasil. *Resultados:* surgieron los siguientes temas: el ambiente hospitalario como factor estresante; el arte como mecanismo catártico en medio del sufrimiento emocional; mirar hacia adentro y encontrar el equilibrio; el uso del arte como instrumento para relajarse, relajarse y adquirir nuevas experiencias; concepto ampliado de salud y enfermedad. *Consideraciones finales:* el arte a través de talleres expresivos trajo impactos positivos a los internos de enfermería. Las investigaciones demuestran que es posible promover la salud a través del arte.

Descriptores: Enfermería. Arteterapia. Terapias Complementarias. Salud Mental.

¹ Nurse. Universidade Federal do Estado do Rio de Janeiro. Rio de Janeiro, Rio de Janeiro, Brazil. bismarck.liandro@hotmail.com. <https://orcid.org/0000-0002-2302-8300>.

² Nurse. PhD in Psychiatric Nursing. Associate Professor I at the Universidade Federal do Estado do Rio de Janeiro. Rio de Janeiro, Rio de Janeiro, Brazil. <https://orcid.org/0000-0001-6042-4647>.

³ Nurse. Specialist in Art Therapy. Rio de Janeiro, Rio de Janeiro, Brazil. <https://orcid.org/0000-0003-4026-7511>.

Introduction

Talking about integrative and complementary practices, as well as their benefits for the individual, is certainly not something new; discussions and their origin within public health systems come from a long time. Also in the 1970s, in Alma Ata, Russia, the First International Conference on Primary Health Care took place. After this conference, the first recommendations for the introduction of traditional medicines and complementary practices around the world emerged. In Brazil, the movement began to gain strength after the VIII National Health Conference, held in 1986⁽¹⁾.

Since then, integrative and complementary health practices have gained more and more space, both for users of the Unified Health System (UHS) and for health professionals, focusing attention on the body-soul-mind triad⁽²⁾. Currently, in the SUS, there are 29 integrative and complementary practices, including mention of the use of art, artistic expressions, to promote care. Through art, it is possible to produce an overflow of subjectivity, enabling experimentation by other languages, such as visual, auditory and body. The activities that are developed in these spaces value the creative, imaginative and expressive experiences, that is, literally an appreciation of individuals⁽³⁾.

It is worth mentioning here that artistic expression is a millenary activity. It is considered an expressive, artistic-visual practice, which acts as a therapeutic element in the analysis of the conscious and the unconscious, seeking to interconnect the internal and external universe of the individual through symbolism, promoting physical and mental health. It is a free art, connected to a therapeutic process, focusing on the creative process, in doing, which can unfold in the analysis/investigation of its symbolism, allowing the use of art as a therapeutic resource. The instruments used are painting, modeling, collage, dance, poetry, photography, weaving, body expression, theater, sounds, music or character creation, using art in favor of health⁽⁴⁾.

Among so many individuals who can benefit from the wonders of art is the Nursing intern.

Residency, for a newly graduated nurse, is something very important. The graduation provides the entire theoretical basis for practicing the profession, however, there is also the lack of professional practice, professional experience, which are both charged by managers and health institutions. Thus, the Nursing residency aims at training and specializing this professional who has just left the university.

The reality is that specialization in professional area is imposed and spread in all countries as a natural consequence of the deepening of knowledge. It is virtually impossible to provide complete and adequate qualification only with graduation. Thus, in-service specialization is conceived, due to its recognized and fundamental importance for the training of the professional⁽⁵⁾.

The postgraduate course, along the lines of residency, complies with the guidelines of Federal Law n. 8,080/90, which regulates the UHS. Among its principles is the organization of a system of training of human resources, meeting all levels of education, as well as the development of personnel improvement programs⁽⁵⁾.

It is possible to infer that nursing residency is an excellent opportunity for in-service training, and becomes an object to be achieved by many nursing undergraduate. However, what is not taken into consideration in the vast majority of times is the extensive workload of the nurse intern, the collection, the frustration that can arise between idealism and reality, the great expectation of the professionals of the institution regarding the arrival of new interns, the theoretical activities required by the institution maintaining the residence, finally, several factors that, when added together, can generate moments and stressful situations in the intern.

Residency inserts the newly graduated in the context of the work, providing him with the opportunity to obtain professional experience and the title of specialist in the area of his choice. However, it is necessary to consider that this newly graduated professional, with little or no time of professional activity, may have factors predisposing to the development of physical

and emotional exhaustion, considering that he exercises a profession focused on care/help to the other and who may, in the vast majority of cases, be in intense suffering⁽⁶⁾.

Given the context in which the nurse intern is inserted, it is inferable that it is necessary that he/she be cared for, because, in his/her daily practice, he/she is often exposed to stressful situations, which can lead to emotional illness. Aiming to bring moments of relaxed, socialization, joys, literally a catharsis, the tutoring of the nursing residency of the hospital in question, implemented art as a form of care in view of the needs of interns for a relief, a breathing, promoting therapeutic workshops to the group of interns, and in this context the present research is included. In view of the above, the following research problem arises: How can art, in its various facets, contribute to a better quality of life of these newly graduated professionals?

Thus, the aim of this study is to report the results of art therapy through expressive workshops to intern nurses.

Method

This is a descriptive, exploratory study with a qualitative approach, which presents the experience felt and lived by nurses interns who participated in expressive workshops during the first year of the residency course.

The present study was carried out with the nurses interns of the postgraduate course, at the specialization level, in the form of in-service training along the lines of residence. The residency of the university in question, with emphasis on medical clinic and general surgery, lasts two years, with a weekly workload of 60 hours of work in service and theoretical-practical activities.

The participants' training began in March 2019, ending in March 2021. The in-service training unit where the data were collected for the preparation of this research is located in the city of Rio de Janeiro and is a large Federal Hospital.

The first and second year interns participated in the expressive workshops (R1 - 10 interns and R2 - 9 interns). As inclusion criteria for the preparation of this research, they were invited to report their experience in expressive workshops, only first-year interns, duly matriculated in the nursing residency program who worked in the hospital. As an exclusion criterion, it was established the absence of the intern in the period of data collection due to vacation, medical leave, other leave, no longer being part of the body of interns of the program and the interns of the second year, due to the fact that they are already in the final phase of the residency, and at another time in relation to the expectations and experience regarding being a Nursing intern.

The expressive workshops of the present study were held from March 2019 to January 2020, totaling seven sessions. It is noteworthy that all expressive workshops held during the period were conducted by one of the interns' preceptors, who is a nurse and has a specialization in Art Therapy.

In order to know and identify the participants of the research, a contextualization instrument was delivered, in the form of a multiple choice questionnaire, containing seven questions, as well as an evaluation questionnaire for data collection. The participant was identified using the letter I (intern) followed by space, which was numbered according to the order of delivery of the questionnaires answered.

The instrument used for data collection was a questionnaire with eight open questions, which allowed the analysis of the experience of each intern, as participant of the workshops. All questions focused on uncovering the feelings provoked by the expressive sessions.

The evaluation questionnaire and the participants' contextualization instrument, in the form of a multiple choice questionnaire, were delivered to each participant, with a period of two weeks to be returned. It is noteworthy that the time to complete the questionnaire was about 25 minutes.

After receiving the questionnaires answered, the data were fully analyzed, in order to know the experiences of each intern regarding their participation in expressive workshops.

The study participants were instructed on the purpose, objectives and procedures of the research and signed the Informed Consent Form (ICF). The right to withdraw from the survey was guaranteed if they wished. Participants were guaranteed anonymity due to the use of the acronym used (I) for their identification, as well as the protection of identity, respect for the individuality and privacy of all involved.

The present research has minimal risks, because the information collected was about personal experiences, which could bring participants memories of an embarrassing situation, referring to unpleasant situations that had passed. If there were some kind of impact, the hospital psychology service would be activated to assist the participant.

The benefits of the research for the participants were indirect, as they may contribute to the mental health of the next interns, as

well as contribute to future improvements in the expressive workshop sessions themselves, which did not necessarily bring benefits directly to the intern participating in the research. The data collected for the research will be stored for five years, and after that period, they will be discarded.

The present research was forwarded to the Research Ethics Committee (REC) of the residency-supporting university, because the (co)participating unit does not have its own Postal Address Code (CEP). This research was approved by the Research Ethics Committee of the Universidade Federal do Estado do Rio de Janeiro, Certificate of Presentation for Ethical Appreciation (CAAE): 34978920.5.0000.5285, and met Resolution n. 466/2012 of the National Health Council, which provides for research involving human beings.

Resultados

Chart 1 below demonstrates the results of the contextualization instrument of the research participants.

Chart 1 – Contextualization instrument of research participants regarding marital status, age group, gender, race/color, religion, experience time and motivation (continued)

Intern	Marital status	Age group	Gender	Color/race	Religion	Experience time	Motivation
I 1	Single	26 - 30 years	Female	Brown	Evangelical	1 - 2 years	Acquire experience and for the certificate
I 2	Single	26 - 30 years	Male	Brown	No religion	Up to 1 year	Acquire experience and economic issues
I 3	Married	31 - 35 years	Female	White	Catholic	2 - 3 years	Acquire experience, first job and certificate
I 4	Single	25 years	Female	Black	No religion	Up to 1 year	Acquire experience and for the certificate
I 5	Married	25 years	Female	White	Evangelical	1 - 2 years	Acquire experience

Chart 1 – Contextualization instrument of research participants regarding marital status, age group, gender, race/color, religion, experience time and motivation (conclusion)

Intern	Marital status	Age group	Gender	Color/race	Religion	Experience time	Motivation
I 6	Married	31 - 35 years	Female	Brown	Catholic	Over 3 years	Acquire experience
I 7	Single	26 - 30 years	Female	Black	Catholic	Up to 1 year	Acquire experience and economic issues

Source: Created by the authors.

As shown in Chart 1, four (57.14%) participants were single, three (42.85%) married, aged between 25 and 35 years; the gender of most participants was female, six (85%) female and one (14%) male; regarding race/color, three (42.85%) self-reported as brown, two (28.14%) black and two (28.14%) white; in relation to religion, catholic prevailed with three (42.85%) participants, followed by the evangelical religion with two (28.57%) and two (28.57%) participants without religion; at the time of training during the period of the expressive workshop sessions, the result was exceptionally diverse, three (42.85%) with training time of up to one year, two (28.57%) from one to two years, one between two and three years (14.28%), and one (14.28%) over three years. As for the questioning about the reason that led them to choose to go to residency, the gaining experience factor (100%), followed by obtaining the certificate with three answers (42.85%), economic issues, two participants (28.57%), and first employment one (14.28%) participant.

One fact that certainly draws attention is the gender of the participants, because nursing is considered a predominantly female profession. Women account for about 70% of the total health and social care workforce. It is noteworthy that the context of nursing practice is historically linked to female qualities, because nursing work was directly linked to women's work,

following a sexist and stereotyped concept about women⁽⁷⁻⁸⁾.

Participants were asked if they willingly accepted to participate in the expressive workshop sessions, that is, whether they had the option of not participating in the sessions if they did not want to, and also about the number of times each one was present in the sessions.

All (100%) nursing interns declared that they had willingly accepted to participate in the sessions of expressive workshops, which is considered a relevant data, which shows that the participants of this research were favorable to integrative and complementary health practices. Regarding the number of sessions each participated, four (57.14%) participated in all sessions, two (28.57%) five sessions and one (14.28%) participated in four sessions.

After reading all the answers to the questionnaire with open questions, they were manually transcribed and reread. The objective was to find, extract codes that would later become themes, since the proposal of this study was precisely to make a thematic analysis of the collected data, following the proposal of Virginia Braun and Victoria Clarke. Then, the initial steps proposed by the authors were proceeded, which are: familiarize themselves with the data; generate initial codes; seek themes; review the themes; define and name the themes. Five themes were found, shown in Chart 2, below⁽⁹⁾.

Chart 2 – Thematic analysis of collected data (continued)

CODES	THEMES
Stress, routine, work, relief	The hospital environment as a stressor
Externalize, suffering, anxiety	Art as a cathartic mechanism in the midst of emotional suffering

Chart 2 – Thematic analysis of collected data

(conclusion)

CODES	THEMES
Self-knowledge, enriching, patience, reflection, coping	Looking inward and finding balance
Rest, peace, relaxation, learning, novelty, creativity, curiosity	The use of art as an instrument to relax, unwind and acquire new experiences
Care, health, reality	Expanded concept of health and illness

Source: Created by the authors.

Themes

In the search for themes that transmitted in a global way exactly the central idea or items of meaning of the elements inserted within the participants' responses, the data were analyzed in essence to discover the meaning cores present in the communication. The themes and their contextualization are described below.

The hospital environment as a stressor

The intern nurses, when answering the questionnaire with questions of open answers about their experiences in the sessions of expressive workshops, let the word stress emerge with a certain frequency, which somehow denotes the hospital environment as a factor, a stressful workplace.

I think it is important because it helped reduce psychic suffering, and helps coping with pain, decreases stress. (16).

The most striking evidence about the hospital environment being a stressful place, in the narrative of the participants, was the answer of three members in the question that asked about what led them to accept to participate in the sessions of expressive workshops.

For having rest periods and being out of the sectors. (11).

The need to leave the sector/routine a little bit. Give a relief in stress. (13).

New experiences and the opportunity to renew the mood coming out of the stressful work environment a little. (15).

Art as a cathartic mechanism in the midst of emotional suffering

Some participants reported that having participated in the expressive workshop sessions

brought relief and reflection about their feelings, helping in the expression of what they were feeling.

I think it is valid, because it is a kind of tool that relaxes and helps you express yourself better. (17).

It was enriching, both in my personal life [expression of feelings] and in the professional increased bond with my colleagues. (14).

It is unstressful. (13).

I find it interesting in the sense of knowing what the person/patient is feeling, so that the patient externalizes and can be treated. (11).

Looking inward and finding balance

There was a certain need among the research members to find an emotional equilibrium point, even to meet with themselves, making a rescue of their inner self.

[...] I was able to realize how integrative practices can help us in the way we deal with our concerns and collective problems. (14).

Very good, because in addition to relaxing I was able to have a new look at myself. (15).

[...] the benefit of self-knowledge and being able to stop for a moment disconnecting myself from all external problems. (15).

Important, because many people need to get out of their routine, relax, get to know themselves. (13).

Relaxation, self-awareness, stress relief. (13)

Exchange of experience, brought more expectations for the future. (16).

The use of art as an instrument to relax, unwind and acquire new experiences

It was clear the need for the participants to have something that would make them relax, something that could bring to their memory positive thoughts that would renew their energies.

[...] I like to be with other interns in relaxed moments. (11).

Very enriching, because through art we are able to connect with our interior and have a new look, a new perspective on our reality, contributing to our psychic and physical well-being. (15).

It was gratifying, for having more time with our friends, we shared our experiences. (16).

[...] besides having felt more relaxed. (12).

Patience to perform some activities and develop skills I did not know I knew. (17).

In one of the questions of the data collection instrument, participants were asked to report in three words their feelings for having participated in the sessions of expressive workshops, and the positivity was unanimous, as demonstrated by some answers:

Peace, enriching, relaxing. (17).

Rest, relaxing, sharing. (11).

Self-knowledge, relax, learning. (15).

Relaxing, important, unstressing. (13).

Expanded concept of health and illness

Two participants raised a very relevant theme regarding how to make and promote health, on the use of art as a therapy within health, bringing the theme expanded concept of health/disease.

I find it useful and very effective [from my own experience]. However, it is still seen by many professionals as something without value and without scientific proof. I believe that most assistance is based on light-bard technology. (14).

The hospital environment brings stressful situations that are difficult to resolve. Art therapy, on the other hand, promotes a moment of reflection about our professional practice, prioritizing a moment of internal care with regard to mental and psychological issues. (12).

Discussion

The findings of the present study corroborate what other studies have already shown: that the hospital environment constitutes a truly stressful work environment. Evidence shows that stress is present in several professions, but professionals who deal with interpersonal relationships are part of a work class more affected by the illness generated by stress. These professionals are constantly exposed to stressful events, such as work overload, high responsibility and constant decision making. Work in a hospital does not

occur linearly, being built every day, becoming a factor that generates anxiety. Stress exerts a direct influence on an individual's personal and professional life, and can cause a rupture in the internal balance of the organism⁽¹⁰⁻¹²⁾.

It was possible to perceive in the responses of some participants a certain need to release their feelings, a desire to relax, something they could do to express, move their subjectivities. Art has this power, and based on the narrative of the research members, it can be concluded that expressive workshops were a means to transcend bad moments, configuring themselves as an instrument of care. Art allows the expression of emotions, which lead to the balance of the individual with the environment, promoting a psychic reorganization, that is, a tool for coping and resilience of research participants⁽¹³⁻¹⁴⁾.

It is certain that the symbolic productions and expressions of the senses, mediated by the use of the arts, contribute to the self-knowledge of the individual, in the perception of their patterns of response to situations and in the awareness of their limits, choices and life, aspects that ultimately corroborate greater effectiveness in their relations and social integration and, mainly, with themselves, empowering individuals to a life with autonomy and independence. Being in a hostile environment, which often exposes the individual to stressful stimuli, whether real or perceived stimuli, requires high capacity for the individual to adapt socially to this place. However, it is important that the subject has resources and strategies that help him/her get used to a given reality, something that supports him/her in solving the problem and favors balance in critical moments of tension⁽¹⁴⁻¹⁷⁾.

The participants explained that, through art, it was possible to express the desire to find a solution to the anguish experienced. Art allows the meaning of unconscious contents, which are brought to consciousness and modified, creating something new and solving the conflict, which can be deduced from the explanation of the participants, as a balance point reached. It is worth noting that art allows overcoming thought, generating emotions that the individual is not able to define or even explain. The emotions

that come from art cannot be explained by its elements in isolation, but only by the product that the whole of the work produces, because, more than thought, art involves exactly the feeling. Art allows touching the five senses of a person: vision, hearing, smell, touch and taste. Authors argue that it is possible to construct a therapeutic path through art, which allows evolving in psychological frailties^(16,18).

It has been increasingly evidenced that the involvement with art can contribute to the promotion of health, signaling ways for art and health to generate well-being together. The approximation between art, health and culture gives rise to a new field of knowledge in which health is also related to the possibility of experiencing creativity, of participating in social exchanges, of having access to cultural experiences. Thus, artistic and cultural manifestations are understood as adjuvants in health production, and can reorient the ways of living, getting sick and (self-) caring⁽¹⁸⁾.

It is also possible to say that art is a great instrument of inclusion and production of subjectivities. With artistic experiences, individuals perceive that they have multiple imaginative and creative possibilities, which are free. Through expressive workshops, art itself, it is possible to create new worlds, other ways of experiencing living, new paths to life. Thus, the workshops do not propose a single, but endless possibilities to experience art. A dive into chaos, in which a libertarian experience is allowed⁽³⁾.

Some participants brought in their answers the expanded concept of health. Traditional and complementary medicines are care approaches and therapeutic resources that have developed and play an important role within global health. The World Health Organization (WHO) encourages and strengthens its insertion, recognizing and regulating these practices, products and practitioners in the National Health Systems. The process of creating the UHS has contemplated several proposals for changes in the look on health, with greater emphasis on the integrality of care and the production of care to the individual. In a society in which health

is dominated by health and medications, whose objective is to generate more and more profit and fragment the treatment of patients in specialties that do not always account for the totality of the human being, ways of producing health by looking at the individual as a biopsychosocial being are considered a relief^(1,19-21).

Final considerations

Art, through expressive workshops, brought great positive impacts on the lives of the participants of this research. Certainly, it was important to have in the hospital an instrument to bring relief, moments of leisure and relaxation to nurses in the first year of residency in a medical clinic and general surgery of the hospital unit in question.

It is certain that art was a tool used to move the subjectivity of each participant involved. It can be deduced from this fact by the high adherence of the participants to the integrative and complementary practices in health of the UHS, which has integrality as one of its principles. It is to look at the subject in its entirety, by the broad biopsychosocial aspect.

This research makes it clear that it is possible to work with integrative and complementary practices within a large hospital unit, opening doors for further research to be conducted with this same theme in tertiary health units, as it is a fact that the medical-centered model based on polypharmacy has increasingly proved inefficient.

Collaborations:

1 – conception, design, analysis and interpretation of data: Bismarck Liandro de Freitas, Rosâne Mello and Lucinda Maria Santiago Souza Santos;

2 – writing of the article and relevant critical review of the intellectual content: Bismarck Liandro de Freitas and Rosâne Mello;

3 – final approval for the version to be published: Bismarck Liandro de Freitas, Rosâne Mello and Lucinda Maria Santiago Souza Santos.

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