



Revista de Pesquisa Cuidado é
Fundamental Online

E-ISSN: 2175-5361

rev.fundamental@gmail.com

Universidade Federal do Estado do Rio
de Janeiro
Brasil

de Almeida, Taciana Jacinto; Candido de Oliveira Salvador, Pétala Tuani; Andrade Alves,
Kisna Yasmin; Amaral de Sousa, Isabel Cristina

Playful education in health: report of an experience of "luminescent nurses"

Revista de Pesquisa Cuidado é Fundamental Online, vol. 5, núm. 5, diciembre, 2013, pp.
122-130

Universidade Federal do Estado do Rio de Janeiro
Rio de Janeiro, Brasil

Available in: <http://www.redalyc.org/articulo.oa?id=505750943019>

- How to cite
- Complete issue
- More information about this article
- Journal's homepage in redalyc.org

redalyc.org

Scientific Information System

Network of Scientific Journals from Latin America, the Caribbean, Spain and Portugal

Non-profit academic project, developed under the open access initiative

Universidade Federal do Estado do Rio de Janeiro

Revista de Pesquisa Cuidado é Fundamental Online

ISSN 2175-5361
DOI: 10.9789/2175-5361

EXPERIENCE REPORT

Playful education in health: report of an experience of "luminescent nurses"

Educação lúdica em saúde: relato de experiência dos "enfermeiros luminescentes"

La educación lúdica en salud: informe de una experiencia de "enfermeros luminiscentes"

Taciana Jacinto de Almeida¹, Pétala Tuani Candido de Oliveira Salvador², Kisna Yasmin Andrade Alves³, Isabel Cristina Amaral de Sousa⁴

ABSTRACT

Objective: To describe an account of playful practices of health education Extension Project "Nurses Luminescent" Course of Nursing FACEX. **Method:** This is a report of experience in the practice of health education fostered by students and teachers of the Extension Project "Luminescent Nurses," which is a study of type action research, in the form of collective intervention. **Results:** The systematic description of the practices developed by "Luminescent Nurses" is organized into three pillars: 1) educate through theater, 2) educating through enchanted tales, and 3) educating queries on Growth and Development (CD) humanescents. **Conclusion:** Play activities should continue aiding the perpetuation of nursing care and groundbreaking new ideas, (re) directing traders to look for a new subject, understanding them and rescuing the luminescence and humanescence. **Descriptors:** Health education, Nursing, Public health nursing.

RESUMO

Objetivo: Descrever um relato de práticas lúdicas de educação em saúde do Projeto de Extensão "Enfermeiros Luminescentes" do Curso de Enfermagem da FACEX. **Método:** Trata-se de um relato de experiência das práticas de educação em saúde fomentadas por discentes e docentes do Projeto de Extensão "Enfermeiros Luminescentes", o qual consiste em um estudo do tipo pesquisa-ação, na modalidade de intervenção coletiva. **Resultados:** Para a descrição sistemática das práticas desenvolvidas pelos "Enfermeiros Luminescentes", os resultados estão organizados em três pilares: 1) educando por meio do teatro; 2) educando por meio de contos encantados; e 3) educando em consultas de Crescimento e Desenvolvimento (CD) humanescents. **Conclusão:** As atividades lúdicas devem continuar auxiliando a enfermagem na perpetuação de novas ideias e assistência inovadora, (re)direcionando os profissionais a um novo olhar para os sujeitos, entendendo-os e resgatando a luminescência e a humanescência. **Descritores:** Educação em saúde, Enfermagem, Enfermagem em saúde pública.

RESUMEN

Objetivo: Describir una cuenta de las prácticas lúdicas de educación para la salud Proyecto de Extensión "Las enfermeras luminescentes" Curso de Enfermería FACEX. **Método:** Se trata de un relato de la experiencia en la práctica de la educación para la salud promovida por estudiantes y profesores de extensión del proyecto "Nurses luminiscentes", que es un estudio de investigación de tipo acción, en la forma de intervención colectiva. **Resultados:** La descripción sistemática de las prácticas desarrolladas por "Enfermeras" luminiscentes, los resultados se organizan en tres pilares: 1) educar a través del teatro, 2) la educación a través de cuentos encantados, y 3) la educación de las consultas sobre el Crecimiento y el Desarrollo (CD) humanescents. **Conclusión:** Las actividades de juego deben seguir ayudando a la perpetuación de los cuidados de enfermería y las nuevas ideas revolucionarias, (re) orientar los comerciantes en busca de un nuevo sujeto, su comprensión y rescate de la luminiscencia y humanescencia. **Descriptor:** Educación en salud, Enfermería, Enfermería en salud pública.

¹Nurse, Post Graduate Specialization in Public Health with Focus on Strategy of the Family Health Sciences at the Faculty of Culture and Extension of Rio Grande do Norte (RN FACEX), Natal, Rio Grande do Norte, Brazil. E-mail: dudamell7@hotmail.com. ²Nurse, Mastering in Nursing and a member of the research group research laboratory of care, safety and technologies in health and nursing (LABTEC) Federal University of Rio Grande do Norte, Natal, Rio Grande do Norte, Brazil. E-mail: petalatuani@hotmail.com. ³Nurse, Mastering in Nursing and a member of the research group research laboratory of care, safety and technologies in health and nursing (LABTEC) Federal University of Rio Grande do Norte, Natal, Rio Grande do Norte, Brazil. E-mail: kisnayasmin@hotmail.com. ⁴Nurse, PhD in Education and Embodiment at the Federal University of Rio Grande do Norte, Natal, Rio Grande do Norte, Brazil, Coordinator and lecturer of the Course of Nursing FACEX / Rio Grande do Norte. E-mail: isacristas@hotmail.com.

INTRODUCTION

The Health Reform, which began in the 70s, consisted of a democratic movement, which enabled tools to create driver signing as a paradigm of health activities of the Social Production of Health

This fight brought social legacy as building a health system that epitomized the ideals of the movement. Thus, in 1988, it creates legally Unified Health System (SUS), and regulated by the Organic Laws of Health (LOS), composed by Act No. 8080 of 19 September 1990, and No. 8142 of 28 December 1990, which defined the "[...] conditions for promotion, protection and recovery of health, the organization and functioning of services [...]" and "[...] community participation in the management of the NHS and on intergovernmental transfers of funds [...]", respectively.¹⁻²

Their activities will bring together the broad concept of health, pointing to health as the product of factors beyond the biological characteristics and reach those related to housing, food conditions, education, work, income, leisure, transport, environment, access to health care and freedom, ushering in a new phase in social policies.³

From this perspective, to produce health, actions must pervade the individual work of each professional and reaffirm a teamwork, involving all social sectors through intersectoriality.

Thus, the Health Promotion creates a new way of thinking and operating, which respond to social needs. The organization must engage the attention, while a care under the effects of the illness, which goes beyond the walls of the health units and NHS and addressing the conditions of life of individuals, favoring the expansion of healthy choices at the individual and collective the territory where they live and work. Citizenship shall be exercised in a creative, innovative and capable of building and mobilizing mechanisms of social participation.⁴

As a tool for such actions, there is the Health Education because it is an activity inherent to all shares of SUS, allowing the articulation between levels of system management as well as the formulation of health policies jointly with the activities with users.⁵

Overall, this education it is a set of knowledge and practices aimed at disease prevention and health promotion. Added to this, the construction of knowledge, which is mediated by health professionals, captures the everyday life of individuals, offering subsidies for the adoption of new lifestyles.⁶

Simultaneously, the educational activities guided by the playfulness demonstrate positive results, providing guidance in planning these actions, once they associate the various human dimensions such as cognitive, affective and motor aspects which allow the encounter with oneself, provide enjoyment and learning nice shape. In addition, recreational activities foster situations that help build knowledge and understanding of reality.⁷⁻⁸

Thus, socialization in academic and professional initiatives for Health Education is essential to reaffirm the effectiveness of these activities and, above all, to raise awareness to other researchers incessant search for new knowledge and strategies to increase the production of a larger health.

Given the above, this paper describes an account of playful practices of health education Extension Project "Nurses Luminescent" Course of Nursing FACEX.

METHODOLOGY

It is an experience of practice in health education fostered by students and faculty of the School of Nursing FACEX, members of the Extension Project "Luminescent Nurses." This project is a study of type action research, which is a form of collective intervention, inspired by the techniques of decision making that combines actors and researchers in joint procedures of action to improve a situation accurately.⁹

The educational activities developed in the project have as target pre-school, school and users of health services. The activities take place in public spaces - schools and kindergartens, and the Health Units held by SUS, involving different ages and groups that make up these spaces, which is directly related to the theme promoted in educational practice. Thus, there are no restrictions to the target audience of the project.

The development of educational practices follows the ethical and legal principles that govern scientific research on humans, recommended in Resolution No. 196/96 of the National Health Council, preserving the voluntary participants and anonymity of participants, preventing their identification photos on publicly disclosed.

For a systematic description of health practices developed by "Luminescent Nurses", the results are organized in three thematic pillars, namely: 1) educate through theater, 2) educating through enchanted tales, and 3) educating consultations Growth and Development (CD) humanescent. These pillars will be presented and discussed below.

RESULTS AND DISCUSSION

The Extension Project "Nurses Luminescent" principle is the promotion of health playful practices, integrating the use of theater, the redefinition of fairy tales and the participation of nursing consultations in humanescent spaces as a means of promoting health, encouraging accumulative health.

Moreover, the exercise educational practices include education on the design of the expanded model of health, encompassing the following theoretical pillars: the promotion of activities that seek to popular health education, in view of the ideals of education problematizing proposed by Paulo Freire; a planetary view of education, according to Edgar Morin and the importance of playfulness in teaching concepts in health, according to Jean Piaget.

Thus, we value the observation group of reality itself, dialogue and action transforming living conditions, aiming at empowering the population, through respect to socially constructed knowledge by students in the precepts of the "teacher-student." Thus, we understand the importance of the following principles Paulo Freire: dialogicity, criticality, respect for the knowledge of the students, the embodiment of words, as well as critical reflection on practice.¹⁰

In planetary vision of education, following the assumptions of Edgar Morin, we understand that the health educator should be characterized as a being humanistic, affective, creative, empathetic and responsible. In this context, the educational practices fostered cover various topics, emphasizing the holistic view of the human being and, therefore, implementing actions based on the expanded vision of health.

Furthermore, we assume intent to Piaget, the need to rescue the playfulness in the teaching-learning as a teaching methodology and teaching strategy as complacent, because it assumes the commitment of the individual, uniting the interest and intelligence.¹²

In addition to these assumptions, we aim to rise from the essences of human participants - making them more human - and we are forming agents multipliers popular knowledge. We do it grounded in assumptions that brings the knowledge humanescent are those that emerge from within the self, the human essence, the beautiful, the sensitive, the flow, the betraying of experience.¹³

Given these assumptions, we believe that "art is a partner of nursing care when it comes to educating to promote, protect and restore the health or rehabilitate a person for life in society." Thus, caring for and educating are seen as inseparable and complementary functions of Health Education, this is because these two acts are intrinsic to the human being: "if you do not receive care from birth to death, the human being is unstructured, loses sense and dies, which means that is the care that enables human existence."¹⁵

In short, the extension project "Luminescent Nurses' Health seeks full shares, basing itself on the fundamental binomial care-educate, that through playful practices of health, which are reported below.

Educating through theater...

The main purpose of education is to create people capable of doing new things, not simply repeating what other generations have done. (Jean Piaget).

The theater is a dramatic art, guided by representations of everyday situations and problems, which embraces collective participation and social and awakens creativity and make-believe. This education strategy facilitates the natural process of knowledge construction, since this is by exchanging experiences with the environment surrounding the individual.¹⁶

The benefits of this strategy are immeasurable, since this activity provides subsidies for the individual to understand and transform your reality, providing both a training unbreakable. This is possible because the more problematize, feel more challenged and the more challenged greater diligence responses, enabling the transition from a naive consciousness, marked as the vision of a static reality for critical consciousness, which allows you to see the facts, their causal connections and substantial, and is motivated by creativity and awareness reflection.¹⁷

Thus, among the activities of the Extension Project "Nurses Luminescent" stand out educational practices through the plays. It constitutes the practice of most health developed by the group, reaching during the time period between September 2008 and December 2010, 37 plays presented with various health problems and social rights (dengue, tuberculosis, parasitic diseases, diabetes, hypertension, STDs, prenatal and Elderly Statute, among others), with total estimated audience of 2500 people.

Their development takes place in three steps: 1) planning meeting of the research group, 2) characterization of the researchers in times prior to presentation, and 3) completion of education do.

The first step consists of meetings that are held in the days preceding presentations to the public and have the scope to know the perspectives and suggestions about each component of the educational activity being performed. Added to this, these moments serve to prepare the scripts of speeches of the play. However, the scripts are redirected through audience interaction, which allows greater flexibility and therefore redirecting part by the public's reaction.

Regarding the characterization of the researchers, is the use of employee dress and white coat added paintings of faces and use of clown noses. The characterization as the figure-symbol of the circus, clown, aims to convey joy and arouse the curiosity of the public to the problems worked, and simultaneously reveals our identity to the target audience - the researchers in the field of nursing - and Our paper aims to disseminate knowledge through playfulness, an aspect that is consonant with the mission of social work practice this degree of health.

The log is organized in educational presentations Nurses Luminescent three times, namely: 1) group presentation and exhibition about the activity to be performed, by which time we can see the excitement and expectation of the public, 2) performance of the group through piece itself, emphasizing the interaction with the audience because educational practices should appreciate the construction firm common knowledge that the worldviews of the subjects, and 3) pamphleteering, worked to reaffirm the knowledge and enable them to be disseminated. The leaflets have key information of theme.

Given the foregoing, the exercise of educational "Nurses Luminescent" considers education practices on the design of the expanded model of health. This initiative is critical to modify certain lifestyle habits in health actions accumulators, comprising several themes in search of health promotion in different areas of knowledge construction.

Educating through enchanted tales...

If you describe the world as it is, there will be in your words many lies and no truth. (Tolstói)

Fairy tales are simple symbolic narratives, capable of transmitting complex and subjective experiences emotional experiences the delicate pessoas.¹⁸ consist, therefore, in narratives of facts or events real or imagined with the aim of raising awareness of hazards, disseminate ethical and moral values, present rules of conduct and to educate human groups to practice social habits.¹⁴

The storytelling has always been part of human experience, as a means of educating through the reflective process, which is even more relevant when we talk about children. Play to imitate reality makes the child accepted as best she imagines being and / or could be: would the game between the plane of dreams and desires.¹⁹

Thus, the fairy tale is a stimulus for the development of critical reflections of reality, that through the creation of learning environments, entertainment, that is valued ethical principles in relation to the other: evil is terminated and the well is valued.¹⁸

Fairy tales are relevant methodological resources for health education, using the "make-believe" as a tool to disseminate information accumulative health, encouraging the adoption of healthy lifestyles. The health educator, working with children, should understand the significance of his imagery, enhancing the ability to turn them into disseminators of knowledge through differentiated teaching strategies, given that "every child to play dramatizes his world of make-believe, and the language of the theater provides an approximation of the child with the topic being discussed."¹⁶

From this perspective, the Extension Project "Nurses Luminescent" had the opportunity to participate in a study project dissertative a researcher of the group, and such study has as one of its axes basic signification of fairy tales, making use of this complacent teaching strategy for health education in a playful manner.

The team of "Nurses Luminescent" participated in presenting the stories through theater, uniting them through issues relating to health. Altogether, the project was part of the redefinition of five fairy tales, namely: "Green Riding Hood", which sought to relate the importance of adopting

healthy lifestyles (diet and exercise); "Rapunzel not throw your braids: they have lice, "which was worked on a major public health problem: pediculosis;" Snow white and the seven dwarfs "where the witch in the fairy tales reappears bringing negative health issues, which appear so enchanted as" spells "this character, affecting the ancient dwarves: pediculosis, scabies, worms, tungiasis, disobedience and lack of education;" The three little pigs and the big bad wolf-breath ", where the emphasis was on oral problems arising from not adopt hygienic habits, and "Alice in Wonderland" in which all the characters from previous tales gathered seek the transformation of the witch, who, in the end, delighted by the positive values brought by the stories above, becomes the character Alice, a symbol of an enchanted world where everything is perfect in that lifestyle habits are healthy and positive actions only remaining health.

Meanwhile, work with the redefinition of fairy tales assumed that to health education, we must redeem the playful, build learning environments favorable, in which human creativity and reflection factors are basic. And for both, fairy tales are a working methodology for effective health educator therefore "through its symbolic richness, describe the subjective reality of the human mind. This makes them more real, because it makes us reflect on the darker aspects of our psyche that cannot be achieved directly through conscious thought."²⁰

Educating queries on Growth and Development (CD) humanescents...

We want to be the poets of our own lives, and first in the smallest things. (Nietzsche)

The follow-up activity of Growth and Development (CD) of children aged 0 to 5 years of age is part of the Program for Comprehensive Health Care for Children in the care that is performed through the use of vaccination card, evaluation of weight height, nutritional status, and maternal-family-caregiver as well as the presence and care of complications.²¹

So it is up to the nurse to the consultation CD, watching these small users, analyzing their health conditions and guiding their companions as their maintenance. This activity is provided in primary care, with lower costs and requires a systematic returns to health services is considered the axis integrator of basic actions, enhancing communication and reception, acquiring an effective role of nursing.²²

We combine and understand that "not enough to accommodate all the treatment to be successful. We must take into account the specificities of each patient". At this juncture, it becomes clear that health care can vary according to the profile of each patient. In terms of care with children, this maxim is pertinent, since these small users are complex in their singularities, being available or not, or not interacting with the health professional at the time of consultation.

Therefore, a tool that is increasingly evident in our midst, and we can enjoy-there, using it at times when no interaction is occurring child-professional or even becomes steady there while browsing CD, is the playfulness, that in turn can serve as a facilitator during the service effecting it as desired. Thus, "[...] the playfulness emerges as typified nursing care, expressed with sensitivity and creativity, involving aesthetics, ethics, emotion and intuition of the subject participants care."²³

The use of playfulness with nursing practice during the CD became evident from the experience of "Luminescent Nurses" at the inauguration, the first half of 2009, a consultation room in an existing Unit Family Health Strategy located in the City of Nísia Floresta/RN. The room was completely remodeled to achieve the attendance of children from that region.

The idea of the room devoted entirely to the care of children came from a nurse Health Unit, this professional found himself restless with the architecture of the office traditionally known.

Realizing the need for changes in the ambience, aimed to acquire a more resolute regarding CD queries and interaction with the children attended there.

Meanwhile, the room was remodeled, acquiring colorful paintings on the wall, rubberized mats on the floor sanitized daily, toys, books, children's songs and totally innovative care, in which children are placed on top of rugs and are encouraged to show reflexes, when they are still present, remembering that it is essential during consultation CD observe their psychomotor.

Thus the group "Nurses Luminescent" participated in health education practices conducted humanescent this space for consultations CD, in which we could realize greater collaboration of children and their families, reaffirming the effectiveness of humanescent environment in which the family can actively participate in recreational activities, generating confidence in children and increasing their bond of affection.

Given the toys children showed particular interest, interacting and playing the role of contentment that all are against something colorful and noisy, demonstrating that toys can be used as both educational and therapeutic resources, helping to relieve stress and helping children them to become loose during an atypical situation.

In present day the room is still being used, and the health professional continues rescuing the playfulness inherent in every child there assisted, realizing that the games have their own means of making and universal understanding, and these children learn how to behave "playing" during the consultations CD and start to actively interact, becoming "little" protagonists from his disease process.

CONCLUSION

But education can help us become better, if not happier, and teaches us to take the prosaic part and live the poetic part of our lives. (Edgar Morin).

The use of health education becomes enhanced with fun activities seeking and searching for intrinsic meanings to humans, which transcend their need and embrace the principles of citizenship and rights to quality care and resolute.

The language used in these recreational activities for employees and the staff of "Nurses Luminescent" demonstrates how it is beneficial and cost their jobs, making health staff and users to interact with each other, forming a communication link, and host of light technologies.

Furthermore, it is important that health professionals are able to recognize and identify the cultural diversity of users, and can tailor their care activities to social and epidemiological profile of each subject, respecting their uniqueness and subjectivity.

Therefore, it is transforming the subjects mister accumulators of knowledge, aiming to maintain their health, distributors and disseminators of knowledge and attitudes of scientific information that will assist in the continuity of life and community in a health region.

Educating health care and education requires understanding how elements intrinsic and essential to human. Moreover, rescue and playfulness humanescence health practices becomes crucial in apprehending that the health professional is configured as a subject mediator in the process of accumulating shares of fostering health, encouraging the transformation of lifestyles in a permanent process of empowerment population.

After the conception of this work, we realized that playful activities should continue assisting nursing perpetuation of new ideas and innovative health care, which will break old paradigms, (re)directing traders to look for a new subject, understanding them and rescuing the luminescence and humanescence in each one.

REFERENCES

1. Senado Federal (BR). Lei nº 8.142 de 28 de dezembro de 1990. Dispõe sobre a participação da comunidade na gestão do Sistema Único de Saúde (SUS) e sobre as transferências intergovernamentais de recursos financeiros na área da saúde e dá outras providências. Diário Oficial da União 1990; 28 dez.
2. Senado Federal (BR). Lei nº 8.080 de 19 de Setembro de 1990. Dispõe sobre as condições para a promoção, proteção e recuperação da saúde, a organização e o funcionamento dos serviços correspondentes e dá outras providências. Diário Oficial da União 1990; 19 set.
3. Duncan BB, Schmidt MI, Giugliani ERJ. Medicina ambulatorial. 3ª ed. Porto Alegre: Artmed; 2006.
4. Ministério da Saúde (BR). Secretaria de Vigilância em Saúde. Política nacional de promoção da Saúde. Brasília: Ministério da Saúde; 2006.
5. Ministério da Saúde (BR). Secretaria de Gestão Estratégica e Participativa. Departamento de Apoio à Gestão Participativa. Caderno de educação popular e saúde. Brasília: Ministério da Saúde; 2007.
6. Alves VS. A health education model for the Family Health Program: towards comprehensive health care and model reorientation. Interface - Comunic., Saúde, Educ. [periódico online] 2005; [citado 2011 jun 5]; 9(16):[aprox. 14 telas]. Disponível em: <http://www.scielo.br/pdf/icse/v9n16/v9n16a04.pdf>
7. Alves KYA, Salvador PTCO, Sampaio ATL, Salvador DSCO. Compreensão do uso dos territórios da saúde: uma abordagem para o processo de trabalho em Enfermagem na Estratégia Saúde da Família. In: Anais do 7º Encontro Nacional e 1º Encontro Internacional com o Pensamento de Milton Santos; 2009; Natal, RN.
8. Pereira LHP, Bonfin PV. Brincar e aprender: um novo olhar para o lúdico no primeiro ano do ensino fundamental. Educação (UFSM) [periódico online] 2009; [citado 2011 jun 5]; 34(2):[aprox. 16 telas]. Disponível em: <http://cascavel.ufsm.br/revistas/ojs-2.2.2/index.php/reeducacao/article/view/241/108>
9. Figueiredo PR. Pesquisa-ação; 2009. Disponível em: <http://www.webartigos.com/articles/21496/1/Pesquisa-Acao/pagina1.html>
10. Freire P. Pedagogia da autonomia: saberes necessários à prática educativa. 31ª ed. São Paulo : Paz e Terra; 1996.
11. Morin E. Os sete saberes necessários à educação do futuro. 9ª ed. São Paulo: Cortez; 2004.
12. Piaget J. A formação do símbolo na criança. Rio de Janeiro: Zahar; 1978.
13. Cavalcanti KB. Corporeidade e a ética do sentido da vida na educação: para florescer as sementes da pedagogia vivencial. Revista Nova Atena de Educação Tecnológica [periódico online] 2004; [citado 2011 jun 5]; 7(3):[aprox. 10 telas]. Disponível em: http://www.ifma.edu.br/SiteCefet/publicacoes/artigos/revista13.7.2/Katia_Brandao_Pedagogia_vivencial.pdf

14. Trezza MCSF, Santos RM, Santos JM. Trabalhando educação popular em saúde com a arte construída no cotidiano da enfermagem: um relato de experiência. *Texto Contexto Enferm.* [periódico online] 2007; [citado 2011 jun 5]; 16(2):[aprox. 9 telas]. Disponível em: <http://www.scielo.br/pdf/tce/v16n2/a17v16n2.pdf>
15. Boff L. Saber cuidar: ética do humano - compaixão pela terra. Petrópolis: Vozes; 2000.
16. Nazima TJ, Codo CRB, Paes IADC, Bassinell GAH. Orientação em saúde por meio do teatro: relato de experiência. *Rev. Gaúcha Enferm.* [periódico online] 2008; [citado 2011 jun 5]; 29(1):[aprox. 5 telas]. Disponível em: seer.ufrgs.br/RevistaGauchadeEnfermagem/article/download/5313/3014
17. Alves KYA, Dantas CN. "Accident! What to do?": a report of experience for action on the concepts of basic life support for teachers of Rio Grande do Norte municipality. In: Matos MYC, Lopes MJ, Nóbrega MML, Silva AO, Nogueira JAN. *Anais do II Colóquio Luso-brasileiro sobre Saúde, Educação e Representações Sociais e III Fórum Internacional de Saúde, Envelhecimento e Representações Sociais*; 2010; João Pessoa, PB.
18. Vieira IMC. O Papel dos Contos de Fadas na Construção do Imaginário Infantil. *Revista criança do Professor de Educação Infantil.* 2005; 38:10-11.
19. Fortuna TR. Papel do Brincar: Aspectos relevantes a considerar no trabalho lúdico. *Revista do Professor.* 2002; 18(71): 9-14.
20. Figueiredo TA. A magia dos contos de fadas. *Psicopedagogia OnLine: Educação e Saúde*; 2000. Disponível em: <http://www.psicopedagogia.com.br/artigos/artigo.asp?entrID=42>
21. Ministério da Saúde (BR). Secretária de Atenção à Saúde. Departamento de Ações Programáticas Estratégicas. Agenda de compromissos para a saúde integral da criança e redução de mortalidade infantil. Brasília: Ministério da Saúde; 2005.
22. Figueiredo GLA, Mello DF. A prática de enfermagem na Atenção à Saúde da Criança em Unidade Básica. *Rev. Latino-am Enferm.* [periódico online] 2003; [citado 2011 jun 5]; 11(4):[aprox. 8 telas]. Disponível em: <http://www.scielo.br/pdf/rlae/v11n4/v11n4a19.pdf>
23. Beuter M, Alvim NAT. Expressões lúdicas no cuidado hospitalar sob a ótica de enfermeiros. *Esc. Anna Nery R. Enferm.* [periódico online] 2010; [citado 2011 jun 5]; 14(3):[aprox. 8 telas]. Disponível em: <http://www.scielo.br/pdf/eas/v14n3/v14n3a19.pdf>
24. Lemos L, Pereira WJ, Andrade JS, Andrade ASA. Vamos cuidar com brinquedos? *Rev. Bras. Enferm.* [periódico online] 2010; [citado 2011 jun 5]; 63(6):[aprox. 4 telas]. Disponível em: <http://www.scielo.br/pdf/reben/v63n6/13.pdf>

Received on: 07/09/2011

Required for review: no

Approved on: 21/03/2013

Published on: 01/12/2013

Corresponding Address:

Avenida Senador Salgado Filho, sn - Dep de Enfermagem- Lagoa Nova - Natal - Rio Grande do Norte. UFRN

CEP: 59078970. Departamento de Enfermagem

E-mail: kisnayasmin@hotmail.com