



Implementation of a play area in a pediatric hospitalization unit through university outreach

Implementação de espaço lúdico em unidade de hospitalização pediátrica por meio de extensão universitária

Implementación de un área de juegos en una unidad de hospitalización pediátrica a través de la extensión universitaria

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ABSTRACT

Objective: to describe the experience of implementing a play area in a pediatric hospitalization unit as part of a university outreach project. **Methods:** this is an experience report detailing the creation of a play area in the pediatric unit of a public university hospital located in the interior of the state of São Paulo. The 5W2H management and planning tool was used to structure the actions. **Results:** activities in the play area involved 1,184 children diagnosed with chronic and acute illnesses, ranging in age from seven months to 17 years, between October 2022 and September 2024. During free play with toys and games, as well as artistic workshops, children were able to play without restrictions despite their health challenges. These activities were supported by undergraduate and graduate students, including scholarship holders, from various fields of study. **Conclusions and implications for practice:** play areas and professionals who encourage play are essential to mitigate the effects of illness and hospitalization. University outreach programs can also contribute to the professional and civic development of students, fostering a sense of engagement and responsibility.

Keywords: Child, Hospitalized; Pediatric Nursing; Teaching; Family; Hospitals, University.

RESUMO

Objetivo: descrever a experiência de implementação de um espaço lúdico em uma unidade de hospitalização pediátrica, promovida por um projeto de extensão universitária. **Métodos:** trata-se de um relato de experiência sobre a criação de um espaço lúdico em uma unidade pediátrica de um hospital universitário público localizado no interior do estado de São Paulo. A ferramenta de gerenciamento e planejamento 5W2H foi utilizada para organizar as ações. **Resultados:** as atividades no espaço lúdico envolveram a participação de 1184 crianças diagnosticadas com doenças crônicas e agudas, com idades variando entre sete meses e 17 anos, no período de outubro de 2022 a setembro de 2024. Durante as brincadeiras livres com jogos e brinquedos, além das oficinas artísticas, constatou-se que, mesmo enfrentando condições de saúde adversas, as crianças puderam brincar sem impedimentos. As atividades foram conduzidas com o apoio de graduandos e pós-graduandos, bolsistas, de diversas áreas do conhecimento. **Conclusão e implicações para a prática:** espaços lúdicos e profissionais que incentivem o brincar são fundamentais para minimizar os impactos da doença e da hospitalização. A extensão universitária contribui para a formação dos estudantes, não apenas como profissionais, mas também como cidadãos conscientes e engajados.

Palavras-chave: Criança Hospitalizada; Enfermagem Pediátrica; Ensino; Família; Hospitais Universitários.

RESUMEN

Objetivo: describir la experiencia de implementar un área de juegos en una unidad de hospitalización pediátrica como parte de un proyecto de extensión universitaria. **Métodos:** este es un informe de experiencia sobre la creación de un área de juegos en la unidad pediátrica de un hospital universitario público ubicado en el interior del estado de São Paulo. Se utilizó la herramienta de gestión y planificación 5W2H para estructurar las acciones. **Resultados:** las actividades en el área de juegos involucraron a 1,184 niños diagnosticados con enfermedades crónicas y agudas, con edades que iban desde los siete meses hasta los 17 años, durante el período de octubre de 2022 a septiembre de 2024. Durante el juego libre con juguetes y juegos, así como en los talleres artísticos, los niños pudieron jugar sin restricciones a pesar de sus desafíos de salud. Estas actividades fueron apoyadas por estudiantes de grado y posgrado, incluidos becarios, de diversas áreas del conocimiento. **Conclusión e implicaciones para la práctica:** las áreas de juegos y los profesionales que fomentan el juego son fundamentales para mitigar los efectos de la enfermedad y la hospitalización. Los programas de extensión universitaria también pueden contribuir al desarrollo profesional y cívico de los estudiantes, fomentando un sentido de compromiso y responsabilidad.

Palabras-clave: Niño Hospitalizado; Enfermería Pediátrica; Enseñanza; Familia; Hospitales Universitarios.

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INTRODUCTION

In Brazil, university-level education is structured around three inseparable pillars: teaching, research, and outreach, as established by Article 207 of the 1988 Federal Constitution (CF/88). This study specifically focuses on the pillar of university outreach, a concept that has evolved significantly over the past decades. Today, outreach is recognized as a key driver in fostering and strengthening the relationship between universities and communities. Through an interdisciplinary educational approach, it encompasses academic activities that integrate teaching and research, driving transformations in the interactions between faculty, undergraduate students, and society.¹

Regulatory frameworks, such as the National Education Plan (PNE) 2014–2024 and Resolution No. 07/2018 by MEC/CNE/CES, establish guidelines for universities to transfer the scientific knowledge generated by research to society in various contexts. These regulations mandate that at least 10% of the total undergraduate credit requirements be fulfilled through participation in university outreach programs and projects. This measure aims to integrate outreach into the curriculum, particularly in fields of significant social relevance, such as Nursing.^{1,2}

Of the various settings for developing outreach activities in the health care field, this study will focus on the pediatric hospital environment, where recreational activities are conducted for hospitalized children and families.

Playing is a rewarding and enjoyable activity for children, fostering the development of physical, emotional, cognitive, and social aspects. Through play, children stimulate their creativity, build and improve resilience, and develop problem-solving skills. Moreover, it is considered an effective strategy for strengthening parent-child interactions, promoting comprehensive child development.^{3,4}

In Brazil, legal documents that acknowledge the importance of play in a child's life also highlight specific requirements for the hospital environment, such as the obligation for pediatric institutions to provide dedicated spaces for recreational activities. However, despite these legal guarantees, there remains a gap between the necessary investments and resources for the effective implementation of these rights in society.^{5,6} This situation also reflects the still-nascent social awareness of the significance of play in fostering child development and well-being.⁷⁻¹¹

Studies indicate that outreach projects promoting recreational activities in healthcare can help uphold children's right to play.^{7,11,12} These projects bridge theory and practice by implementing activities such as play during hospitalization. They also facilitate the transfer of knowledge among undergraduates, postgraduates, and professionals, reshaping prior conceptions of care technologies, such as the use of toys and storytelling.^{7,12} Furthermore, outreach initiatives are essential for strengthening the Brazilian National Humanization Policy, thereby ensuring comprehensive care for children and families, and fostering child development.^{3,7,11,12}

Hospitalization is a challenging and stressful experience for both children and families. Hospitalization can lead to feelings of uncertainty, anger, helplessness, and anxiety, especially in

the face of an unfamiliar environment, painful procedures, and interactions with strangers. The hospital setting and the experiences it imposes on children can disrupt their developmental process, potentially causing psychological imbalances that impact learning, behavior, and overall health.^{6,13-15}

Therefore, to ensure comprehensive care for hospitalized children, it is essential to create an environment and provide stimuli that support their development while respecting the characteristics and needs of each age group and developmental stage. Continuous interaction should be the primary driver of child development. In this context, play within the hospital setting offers numerous benefits, such as helping children understand invasive procedures and redefining their perception of the hospital environment.¹⁴⁻¹⁸

In this context, during the COVID-19 pandemic, recreational activities conducted by a specific Non-Governmental Organization (NGO) in the pediatric hospitalization unit of a public hospital were suspended and not resumed. Because of the importance of play in the hospital environment for children and adolescents, alongside the legal frameworks that guarantee this right, the relevance of this report is emphasized. The objective is to describe the experience of implementing a recreational space in a pediatric hospitalization unit, facilitated through a university outreach project.

METHOD

This is an experience report aimed at describing the implementation of a recreational space in the pediatric hospitalization unit of a public university hospital. The initiative was performed through the university outreach project titled “Espaço Brincar – developing recreational activities with hospitalized children and families.”

The pediatric hospitalization unit is located within one of the largest high-complexity university hospitals and a public healthcare reference center in the state of São Paulo. The hospital fulfills academic obligations, including teaching, research, and outreach, and its activities are funded by the Brazilian Unified Health System (SUS) and a state university located in the interior of São Paulo.

The unit has 70 beds, 50 of which are allocated for clinical and/or surgical cases, distributed across three nursing stations, while 20 are reserved for children or adolescents requiring intensive care.

The physical facilities of the pediatric hospitalization unit, together with the intensive care unit, form a quadrant in the external area, allowing children, adolescents, and families to freely use the space. This outdoor area, measuring 370 m², serves as the setting for the recreational activities organized by the “Espaço Brincar” project.

The physical structure of the recreational space already included, prior to the COVID-19 pandemic, a playroom maintained by the NGO. This space aims to promote hospital humanization through play. However, during the COVID-19 pandemic, the organization ceased its activities and donated its collection of toys to the outreach project.

The “Espaço Brincar” project was developed through an agreement between pediatric nursing faculty from a public university’s undergraduate program and the hospital unit’s management. The planning phase used the 5W2H tool, which aids in the planning and implementation of actions by organizing workflows, defining the responsibilities of participants, and identifying the actions and resources needed to complete the project. By systematically applying this tool, the project’s workflows and key elements were effectively structured.^{19,20}

The 5W2H method comprises five main steps: “What?” (What will be done?), “Why?” (Why will it be done?), “Where?” (Where will it be done?), “When?” (When will it be done?), and “Who?” (Who will carry it out?), which make up the 5W of the acronym. Additionally, it includes “How?” (How will it be developed?) and “How much?” (How much will it cost?), completing the 2H (Chart 1).¹⁹

The project was reviewed and approved by the Research and Outreach Committee (COPEX) and the Faculty of Nursing Council at the university. Following this approval, it became necessary to seek financial support from funding agencies to procure supplies for organizing the inventory of the recreational space.

As a result, the “Espaço Brincar” project received targeted funding to integrate outreach into the curriculum. This support allowed for the adaptation and organization of the physical space, the planning of recreational activities, and the allocation of the human resources necessary to carry out the project.

The entire process, including the implementation of the outreach project, took place between September and October 2022. Activities began on Children’s Day, October 12 of that year, and continue to this day.

Currently, the outreach project benefits from the contributions of undergraduate and graduate students as well as scholarship recipients who voluntarily participate in outreach activities. Their involvement is driven by personal affinities and interest in the subject matter. Additionally, ongoing research at both undergraduate and graduate levels focuses on pediatric nursing, the care of hospitalized children and families, and the use of recreational activities.

This study adheres to national and international ethical guidelines. As it does not involve human subjects, review by a research ethics committee was not required. Ethical considerations regarding integrity and respect for participants and families were fully ensured in this experience report.

RESULTS

The outreach project “Espaço Brincar – developing recreational activities with hospitalized children and families” was created with the primary goal of promoting recreational activities for hospitalized children and adolescents, aiming to humanize care during treatment in the pediatric unit. In addition to this main objective, the project also aimed to 1) provide students from various fields of study the opportunity to interact with children and adolescents in the pediatric hospital environment and 2) foster an understanding of the importance of play and its impact on health recovery.

Supported by faculty, students engage in recreational and educational activities, strengthening the relationship between the university and society by implementing actions that contribute to the humanization of care in the pediatric hospital setting.

Chart 1. Steps of the 5W2H tool for planning and implementing Espaço Brincar. Campinas (SP), Brazil, 2024¹⁹.

What will be done? (What?)	Implement a recreational space for hospitalized children, adolescents, and families in a hospital unit.
Why will it be done? (Why?)	Hospitalized children and adolescents have the right to play during hospitalization. This initiative ensures the enforcement of legal frameworks for this population, providing moments of distraction away from the bed and opportunities to express emotions, redefining the experience of illness.
Where will it be done? (Where?)	Recreational activities will take place in the outdoor area of the pediatric hospitalization unit.
When will it be done? (When?)	Activities will take place on Tuesdays and Thursdays in the afternoon, lasting three hours.
Who will carry it out? (Who?)	Pediatric nursing faculty, nurses, undergraduate and graduate students, and scholarship recipients.
How will it be developed? (How?)	By promoting individual and group recreational activities, structured or free play, games, moments of relaxation with artistic activities, and thematic events on commemorative dates.
How much will it cost? (How much?)	The estimated annual cost is approximately 2,000 BRL, funded by donations, university contributions, and grants from funding agencies.

The management and organization of the outreach project were overseen by three faculty members, all nurses. From the planning stage to the implementation of “Espaço Brincar”, the goal was to integrate the university’s three pillars.

The physical environment was designed to be a safe and unique space aimed at bringing joy, fun, distraction, and relaxation to children and adolescents. Additionally, efforts were made to uphold their right to play, recognizing its importance in the health recovery process.

To do so, the physical space was renovated. Walls were painted bright colors and decorated with illustrations, and the area was thoroughly cleaned. At the same time, the condition of the donated toys was assessed and those deemed suitable for use were selected in accordance with the regulations of National Institute of Metrology, Quality and Technology (Inmetro)⁶ and the guidelines of Hospital Infection Control Committee (CCIH) at hospital.

Since the toy collection remained unused for 31 months due to the social isolation caused by the COVID-19 pandemic, toys had to be disinfected according to the general recommendations of Brazilian National Health Surveillance Agency (ANVISA) and CCIH.⁶

After completing these steps, toys were organized based on the classification proposed by International Council for Child’s Play (ICCP) and psychologist André Michelet. This classification currently considers two complementary aspects for categorizing toys: 1) psychological classification, which accounts for the stages of child development; 2) classification by toy families.²¹

In “Espaço Brincar”, toys were classified into families based on their influence on child development. The categories include:

1) families focused on sensorimotor activities; 2) physical and psychomotor activities; 3) creative activities; 4) intellectual activities; 5) activities representing the technical world; 6) activities promoting affective development; and 7) activities stimulating social relationships.²¹ For this organization, the toys were individually sorted and listed in an Excel® spreadsheet with detailed identification and descriptions, including colors, quantities, and materials. Subsequently, the collection was classified into the corresponding toy families.

All the toy families and art materials were stored in transparent organizer boxes with lids. Each box was labeled with the name of the corresponding family and its specific particulars. (Chart 2).

Although the project received all the necessary material resources for its operation, it initially lacked human resources. So, “Espaço Brincar” operated solely under the care of the coordinating faculty members, prompting the need to explore alternatives to expand the team. An outreach course open to undergraduate students from any field of study was created to address this situation. Additionally, scholarships for student retention and outreach were made available through the Student Support Service and the Office of the Vice Provost for Outreach and Culture (PROEC).

Currently, the activities of “Espaço Brincar” benefit from the collaboration of up to ten students enrolled in the proposed course, which is offered each semester, as well as five scholarship recipients. Among these scholarship holders, three are undergraduate students, while two are graduate students—one at the master’s level and the other pursuing a doctorate.

The outreach course has a total workload of 90 hours, distributed over six weekly hours. Since its inception, it has

Chart 2. Brinquedos que compõem cada família da classificação. Campinas (SP), Brasil, 2024²¹.

Toy family	Toys
1. Toys for sensorimotor activities	Rattles and sound toys, hammering toys, rocking horses, shape-sorting boxes with geometric holes, plastic balls, rings and colored blocks, stackable and interlocking pieces. Plastic and rubber animals, dolls, and pushcarts for first steps.
2. Toys for physical activities	Tricycles and pedal cars, simple toy airplanes, plastic bowling sets, colorful plastic balls, and indoor playground slides.
3. Toys for intellectual activities	Puzzles with varying difficulty levels, toys with spinning and screwing pieces for construction and stacking, dominoes, and memory games.
4. Toys representing the technical world	Microphones, cash registers, miniature stoves, mixers, blenders, irons and ironing boards, vehicles, boats, motorcycles, tractors, and robots.
5. Toys for affective development	Articulated dolls and dolls with changeable clothing, Barbie®-style dolls, character and hero figures, doll accessories, toy telephones, household utensils, tools like drills, screws, screwdrivers, and medical kits.
6. Toys for creative activities	Materials for cutting and pasting, yarns and threads, origami paper, coloring sheets, colored pencils, markers, gouache paint, modeling clay, and musical toys.
7. Toys for social relationships	Card games (e.g., playing cards, Uno, <i>jogo do mico</i>), multiplayer games with pre-set rules, skill and dexterity games, and chance-based games (e.g., bingo).

included students from various undergraduate programs, such as Nursing, Speech-Language Therapy, Education, Civil Engineering, Agricultural Engineering, Chemical Engineering, Media Studies, Visual Arts, Performing Arts, Physical Education, Statistics, and Chemistry. Preparing the environment to facilitate play is essential to ensure activities are conducted safely. To this end, students enrolled in the course and scholarship holders set up rubber mats in the outdoor area of “Espaço Brincar,” where toys are arranged. Play sessions always occur under the supervision of one of the faculty coordinators, who guides the activities. Additionally, faculty member oversees both the children and the students, ensures the hygiene of the environment and toys, and maintains organization according to the toy family classification.

In addition to free play, “Espaço Brincar” offers various activities for children, such as slime making, face painting, origami, board and card games, painting with gouache, workshops using modeling clay and recycled materials. Furthermore, theoretical classes and discussions of scientific articles are conducted among faculty and students, providing a foundation for the importance of play for hospitalized children, adolescents, and families.

Several guidelines had to be followed to have access to “Espaço Brincar”: children, adolescents, and family members must sanitize their hands with 70% alcohol before starting play; remove their shoes to walk on the rubber mats; and, in the case of children and adolescents, always be accompanied by a guardian. Additionally, it is agreed that toys cannot be taken to hospital beds. At the end of the play session, everyone is invited to help organize the toys.

Over its 24 months of operation, from October 2022 to September 2024, “Espaço Brincar” welcomed 1,184 children and adolescents diagnosed with chronic and acute illnesses. Participants, aged between seven months and 17 years, were using devices for intravenous medications, feeding catheters, and/or oxygen therapy, accompanied by their families. The number of participants per session varied between 6 and 18.

Despite facing adverse health conditions, children were able to play without restrictions. Initially, family members limited themselves to observing the activities but, when encouraged, joined in and experienced the joy of playing alongside children. During these moments, some family members made video calls to other relatives, showcasing the child's clinical improvement as they resumed typical childhood activities, even while in recovery.

Although the coordinators faced some challenges during the process, particularly at the start of the activities, they were able to identify and implement improvements. These measures ensured that the activities were conducted safely and meaningfully for children, adolescents, and family members with the aim of encouraging their participation and promoting comprehensive care.

DISCUSSION

“Espaço Brincar” serves as a catalyst for raising awareness and fostering social commitment in student training. From its inception, the following characteristics were emphasized: interdisciplinarity, educational focus, scientific foundation, and

political dimension. The project upholds the rights of hospitalized children and adolescents, promotes education across various fields of knowledge, and strengthens the university's pillars of teaching, research, and outreach.^{1,2}

Student participation in interdisciplinary outreach activities and projects provides a valuable opportunity to develop skills such as leadership, teamwork, communication, problem-solving, critical thinking, and the maturation of ideas from diverse perspectives. These are essential competencies that higher education institutions should actively encourage.^{1,2}

When it comes to the benefits of scholarship student participation, studies indicate that student retention scholarship programs have positive impacts. These programs enhance students' commitment to their studies, facilitate access to research projects, promote knowledge expansion, and foster the development of interpersonal skills. In this context, financial assistance goes beyond merely covering transportation and meal costs. It also enables the purchase of study materials and contributes to improved academic performance throughout the course.¹⁸

Student participation through scholarships not only supports their university retention but also fosters their development as both professionals and citizens. However, some challenges may arise, often difficult to manage, such as delays, frequent absences, and unsatisfactory performance in the proposed activities. While this is a complementary activity to their education, it directly involves the daily lives of hospitalized children, adolescents, and families, who are experiencing a delicate and significant moment in their lives. Witnessing a child's illness is an experience that brings immense suffering, thereby requiring care and sensitivity in carrying out these activities.

In the context of teaching practices within outreach projects and activities, the literature highlights that outreach facilitates the development of critical thinking and promotes the integration of theory and practice, contributing to the enhancement of teacher training. Despite challenges, studies indicate that educational institutions in Brazil have the necessary resources to bridge the gap between theory and practice. Moreover, they have the potential to make outreach a fundamental commitment to fulfilling the three university pillars: teaching, research, and outreach.^{1,2}

Therefore, university outreach plays a crucial role in fostering the development of children and adolescents through play. This is evident in activities that encourage the acquisition and enhancement of skills during free play and artistic endeavors. Additionally, it contributes to personality development and the maturation of the ability to cope with the adversities encountered during hospitalization, while also strengthening the relationships between children, families, and community.^{6,22}

Play is a fundamental right for children and adolescents, offering benefits tied to the implementation and promotion of an environment and stimuli that support their development while respecting the characteristics and needs of each age group and developmental stage. Interaction is the primary driver of child development.^{13,22} Thus, to ensure comprehensive care for

this population, it is essential to promote recreational activities in hospital.

Recreational activities performed by the “Espaço Brincar” project confirmed that play during hospitalization significantly enhances the care provided to hospitalized children, adolescents, and families. These activities create a cheerful and calming environment, foster interactions among participants, stimulate child development, encourage emotional expression, and promote relaxation.^{6,13,22,23}

Hospitalization represents an interruption and limitation of the daily activities of children and adolescents. Providing recreational activities on commemorative dates allows them to recall memories of their lives outside the hospital, which brings them comfort and a sense of connection to their usual routines.

Family members of hospitalized children who participated in recreational activities during hospitalization reported recognizing the importance of the recreational space for supporting ongoing child development. They viewed it as one of the primary sources of distraction in the hospital environment. Conducting activities within outreach projects focused on playing with hospitalized children and adolescents ensures the fulfillment of childhood needs and rights. Additionally, it enables family co-participation in play, which strengthens the family-centered care model.²²

“Espaço Brincar” can be considered a two-way pathway. It transforms the reality of the pediatric hospital environment by promoting knowledge translation and health, while simultaneously benefiting teaching and research. Furthermore, it significantly contributes to student development and the enhancement of teaching practices.

CONCLUSION AND IMPLICATIONS FOR PRACTICE

Appropriate spaces and individuals who encourage play are essential for hospitalized children, adolescents, and families, helping to mitigate the impacts of illness and hospitalization. In the context of university outreach, it is possible to foster the implementation of projects that promote such initiatives, while also contributing to the development of students as critical and reflective professionals. Outreach courses have the potential to support students' civic education, with funding being a critical factor in enabling these actions.

Thus, “Espaço Brincar” is believed to have fostered meaningful interactions between children, adolescents, and families, facilitated by the involvement of students participating in the curricular integration of university outreach. In line with the university's pillars, the entire implementation process of the “Espaço Brincar” project adheres to the recommendations outlined in the literature.

This report has the potential to contribute to the establishment of recreational spaces that uphold the rights of hospitalized children and adolescents through initiatives that impact the university pillars of teaching, research, outreach, and their integration into student training. Additionally, this study can serve as a tool and guide for outlining the steps involved in implementing

recreational interventions, covering aspects such as scope, justification, location, frequency, responsible parties, approach, and required budget.

Furthermore, this work can significantly contribute to pediatric nursing by demonstrating that implementing recreational activities in the pediatric hospital setting is a viable health care intervention strategy. This approach reinforces the family-centered care model.

Finally, considering that the outreach project was implemented in only one pediatric hospitalization unit, the main limitation of this report lies in its focus on the experiences of faculty and nurses. Therefore, further studies are needed to explore the perspectives of children, adolescents, families, and professionals regarding their experiences during the activities promoted by “Espaço Brincar”.

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DATA AVAILABILITY RESEARCH

Data are available upon on demand to authors.

CONFLICT OF INTEREST

No conflict of interest.

REFERENCES

1. Bezerra ANS, Sousa FML, Colares AA. The curricularization of public outreach in teacher education: approaches and contradictions for an emancipatory praxis. *Olhar de Professor*. 2022;25:e20879072.
2. Martins REMW, Martins Filho LJ, Souza ARB. University extension program and teacher training: dialogues with Basic Education. *Revista de Educação PUC-Campinas*. 2021;26:e215089. <http://doi.org/10.24220/2318-0870v26e2021a5089>.
3. Amaral J. Porque brincar? In: Almeida MTP, Campos MCRM, Teixeira SRO, Gimenes BP, Peters LL, editors. *Brincar: diálogos, reflexões e discussões sobre o lúdico*. Várzea Paulista (SP): Editora Fontoura; 2019. p.31-36.
4. Shah R, Isaia A, Schwartz A, Atkins M. Encouraging parenting behaviors that promote early childhood development among caregivers from low-income urban communities: a randomized static group comparison trial of a primary care-based parenting program. *Matern Child Health J*. 2019;23(1):39-46. <http://doi.org/10.1007/s10995-018-2589-8>. PMID:30003519.
5. Lei n. 14.826 de 20 de março de 2024 (BR). Dispõe sobre a instituição da parentalidade positiva e o direito ao brincar como estratégias de prevenção à violência contra crianças. *Diário Oficial da União* [periódico na internet], Brasília (DF), 20 mar 2024 [citado 2024 set 9]. Disponível em: <https://legislacao.presidencia.gov.br/atos/?tipo=LEI&numero=14826&ano=2024&ato=52603aE1ENZpWTe3f>
6. Gimenes BP, Maia EBS, Ribeiro CA. In the playful universe of therapeutic play: Who Am I? Nurses attributing meaning to their role in this process. *Texto Contexto Enferm*. 2023;32:e20230056. <http://doi.org/10.1590/1980-265x-tce-2023-0056pt>.
7. Wernet M, Oliveira LRB, Petrucci G, Tomazzetti CM, Barboza NSG, Nakao PA. Formative achievements of an extended activity of

- storytelling followed by a directed play intervention. *Esc Anna Nery*. 2024;28:e20230159. <http://doi.org/10.1590/2177-9465-ean-2023-0159en>.
8. Claus MIS, Maia EBS, Oliveira AIB, Ramos AL, Dias PLM, Wernet M. The insertion of play and toys in Pediatric Nursing practices: a convergent care research. *Esc Anna Nery*. 2021;25(3):e20200383. <http://doi.org/10.1590/2177-9465-ean-2020-0383>.
 9. Boztepe H, Çınar S, Ay A. School-age children's perception of the hospital experience. *J Child Health Care*. 2017;21(2):162-70. <http://doi.org/10.1177/1367493517690454>. PMID:29119813.
 10. Wernet M. The insertion of play and toys in Pediatric Nursing practices: a convergent care research. *Esc Anna Nery*. 2021;25(3):e20200383.
 11. Teodoro GS, Carlúcio LR, Vador RMF. The nurse and the socialization of the hospitalized child: use of illustrations and stories as mediators. *Brazilian Journal of Development*. 2021;7(6):61267-86. <http://doi.org/10.34117/bjdv7n6-481>.
 12. Pinheiro JV, Narciso CS. The importance of inserting university extension activities for professional development. *Revista Extensão & Sociedade*. 2022;14(2):56-68. <http://doi.org/10.21680/2178-6054.2022v14n2ID28993>.
 13. Depianti JRB, Paula LM, Bezerra JV, Ferreira MCN, Castro FM, Silva LF. Extensionist experiences of playing with nursing students, family and children in the hospital. *Rev Enferm Atual In Derme*. 2023;97:e023086.
 14. Likhar A, Baghel P, Patil M. Early childhood development and social determinants. *Cureus*. 2022;14(9):e29500. <http://doi.org/10.7759/cureus.29500>. PMID:36312682.
 15. Jeong J, Franchett EE, Oliveira CVR, Rehmani K, Yousafzai AK. Parenting interventions to promote early child development in the first three years of life: a global systematic review and meta-analysis. *PLoS Med*. 2021;18(5):e1003602. <http://doi.org/10.1371/journal.pmed.1003602>. PMID:33970913.
 16. Costa P, Andrade PR, Cintra TFG, Cordeiro SM, Pettengil MAM, Veríssimo MDLOR. Needs, parenting practices, and dissemination of information on socialemotional skills and development of infants. *Rev Bras Enferm*. 2022;75(3):e20210296. <http://doi.org/10.1590/0034-7167-2021-0296>.
 17. Assis DCM, Moreira LVC, Fornasier RC. Teoria Bioecológica de Bronfenbrenner: a influência dos processos proximais no desenvolvimento social das crianças. *Research Soc Dev*. 2021;10(10):e582101019263. <http://doi.org/10.33448/rsd-v10i10.19263>.
 18. Ganam EAS, Pinezi AKM. Challenges of university student permanence: a study about the trajectory of students assisted by student assistance programs. *Educ Rev*. 2021;37:e228757. <http://doi.org/10.1590/0102-4698228757>.
 19. Mello MF, Cunha LA, Silva NJ, Araújo AC. A importância da utilização de ferramentas da qualidade como suporte para a melhoria de processo em indústria metal mecânica- um estudo de caso. *Exacta*. 2017;15(4):63-75. <http://doi.org/10.5585/exactaep.v15n4.6898>.
 20. Monteiro DE, Fialho ICTS, Passos PM, Fuly PSC. Management of coping with the risks of COVID-19 in an oncohematological outpatient clinic: an experience report. *Rev Bras Enferm*. 2021;74(1, suppl 1):e20201080. <http://doi.org/10.1590/0034-7167-2020-1080>. PMID:34037167.
 21. Michelet A. Classificação de jogos e brinquedos: a classificação ICCP. In: Friedmann A, editor. *O direito de brincar*. 4. ed. São Paulo: Edições Sociais; 1998. p. 161-72.
 22. Gjaerde LK, Hybschmann J, Dybdal D, Topperzer MK, Schrøder MA, Gibson JL et al. Play interventions for paediatric patients in hospital: a scoping review. *BMJ Open*. 2021;11(7):e051957. <http://doi.org/10.1136/bmjopen-2021-051957>. PMID:34312210.
 23. Ciuffo LL, Souza TV, Freitas TM, Santos KCO, Santos ROJFL. The use of toys by nursing as a therapeutic resource in the care of hospitalized children. *Rev Bras Enferm*. 2023;76(2):e20220433. <http://doi.org/10.1590/0034-7167-2022-0433>. PMID:37042927.

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