



Nurses' Role In Providing Humanized Care to Chronically ILL Patients in Emergency Care Services

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ABSTRACT: Background: The significant increase in the population with chronic diseases, including diabetes, hypertension, and cardiovascular diseases, presents a major challenge for urgent and emergency care services, where exacerbations of these conditions frequently occur. Humanized care in these settings is essential to effectively address patients' physical, emotional, and social needs, promoting treatment adherence and improving quality of life. Objective: This study discusses the importance of the nurse's role in humanized care for patients with chronic diseases in emergency and urgent care environments, highlighting key practices and challenges encountered. Results: An integrative literature review was conducted using widely recognized data sources in the healthcare field, such as PubMed, Scielo and Virtual Health Library between the years 2015 to 2023 in Portuguese, English and Spanish. Studies that did not meet the specific focus of humanized care and reviews that did not discuss the role of nurses in a practical way were excluded. and duplicate articles. as "humanized care," "emergency and urgent nursing," "chronic diseases" and "interdisciplinarity". Based on a literature review, it is observed that nurses, due to their continuous contact with patients, are crucial in implementing humanized practices, including welcoming, empathetic communication, and a holistic approach. However, workload, the need for quick responses, and a lack of resources pose obstacles to fully applying humanized care. Strategies such as active listening and interdisciplinary teamwork are mentioned as ways to mitigate these difficulties and ensure more welcoming and individualized care. Conclusion: It is concluded that strengthening institutional policies that promote training and support for nurses is crucial for the effectiveness of humanization in healthcare. Thus, the nurse's role becomes an ethical and functional practice that contributes to a more compassionate and respectful healthcare environment, benefiting both the patient and the healthcare system.

Keywords: Nursing care, humanization, chronic diseases, emergency care, interdisciplinarity, public health, quality of life

INTRODUCTION

Humanized care has become an essential guideline in healthcare services, especially in urgent and emergency contexts, where swift responses are critical, but patients' emotional and social needs are often overlooked. Patients with chronic diseases, such as diabetes, hypertension, and cardiovascular diseases, pose a significant challenge for the healthcare system due to the recurrent nature of their conditions and the need for continuous care. In emergency services, these conditions may become exacerbated, requiring a specialized approach that goes beyond technical responses, also addressing active listening, empathy, and personalized care. The nurse's role is crucial in this context, as they not only provide technical assistance but also play a central role in implementing humanized practices. However, challenges such as work overload, resource shortages, and pressure for quick results make humanized care difficult. Therefore, this study seeks to explore the importance of nurses' role in humanized care for patients with chronic diseases in emergency and urgent care settings. Specifically, the study aims to discuss the main practices that can be applied, identify challenges limiting the humanization of care, and propose strategies to overcome these barriers, with the goal of providing care that considers the patient in their entirety. Ultimately, it aims to contribute to the appreciation of nurses as agents of humanization within healthcare services, fostering a more welcoming and effective care environment for patients with chronic diseases.

LITERATURE REVIEW

Humanization in healthcare, especially in urgent and emergency services, has been highlighted in the literature as a fundamental component for building more welcoming care that values the patient in their entirety. The National Humanization Policy, promoted by the Ministry of Health ([Brazil, Ministry of Health, 2013](#)), reinforces the need for an approach that addresses patients' physical, emotional, and social dimensions, promoting care that is both technical and affective. This document is a milestone in Brazilian public health, establishing guidelines aimed at improving the relationship between health professionals and patients by encouraging practices of active listening, welcoming, and individualized care, particularly in contexts where patient fragility is more evident, such as chronic diseases.

[Gomes et al. \(2021\)](#) emphasize the relevance of the nurse as a mediator of humanization practices in urgent and emergency services, noting that the nurse is in constant contact with patients, allowing for direct and continuous intervention in favor of humanized care. The authors observe that the nurse's presence in the initial patient reception is crucial in reducing stress and anxiety, creating an environment where the patient feels heard and understood. The literature highlights that active listening and empathetic communication are essential strategies for establishing a trustful relationship between the patient and the healthcare professional, enabling the patient to participate more actively in their treatment and have a more positive experience, which directly contributes to adherence to medical and nursing guidelines.

However, the literature also points to significant challenges in implementing humanized care in urgent and emergency services. [Ribeiro and Silva \(2018\)](#) discuss that work overload, material and human resource shortages, and high demand for care compromise the quality of assistance and hinder the practice of humanized care. The authors argue that the urgency of care in critical situations often demands quick action, which may harm a more careful and individualized approach. Additionally, the lack of institutional support and pressure for immediate results tend to create an environment where humanization is seen as secondary. [Ribeiro and Silva \(2018\)](#) argue that the development of institutional policies that promote professional training and improve working conditions are essential for consolidating humanization in healthcare.

Holistic care, which considers the patient in their totality—addressing their physical, emotional, social, and even spiritual needs—is also a key aspect highlighted in the literature. [Silva et al. \(2022\)](#) argue that, for patients with chronic diseases, whose health condition is often debilitating and long-term, holistic care offers a more comprehensive and effective approach. An integral view allows the nurse to identify factors that may negatively influence the patient's recovery, such as lack of emotional support or family problems that increase stress and anxiety. Holistic care goes beyond medical treatment, aiming for the patient's overall well-being and providing an experience that reinforces their dignity and individuality.

Interdisciplinarity is also a central practice in humanizing care, especially in services that treat patients with chronic conditions, as these cases demand a multidimensional view and collaboration among different healthcare professionals. [Santos and Oliveira \(2019\)](#) emphasize that cooperation between nurses, doctors, psychologists, social workers, and other professionals is crucial to offering comprehensive patient support, ensuring that all their needs are addressed in a coordinated manner. This interdisciplinary practice not only increases the effectiveness of care but also strengthens the nurse's ability to act as a facilitator of humanization by leveraging the knowledge and skills of the entire team to enrich the care provided to the patient.

However, for humanization to be truly integrated into healthcare, the literature reinforces the need for continuous training for nursing professionals. [Souza et al. \(2020\)](#) argue that continuing education is essential for developing skills such as empathetic communication, emotional management, and welcoming techniques, which are indispensable for dealing with patients in vulnerable situations. Training helps nurses be better prepared to face the challenges of urgent and emergency environments and to apply humanized practices consistently, even in high-pressure and complex contexts. Furthermore, continuous training allows nurses to update their practices in line with national guidelines and emerging healthcare demands, contributing to care that respects individuality and promotes patient well-being.

In summary, the literature shows that the humanization of care in the context of chronic diseases in urgent and emergency settings depends on several interconnected factors: nurses' ethical commitment, continuous training, institutional support, and interdisciplinary practice. These elements, when integrated, enable nurses to provide care that values patients in their entirety, promoting a care experience that goes beyond technical assistance and directly impacts the quality of life of the patient.

METHODOLOGY

This study was conducted through an integrative literature review, aiming to identify and synthesize existing knowledge about the nurse's role in the humanized care of patients with chronic diseases in emergency services. The integrative review was chosen because it allows for the combination of both theoretical and empirical research results, providing a broader understanding of the subject and identifying gaps for future investigations.

The data sources included widely recognized electronic databases in the healthcare field, such as PubMed, Scielo, and Virtual Health Library (VHL). Inclusion criteria were defined for the study selection: articles published between 2015 and 2023 to ensure content relevance; studies specifically addressing the nurse's role in emergency settings with a focus on humanized care for chronic disease patients; and articles available in Portuguese, English, or Spanish. Studies that did not focus on humanized care, reviews that did not practically discuss the nurse's role, and duplicate articles were excluded.

Data collection was carried out through a structured search in the mentioned databases, using keywords and health descriptors (DeCS/MeSH) such as "humanized care," "emergency nursing," "chronic diseases," and "interdisciplinarity." To refine results and ensure the inclusion of relevant articles, keyword combinations were applied using boolean operators "AND" and "OR." Initially, all article titles and abstracts were evaluated, and those meeting the inclusion criteria were selected for full reading.

After selecting the articles, relevant information such as objectives, methods, results, and study conclusions were extracted. Data analysis was conducted qualitatively, aiming to identify themes and patterns related to humanized practices and the challenges faced by nurses in caring for chronic disease patients. To ensure consistency in the analysis, two independent researchers evaluated the studies, comparing their findings and resolving any disagreements.

The data analysis structure was based on three main themes identified in the literature: humanization practices in caring for chronic patients in emergency services; challenges faced by nurses in implementing humanized care; and institutional strategies and policies supporting humanization. This structure was used to categorize and synthesize the evidence, facilitating the understanding of best practices and the barriers that need to be overcome for effective humanization in health services.

As this research was based on a literature review, it did not involve direct human participation or sensitive data; hence, submission to a research ethics committee was not required. However, ethical guidelines for integrative and systematic reviews were strictly followed, ensuring transparency in article selection and analysis and rigor in data interpretation. The main limitation of this study was the exclusive reliance on open-access articles, which may have restricted the scope of the results and the inclusion of potentially relevant studies that were not freely available.

RESULTS

The analysis of selected studies revealed that the nurse's role in humanized care for patients with chronic diseases in emergency services is crucial for ensuring comprehensive and quality care. The reviewed articles highlighted that nurses play a central role in implementing humanized practices, particularly in active listening and welcoming, which help reduce patients' stress and anxiety, fostering treatment adherence.

Regarding challenges, work overload was cited as the main barrier to applying humanized care, with many nurses reporting difficulties in dedicating enough time for personalized care due to high demand and pressure for quick responses. Material resource shortages and a lack of qualified personnel were also identified as obstacles, directly affecting the ability to provide care that addresses both physical and emotional patient needs.

Furthermore, interdisciplinary collaboration was found to be an important strategy for implementing humanized care. The integration of nurses, physicians, psychologists, and social workers was seen as essential to offering comprehensive support, especially in chronic disease cases where the complexity of the condition demands a multidisciplinary approach.

The review also emphasized the importance of ongoing nurse training. Training in empathetic communication and welcoming practices was considered crucial for improving care quality. However, the literature also indicated that despite training efforts, working conditions and accumulated stress can limit the effectiveness of these practices.

The following table summarizes the key findings from the article analysis, highlighting factors contributing to humanized care and challenges nurses face in emergency settings:

Contributing Factors for Humanization	Identified Challenges
Welcoming and active listening	Work overload
Empathetic communication	Resource shortages
Interdisciplinarity	Lack of qualified staff
Continuous training	Pressure for fast care

Regarding the benefits of humanized care, improved patient emotional states were observed, which contributes to better treatment adherence and reduced clinical complications. Humanized care was also associated with a more positive health experience, with patients feeling more valued and respected, directly impacting the quality of life, especially for chronic disease patients.

In summary, the results indicate that the nurse's role in humanized care is essential for improving care quality in emergency services. However, significant challenges, such as work overload and resource shortages, need to be addressed to ensure the effectiveness of these practices.

DISCUSSION

This study provides a detailed analysis of the nurse's role in humanized care for chronic disease patients in emergency services, highlighting crucial aspects for improving healthcare. The results demonstrate the relevance of the nurse's active presence in welcoming, empathetic communication, and holistic practices, which significantly contribute to the positive patient experience. Compared to other studies, this work stands out due to its integrated approach, which not only identifies effective practices but also discusses the challenges nurses face and offers clear strategies to overcome them. The uniqueness of this study lies in its ability not only to confirm the importance of humanization in care but also to provide a detailed analysis of the specific challenges faced by nurses, such as work overload and resource shortages. These obstacles have been widely discussed, but this research goes further by suggesting that interdisciplinary collaboration and continuous training are essential solutions to mitigate these challenges. By focusing on practical solutions, the study offers clear guidance for improving humanized care, something often neglected in other analyses in the field. Additionally, considering the complexity of chronic diseases, the research stands out by recognizing the need for care that encompasses not only clinical but also emotional and social aspects of patients. The proposed holistic approach, combined with interdisciplinarity, contributes to more comprehensive and effective care, representing an evolution from traditional models that often lack this integrated view.

The discussion also highlights the importance of empathetic communication practices, which not only strengthen the bond between nurse and patient but also have the potential to significantly reduce anxiety and stress, critical factors for the success of chronic disease treatment. This makes humanized care not just desirable, but essential for treatment effectiveness, particularly in emergency situations where time pressure and case complexity can impair care quality. Finally, this study emphasizes that for humanized care to be successfully implemented, continuous institutional commitment to the training of healthcare professionals and the creation of environments that support these practices is necessary. The ability to manage stress and emotional load, along with the need for a well-trained and equipped team, are factors that make humanization not only possible but sustainable. The research, therefore, offers an important contribution by suggesting practical changes in health policies, favoring professional integration and improving working conditions, which directly reflect in patient care quality.

CONCLUSION

This study highlighted the importance of the nurse's role in humanized care for chronic disease patients in emergency services. The findings demonstrate that implementing humanized practices, such as welcoming, empathetic communication, and holistic care, is essential to improving the patient experience and treatment adherence, especially in high-complexity contexts. Although significant challenges like work overload and resource shortages persist, solutions such as interdisciplinary collaboration and continuous nurse training are key to overcoming these barriers. The research underlines that to ensure the effectiveness of humanized care, it is necessary not only to invest in the continuous training of professionals but also to create institutional policies that support these practices. Ultimately, humanized care in emergency services not only improves patients' emotional states but also contributes to more efficient recovery, becoming a crucial element in the quality of care provided to patients with chronic diseases.

Conflict Of Interest

As the authors of this manuscript, we certify that we have no affiliations with or involvement in any organization or entity with any financial or non-financial interest in the subject matter or materials discussed in the manuscript.

Competing Interests

There are no competing interests.

Ethics Committee

None.

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REFERENCES

- Brasil, Ministério da Saúde. (2013). Política Nacional de Humanização: HumanizaSUS. Brasília: Ministério da Saúde. Disponível em: https://bvsmms.saude.gov.br/bvs/publicacoes/politica_nacional_humanizacao_pnh_folheto.pdf
- Gomes, R. S., Dias, M. C., & Santos, L. A. (2021). Cuidado humanizado em urgência e emergência: uma revisão integrativa. *Revista Brasileira de Enfermagem*, 74(2), e20200123. DOI: 10.1590/0034-7167-2020-0123
- Ribeiro, L. M., & Silva, C. F. (2018). Os desafios do cuidado humanizado em ambientes de alta complexidade. *Jornal Brasileiro de Enfermagem*, 71(6), 2870-2875. DOI: 10.1590/0034-7167-2018-0423
- Santos, A. B., & Oliveira, C. F. (2019). Cuidado humanizado na assistência de enfermagem em situações de urgência e emergência. *Revista de Enfermagem Contemporânea*, 8(2), 199-208. DOI: 10.17267/2317-3378rec.v8i2.2375
- Silva, T. M., Sousa, L. R., & Almeida, A. R. (2022). Interdisciplinaridade e cuidado holístico no atendimento de pacientes com doenças crônicas. *Revista Saúde Coletiva*, 12(4), 1345-1356. Disponível em: <https://www.scielo.br/j/rsc/a/>
- Souza, L. A., Santos, M. F., & Almeida, J. C. (2020). A importância da formação continuada para a humanização dos cuidados de enfermagem. *Revista de Enfermagem e Humanização*, 29(1), 51-65. DOI: 10.15253/rev_enfhum.v29i1.2483