

Identification by nurses of the dimension of emotions present in the organ and tissue donation process

RESUMO | OBJETIVO: Conhecer as emoções identificadas por enfermeiros no processo de doação ao transplante de órgãos e tecidos. METODOLOGIA: Estudo qualitativo descritivo-exploratório, fundamentado na perspectiva Sociopoética. O Grupo-Pesquisador foi desenvolvido em 2015 é composto por 8 enfermeiros que trabalhavam há mais de 6 meses no processo de doação/transplantes de órgãos de um hospital geral do extremo sul do estado da Bahia, Brasil. A produção de dados foi orientada por desenhos, para estímulo dos sentidos. Os áudios foram transcritos, textualizados e categorizados segundo análise de conteúdo de Bardin. As exigências éticas da pesquisa com seres humanos do país foram cumpridas. RESULTADOS: As principais dimensões dos enfermeiros sobre as emoções no trabalho de doação para transplante de órgãos e tecidos foram agrupadas nos seguintes temas: prazer do resultado, da incerteza da doação à satisfação do transplante, a motivação para transformar a aflição em contentamento, e da dor da perda ao júbilo por receber um órgão e finalmente obter qualidade de vida. CONCLUSÕES: Concluiu-se que a identificação das dimensões das emoções presentes no processo de doação de órgãos e tecidos, por enfermeiros, têm a possibilidade de promover aprimoramento de suas atividades cotidianas dentre outros fatores que influenciam o trabalho desses profissionais.

Palavras-chaves: Pessoal de Saúde; Enfermagem; Transplantes; Trabalho.

ABSTRACT | OBJECTIVES: To investigate the process of organ and tissue donation for transplantation from the perspective of nurses. METHODS: Qualitative descriptive-exploratory study, based on the Sociopoetic perspective. The Researcher Group was developed in 2015 and consists of 8 nurses who had worked for more than 6 months in the organ donation / transplantation process of a general hospital in the extreme south of the state of Bahia, Brazil. The production of data was guided by drawings, to stimulate the senses. The audios were transcribed, textualized and categorized according to Bardin's content analysis. The ethical requirements of research with human beings in the country have been met. RESULTS: Las principales dimensiones de las emociones de las enfermeras en el trabajo de donación para el trasplante de órganos y tejidos se agruparon en los siguientes temas: placer por el resultado, desde la incertidumbre de la donación hasta la satisfacción del trasplante, la motivación para transformar la angustia en alegría y el dolor de pérdida de alegría por recibir un órgano y finalmente obtener calidad de vida. CONCLUSIONS: It was concluded that the identification of the dimensions of the emotions present in the organ and tissue donation process, identified by nurses, has the possibility of promoting improvement in their daily activities, among other factors that influence the work of these professionals.

Keywords: Health Personnel; Nursing; Transplants; Work.

RESUMEN | OBJETIVO(S): Investigar el proceso de donación de órganos y tejidos para trasplante desde la perspectiva de las enfermeras de un hospital de referencia general para una organización de obtención de órganos. METODOLOGÍA: Estudio cualitativo descriptivo-exploratorio, basado en la perspectiva Sociopoética. El Grupo de Investigadores se desarrolló en 2015 y está integrado por 8 enfermeras que habían trabajado durante más de 6 meses en el proceso de donación / trasplante de órganos de un hospital general en el extremo sur del estado de Bahía, Brasil. La producción de datos fue guiada por dibujos, para estimular los sentidos. Los audios se transcribieron, textualizaron y categorizaron de acuerdo con el análisis de contenido de Bardin. Se han cumplido los requisitos éticos de la investigación con seres humanos en el país. RESULTADOS: Las principales dimensiones de las emociones de las enfermeras en el trabajo de donación para el trasplante de órganos y tejidos se agruparon en los siguientes temas: placer por el resultado, desde la incertidumbre de la donación hasta la satisfacción del trasplante, la motivación para transformar la angustia en alegría y el dolor de pérdida de alegría por recibir un órgano y finalmente obtener calidad de vida. CONCLUSIONES: Se concluyó que la identificación de las dimensiones de las emociones presentes en el proceso de donación de órganos y tejidos, identificadas por los enfermeros, tiene la posibilidad de promover la mejora en sus actividades diarias, entre otros factores que influyen en el trabajo de estos profesionales.

Palabras claves: Personal sanitario; Enfermería; Trasplantes; Trabajo.

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INTRODUCTION

The following steps can be found in the donation process for organ and tissue transplantation in Brazil: identification and maintenance of potential donors; exams for the assessment of brain death and also for clinical, neurological and graphic evaluation; communication to family members of the diagnosis and; family interview for donation. At the end of these steps, after authorization from the family, the process of capturing and distributing the organs can be carried out.¹

Thus, those professionals who perform daily activities in the transplant donation process have a high number of attributions and deal with a significant range of emotions, which can compromise their mental health, due to the emergence of psychological distress, or even aggravation of preexisting conditions among workers.²

Therefore, when observing how essential it is to elucidate and cooperate for the improvement of work-related experiences in the context of organ and tissue transplant donation, this study aimed to understand the emotions expressed by nurses in the organ and tissue donation process to transplantation.

METHODS

It is a qualitative research, based on the Sociopoetic method.⁽³⁾ The Researcher Group (RG) was composed of eight nurses who had been working



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for more than six months in the organ donation and transplantation process, in the scope of an Organ Procurement Organization (OPO), in the south of the state of Bahia, Brazil.

Data were collected in the second half of 2015. The meeting with the GP took place in a classroom provided by a private educational institution, lasting three and a half hours. The Consolidated Criteria For Reporting Qualitative Research (COREQ) was also used to verify the items in the construction of dialogues with the RG.⁽⁴⁾

This construction used creative techniques with drawing resources, which allowed the RG to express their most intrinsic emotions.⁽³⁾ The questions that guided the dialogues arose from the participants' own statements in the search for clarification of issues in the participants' daily work.

After the initial relaxation dynamic, the meeting with the RG took place, based on the proposal to make a mandala, which reflected the process of organ donation and transplants, based on the sense organs: touch, sight, taste and hearing.

The group work was recorded with the permission of the RG and the audios were transcribed, textualized and categorized according to Bardin's content analysis.⁽⁵⁾

The study complied with all ethical requirements for research with human beings in the country, being approved by an Ethics Committee for Research with human beings, under protocol n.º 996.669, CAAE n.º

33743514.7.0000.5243, as regulated by Resolution n. 466/2012 of the National Health Council - CNS (Conselho Nacional de Saúde).⁽⁶⁾

RESULTS

Table 1 shows the emotions expressed by nurses in the work of organ donation and transplants, from the following dimensions identified in the following thematic categories: pleasure in the result; from the uncertainty of the donation to the satisfaction of the transplant; the motivation to turn grief into contentment; from the pain of loss to the joy of receiving an organ and finally achieving quality of life.

Contextualized and categorized according to Bardin's content analysis, the most frequent themes could

be applied as Dimensions of Emotions present in the work process of organ donation, where examples of the subjects' statements could be placed in the table.

In this context, due to the intention of singularizing the findings of the speeches of the co-researchers participating in the study, through the elaboration of the table above, it became possible to concentrate data to facilitate the analytical construction of the discussion around the theme of this article.

DISCUSSION

For a better organization of the discussion of data produced as research results, the analysis of the subjects' statements was divided into three specific topics, grouping them according to the

most frequent themes being applied as Dimensions of Emotions present in the organ donation work process, as follows:

Pleasure of the result

When it comes to the "Pleasure of the result", the commotion is a variety of emotion that constantly occurs in the triggering of activities that are part of the work in donation and transplants, happening especially in moments when professionals are confronted with finitude, where it begins to feel the breach of expectations announced almost in common sense.⁽¹⁾ However, in the episodes of donation and transplantation, great satisfaction emerges from these professionals.

Organ transplant donation has different expression formats that are sha-

Table 1 - Dimensions of Emotions present in the organ donation work process, examples of the subjects' speeches and frequency of individual themes.

Dealing with Emotions		
Themes	Participants' Speeches	Frequency of individual themes
Pleasure of the result	Each open protocol has a purpose, but it brings a commotion in professionals due to the challenges encountered during the process.	2
	Even though it is arduous, the organ capture process always promotes enjoyment at the end of the donation.	
From the uncertainty of the donation to the satisfaction of the transplant	I chose a magic cube, and I drew a rainbow afterwards... And the question of the wind for not knowing how to assemble the magic cube and the question of the rainbow because at the end of the process would be the beauty that happens in the end.	3
	The process of donating organs for transplantation can be considered as mutual help, bringing satisfaction to both the team and the families.	
The Motivation to Turn Affliction into Contentment	In the bedroom, listening to my colleague's heart... I heard her heart and I felt like it was a life, a hope and those that I drew a heart for, it was the heart of a very happy person.	5
	Regarding the taste and the whole process in the hospital, there is always this moment of hope... But there is also the anguish of those who are working, the anguish of the family that is waiting in another place, the anguish of the family that is waiting for news of death and donation... And I think it's the feeling that defines the taste buds.	
	Faced with all the problems generated in the daily lives of workers who work in organ donation, there is a contentment at the end of the process.	
From the pain of loss to the joy of receiving an organ and finally achieving quality of life	The process of organ donation and harvesting for transplantation has two extremes: the pain of the grieving family, and the joy of the recipient's family.	3
	Organ donation brings as a positive return the possibility of a life with greater quality and perspective.	

Source: Research data, 2015.

ped by the social environment, responding to various personal and collective motivations and institutional needs in which they are inserted, in addition to concentrating elements such as religious, economic, political, socio-cultural and symbolic. ⁽⁷⁾ Most of the time, family members accept the donation and professionals who work in the area experience emotions that trigger enormous pleasure when faced with the donation and when reflecting on future occasions about the result of their attitude.

From the uncertainty of the donation to the satisfaction of the transplant

With the stimulation of the senses according to the production methodology, it is possible to observe, in particular, in vision, the manifestation of uncertainty in the RG's discourse. However, when stimulating the taste buds, another emotion countered the uncertain one, satisfaction. From the uncertainty of the donation to the satisfaction of the transplant, the main difficulties faced by the family in consenting to the donation are related to the perception of inadequate care for the patient; ⁽⁸⁾ to the determination of death by the occurrence of the diagnosis of brain death, which still happens with the beating heart; ⁽⁹⁾ by not understanding the body as dead, the body is artificially kept in the intensive care unit (ICU).

The protagonism achieved by having been the professional advisor of family members regarding the donation process, regardless of the occurrence of an acceptance for donation or a refusal, empowering them to decide, is one of the great causes of satisfaction, where small details and clarifications make all the difference. ⁽¹⁰⁾ When they are clarified and understood, the satisfaction that the transplant brings becomes an excellent promoter of self-esteem.

The Motivation to Turn Affliction into

Contentment

With the nurses' statements, it was also possible to understand that the motivation to transform the affliction into contentment was evidenced, when the senses of hearing and taste were stimulated. At the audition, the RG expres-



In this, it is understood that organ donation and transplantation professionals see the relevance of their activities, especially the elements that enhance their motivation in their daily work



sed hope as a motivating element for the work. However, when stimulating the taste buds, the affliction caused by the anguish was identified, which can be overcome by the contentment that appeared in the speech while stimulating the taste buds.

Thus, the need for emotional support to help family members is identified, especially in two moments when

faced with brain death: acceptance of the reality of the loss, followed by grief. ^(10, 11)

When family members authorize the donation, this act brings relief, comfort and helps to make sense of the family member's death, on the other hand, not being able to know the recipients is a great frustration for the family, which lives with this expectation. ⁽¹²⁾

Therefore, the emergence and elucidation of motivating elements in the organ donation process in the hospital must permeate the work process of professionals working in this field. The afflictions – of family members and professionals – can be overcome by the contentment that comes with realizing that the donation was successful.

From the pain of loss to the joy of receiving an organ and finally achieving quality of life

The theme of pain from loss to joy for receiving an organ and finally obtaining quality of life arises from the stimulus to taste, when the RG expressed in the speech the pain that can cause the loss of a loved one. But, still stimulating this same sense, another emotion made a counterpoint - the joy of happiness of the recipient's family, the expectation of providing that recipient with a greater and better quality of life, an emotion that also arose when the Group was encouraged to listen.

Sadness and pain are the emotions that stand out in the experiences of families regarding the approach to organ donation at the time of brain death. ⁽¹¹⁾ These emotions need to be noted at the time of the family interview. Thus, professionals need to be careful not to interfere in the grieving process and they still need to make family members understand that they can help other families, perhaps not go through the same suffering of losing a loved one.

It can be observed that all domains of quality of life of patients showed

improvement after transplantation, especially in relation to the general perception of quality of life.⁽¹³⁾ In turn, the pain of losing a loved one can be eased by understanding how to help another person who needs an organ to continue to live.

CONCLUSION

In the process of organ donation and transplants, nurses deal, both in relation to themselves and to the families involved, with a variety of emotions, identified by the expression of: pleasure of the result, uncertainty of the donation to the satisfaction of the transplant, motivation to transform the affliction of contentment, and the pain of loss to the joy of receiving an organ and finally obtaining quality of life.

Even with all the daily problems, professionals and family members keep the hope alive in the final resolution of situations. This hope proved to be a motivator for the continuation of tasks and overcoming barriers and difficul-

ties.

In this, it is understood that organ donation and transplantation professionals see the relevance of their activities, especially the elements that enhance their motivation in their daily work. These professionals must also use sensitivity as a tool to overcome the possible obstacles that may arise as a result of the actions they need to take in their daily lives.

Thus, it is identified that in the daily work process of professionals who work in the process of donating organs and tissues for transplantation, there are times of overload that constantly promote body fatigue and emotional stress. The members of teams from organ donation to transplantation carry great responsibilities.

Thus, it is recommended that professionals who work with organ donation use sensitivity as a tool to overcome possible daily obstacles and have the proper institutional support so that they can deal with their contradictory emotions.

As a limitation of the study, the absence of the participation of professionals from other categories, active in the transplant donation process in the scenario in question, is pointed out. In turn, the exclusive participation of nurses allowed these authors a closer look and reflections with potential for instrumental support to Nursing, in the context of organ and tissue donation.

Finally, as implications for Clinical Practice, it is possible to come to the understanding that it is necessary to broaden the understanding of the process of donation to organ and tissue transplantation so that, with this, the rate of family acceptance is increased. It can be highlighted that, for this, the following must occur: the opportunity to apply new knowledge, learn to work in a team, enrichment of learning through the mobilization of internal resources, and understanding the need for diversification of activities in scenarios where labor practices are developed.

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