ABSTRACT

Objective: to discuss the importance of humor in children's lives. Method: it uses a reflective and analytical method, based on literature and starting with the following questions: Is there a link between humor and child health? What is the role of humor in people's lives? What role does humor have specifically in children's lives? Although it is easily accepted and commented in health contexts, why is not therapeutic value yet recognized? Too often people say «... take humor to Pediatrics wards», but frequently the argument about the therapeutic value of humor remains inconsistent, such as its physiological and relational benefits, among others. Health professionals, who treat and care children and adolescents, have a special role in their life and their families', once they interact in a period of great vulnerability. During the disease process, both family and patient, across a phase of great anxiety and instability, where the loss of confidence and of control of the feelings of Impotence rise constantly. Conclusion: the role of humor is of undeniable value, it is a basic human need, and a way to increase the horizon perspective. Humor is a unique way of changing reality, and interpreting the context of illness in a way to enable the greatest well-being of the child or adolescent. Descriptors: sense of humor and humor; welfare; child; holistic health; therapeutics.

RESUMEN

Objetivo: reflejar sobre la importancia del humor en la vida del niño. Método: se utiliza un método analítico y reflexivo, basado en la literatura y que parte de las siguientes preguntas: Existe un vínculo entre humor y salud infantil? Que papel el humor tem en la vida de las personas? E en la vida de las chicas, concretamente? Resultados: humor en la vida de las chicas?... Algo que es fácilmente aceptable, comentado en los contextos de la salúd, mas su valor terapéutico aún no es indudablemente reconocido. No raras veces se oye decir "... llevan el humor a los servicios de Pediatría", contudo continua inconsistente a argumentación del valor terapéutico del humor, de sus beneficios fisiológicos relacionales, entre otros. Los profesionales de salud, que cuidan de los niños y adolescentes, tienen un lugar singular en la vida de las niñas y de sus familias, ya que se cruzan en los momentos de gran vulnerabilidad. Esas fases son generadoras de gran inestabilidad y ansiedad, donde la pérdida de confianza y de control del sentido de impotencia surge en cada instante. Conclusión: el humor es una acción de valor inegable, una necesidad humana básica, un modo de aumentar el horizonte del olhar, una forma propia de transformar la realidad, interpretar, criar perspectivas e promover o maior bem-estar possível do criança ou adolescente. Descritores: senso de humor e humor; bem-estar; criança; saúde holística; terapêutica.
INTRODUCTION

• Humor and Child Health

We know today that the benefits of humor are immense to health. Although the human being is not, in the Planet Earth, the only beings who laugh, as the primates also do as well as it was said in 1872 by Charles Darwin, there is indeed a scientific evidence that the brain circuits specialized for humor and laughter in humans, which means that the ability to enjoy humor, and express it by laughter, presents itself as an essential part of being Human. ¹

Although it has not yet been possible to identify genetic and environmental factors responsible for individual differences about humor, the research suggests that the sense of humor is a product of genetics and the environment, which each one of these aspects has diverse importance in its attributes. In appreciation of humor, the genetic influence seems to be insignificant, however, is where the environment assumes a great importance, since what stimulates humor, is determined, overall, by past experiences inside and outside the family. Genetic factors are relevant when we talk about attitude towards humor or production of humor, ie when the focus is on temperament, and considering the meaning of humor in relation with the positive emotionality. ¹

Humor and laughter are universal in all cultures and basic human needs and that laughter is, in addition to crying, one of the first social vocalizations of the child. Laughter is, without hesitation, innate, since the ability to laugh is already present at birth. To prove this fact arises children deaf-mute and blind, who laugh rightly without never having heard or seen someone laugh. ³

In fact and in conditions called “normal” babies start to smile during the first month, initially in response to a stimulus, essentially tactile, and a month later, in response to visual stimuli. In the months that follow they smile, initially before certain objects, and then, before the faces of the people that give them affect. ³

Laughter happens, originally, in the context of the interaction between baby and caregiver, and between the tenth and twentieth weeks. The same tends, rapidly, to occupy a habitual place in the interactions that the baby establishes with the world around him, and that, during the first year of life, this happens priority faced to the mother’s actions. What triggers the laughter also varies along this year, since this generators stimulus at seven or eight months of age will not be the same when complete one year of age, existing appeal, as the child develops, to a number each time greater of cognitive stimuli. Laughter appears because incongruous or unexpected events awaken the attention of the baby, induce efforts of processing information and produce a correspondent excitation. If the child makes a negative interpretation, it will cry; however, if the interpretation is positive, she will laugh and will have feelings of approximation.

In babies, the interactions of humor with the parents can be important in the development of the relationships of affection, which have demonstrated a relevant role in the social and emotional development. It is possible that humor helps to cope with the anxiety of separation and self-affirmation, during the process of gaining independence, during the second and third years of life. In the second childhood, it can help communicate and enforce standards, establish peer groups and influence the social status within them. These functions continue in adolescence, where humor allows dealing, with greater facility, the aspects of life. ¹,⁴

Although the body of evidences is increasing, the value of humor, as a therapeutic entity, needs, still, consistent empirical evidence that allows legitimize the totality of its immense experiential credibility. ⁵

Yes! Each and every one of us experience humor and laughter, thus, experienced knowledge about how much welfare it brings, and, thus, the empirical research at this topic has to be continued and increased, overall by the health professionals, as it has to be enlarged the practice of humor by these professionals, since are they who can demonstrate the affectivity of this benefit in the daily practice of the health care.

Being internee in a hospital is a situation of immense vulnerability, where the children and family are often, unexpectedly, put in a context of uncertainty and fear, these causers of anxiety and tension can be strongly managed through the use of humor, assuming that humor and health are related notions.

People appreciate a good joke, which changes the crying for laughter and recognize that, in moments of frustration and pain, good humor makes one forget the sorrows and recall the joys. Based on these assumptions it is possible to see humor as a therapeutic
action in the treatment of the diseases, as well as its relationship with welfare and health. This is a relatively new tendency, which, although still in a incipient way, it is based on the scientific evidence, where it is shown that humor and laughter, as an expression of joy, act on the cardiovascular, respiratory, immunological, muscular, nervous and endocrine systems, among others. Effectively, humor makes possible to communicate, to see the world with another way, “to color it”, and it is a simple way to improve health.

This phenomenon does not change when we talk about child's health. Here is the similarity of what is referred for adults; humor enables to preserve the health, prevent diseases, help to gain the confidence of the child, reduce the suffering inflicted by techniques and procedures, to comfort, relax, relieve pain by replacing pills and alleviate the stress of the children and parents.

The research that demonstrates that the illness of a child, as well as his internment, is a stressful event for parents and the child's ability to achieve a successful psychological management of the health-disease process is influenced by the effectiveness that the parents have to cope with a hospitalization and / or disease.

This anxiety seems to be due, and partly, to the changes in parent-child unit, as the parents need to understand the experience of "being a sick child," become familiar with the hospital environment, adapt themselves to the changes in the relationship with their son and other family members, as well as they need to learn to negotiate with the health professionals about the care to the child or adolescent.

The research, focused on the parents' anxiety, has detached a number of nursing interventions that seek to reduce it. One of these interventions is to enable the parents to help their child to be independent, and another is to use humor to help to establish the relationship between the nurse and the child, with the aim of assisting this latest to feel it has control over the situation it lives.

Nobody can live without humor. Children, parents and health professionals, use it in the most different situations and in the various stages of development. It allows "reading in the different world" of children and adolescents, and helps them to learn how to cope with life, think creatively, develop social skills, to gain self-esteem and experience the sense of well-being.

Children, like adults, laugh at objects or situations that are outside the usual. As situations change throughout childhood, as people gain experiences and familiarity with the surrounding world, also change things perceived as incongruous and, therefore, humorous, being this incongruity which is in the basis of humor.

We could say that humor, together with its cognitive aspects, helps children and adolescents to cope emotionally exciting and threatening issues. When playing and laughing at issues that normally cause anxiety and tension, these are able to feel less threatened and obtain control.

Based on the eight stages of Erikson's psychosocial development, it is emphasized that humor can be a way to manage conflicts that arise in the different evolutionary crisis: basic trust versus basic mistrust, autonomy vs. shame and doubt, initiative versus guilt, diligence versus inferiority, identity versus identity confusion, intimacy versus isolation, activity versus stagnation, integrity versus despair.

In this same way, it was already found that the subjects with which children of different ages tend to play and laugh, they relate with conflicts, tensions, anxieties and differences of gender, in each stage of development. The emphasis put on intellectual difficulties and rationality, during their school years, also produces effects on the school performance, which leads to lots of jokes about stupidity and irrationality. The feelings of conflict and tension, about the sexual life, from childhood to adulthood, contribute to the growing popularity of anecdotes: the so-called “racy anecdotes”. The use of humor, to deal with potentially threatening issues, also it's seen in the popularity it has among children and adolescents, the jokes, in a climate "make believe", with sick people and dead babies, as well as the humoristic films based on body fluids: vomiting, flatulence...

Humor is, objectively, important for children and adolescents for various reasons. It is an element of trust between people and, therefore, when these create bonds of friendship among peers, humor is an important aspect of the content of messages they exchange.

Adolescents have, in humor, a privileged form of communication and relationship, being one of the resources that most use when it treats to manage anxiety or to treat themes related to sexuality, and others connected to the process of growth. It is also
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a way of assure their independence and rebellion against the adult world. Enjoying a joke or anecdote is something that adolescents and children need to feel adjusted.

Along their development, children and adolescents, go on magnifying to a cognitive and social level and go on taking more consciousness of humor, applying it to enhance self-esteem, create feelings of personal and group identity, beyond facing difficult situations.

It was McGhee who described the development of the understanding of humor throughout the growth of children and adolescents; this speeches about the understanding of incongruent humor along these stages of life, by showing them through the object: a girl who uses a pencil to shave herself, through the use of labels a guy who calls the other a "girl", through meanings of word games, often used by soothsayers.

- Can you tell me where is the Half Beach?
- I have no idea. I only know full beaches.

This double sense could be understood and played by children after seven years old, when the language abilities already allow him to recognize the inherent ambiguity of language, involving their multiple aspects, from phonology to syntax. Also the soothsayers require a style of concrete operative thinking, and that in a more advanced way, the irony needs a formal operational thought, existent only from the adolescence. In the incongruity resulting from the word games, there is a realm of fantasy as incongruity, in the irony, it is more real, as it refers to something unexpected that happens, but it's not impossible.

There is a positive relationship between creativity and appreciation of humor with the academic and social competence. Humor is important to the progressive formation of sociability. When the child learns that the incongruity can be fun, rather than confused, bases its interpretation in what it observes from the outside world. Most humor contains a remarkable interpersonal aspect as a joke has more fun when shared.

Caring holistically of children and adolescents requires careful attention to the explanation of what will be done by finding a funny story to tell, the moment of humor that alleviates and demystify with the conscious effort to be authentic, sharing victories and frustrations. This humorous way of being of the health professional will allow the child and parents to trust and feel themselves safe in procedures simpler or more complex, where are examples the management of aerosol, performing capillary blood glucose, collection of blood for analysis or the preparation for lumbar puncture. Also the strengthening of the relations, mutual communication, the diagnostic process, the exploration of feelings, the ability to change, creativity and management of an attitude of resistance in children and adolescents are aspects that can be improved through playful activities and humor.

The result of jokes, humorous tones or sharing of anecdotes is a feeling of relaxation, welfare and closeness between health professionals, children and parents. Humor, used appropriately, calms, indeed, the anxiety, creates a relaxed atmosphere, promotes communication and a relation of partnership between the child and all those involved in the process of care, enabling them a better acceptance of the rules of the organization.

The ability to laugh at himself with others, and in complex and complicated situations, will allow the child or adolescent to feel confident, relax and decenter himself of the situation which he lives, and will enable the parents and nurses to be true and live a sense of "to be working together."

To develop a professional humoristic attitude is necessary to keep the mind open and a "letting go" in the actions, even if it may seem strange or a little intuitive. It is this liberation that will lose the fear of the ridicule and allow the child or adolescent, existing in each one of us, to meet with the person who is cared, it can be a child or adolescent.

**CONCLUSION**

Despite the humor is not yet included intentionally in the act of the health professionals, the welfare of the children and adolescents is promoted, during their stay in the unit / hospital services, through the various actions taken by professionals and others involved in the process of care.

Although they use humor, unconsciously, to respond to the needs of parents, children and adolescents, this has to become a deliberate action and integrate the care plan, having in mind that it can be inappropriate, if include cultural differences and parents extremely anxious. The health professional is not, necessarily, the exclusive generator of humor in the relation to the child.
The humor needs, to be personalized and therapeutic for children, adolescents and parents, to be built on the philosophy of the unit provider of care and the environment of this, humor needs to reflect in the attitudes and behaviors.

The child or adolescent has to be faced with a fun and entertaining environment, although, at first, finding a location that is, par excellence, hostile. In this environment, “light”, laid back, relaxed he will find the possibility to continue to be itself, true, optimistic and creative.

THANKS

The author is grateful, recognized, to the Teacher Adelaide Paiva and to the student Tania Gonçalves, the collaboration at the reviewing of this text. Thanks, also, to the student Priscilla Santos Ream, from the Federal University of Goiás, Brazil, the collaboration at the adaptation to Brazilian Portuguese.

REFERENCES
