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The Potential of the "children's waiting room" as an innovative health education strategy

O potencial da "sala de espera infantil" como estratégia inovadora de educação em saúde

El potencial de la "sala de espera infantil" como estrategia innovadora de educación en salud

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ABSTRACT

Objective: This study aimed to describe the experience of the "children's waiting room" implemented through an extension project at a reference child health care service in a medium-sized municipality in Brazil. **Data Synthesis:** The activity was conducted from October 2023 to May 2024, Monday through Friday, involving undergraduate students from different academic fields. A total of 160 children's waiting room sessions were performed, with the participation of 5 to 8 children and their caregivers per session. Playful and interactive educational strategies were used to address topics such as vaccination, sleep hygiene, and healthy eating. The use of pamphlets, educational play materials, toys, and interactive activities showed positive effects, although some challenges, including waiting time and the young age of the children, limited engagement with certain topics. **Conclusion:** The implementation of children's waiting spaces in public health care institutions represents a strategy to promote health education related to child development and family engagement while also providing valuable interprofessional practice opportunities for undergraduate students. Expanding these initiatives may strengthen efforts to promote child development.

Descriptors: Waiting Rooms; Health Education; Child Development; Children; Primary Health Care.

RESUMO

Objetivo: *Este estudo visa descrever a experiência da "sala de espera infantil" em um serviço de assistência à saúde infantil de referência, em um município de médio porte, no Brasil, promovido por um projeto de extensão.* ***Síntese de dados:*** *A atividade, realizada entre outubro de 2023 e maio de 2024, de segunda a sexta-feira, envolveu acadêmicos de diversas áreas, que conduziram 160 "salas de espera infantil", com participação de cinco a oito crianças e de seus responsáveis. Utilizaram-se estratégias educativas lúdicas e interativas, abordando temas como vacinação, higiene do sono e alimentação saudável. O*

uso de folhetos, recursos lúdicos, brinquedos e dinâmicas interativas mostrou efeitos positivos, embora certos desafios, como o tempo de espera e a pouca idade das crianças, tenham dificultado a participação em alguns temas. ***Conclusão:*** *A criação de ambientes de espera infantis em instituições de saúde pública é uma estratégia para promover educação em saúde sobre desenvolvimento infantil e engajamento familiar, oferecendo também prática interprofissional valiosa para os acadêmicos. Desse modo, expandir essas iniciativas pode fortalecer a promoção do desenvolvimento infantil.*

Descritores: *Salas de Espera; Educação em Saúde; Desenvolvimento Infantil; Crianças; Atenção Primária à Saúde.*

RESUMEN

Objetivo: *Este estudio tiene como objetivo describir la experiencia de la "sala de espera infantil" en un servicio de atención a la salud infantil de referencia, en un municipio de tamaño medio en Brasil, promovido por un proyecto de extensión.* ***Síntesis de datos:*** *La actividad, realizada entre octubre de 2023 y mayo de 2024, de lunes a viernes, involucró a estudiantes de grado de diversas áreas, quienes llevaron a cabo 160 "salas de espera infantil", con la participación de cinco a ocho niños y sus respectivos responsables. Se utilizaron estrategias educativas lúdicas e interactivas, abordando temas como vacunación, higiene del sueño y alimentación saludable. El uso de folletos, recursos lúdicos, juguetes y dinámicas interactivas mostró efectos positivos, aunque ciertos desafíos, como el tiempo de espera y la corta edad de los niños, dificultaron la participación en algunos temas.* ***Conclusión:*** *La creación de espacios de espera infantiles en instituciones de salud pública constituye una estrategia para promover la educación en salud sobre el desarrollo infantil y el compromiso familiar, ofreciendo también una valiosa práctica interprofesional para los estudiantes. De este modo, la expansión de estas iniciativas puede fortalecer la promoción del desarrollo infantil.*

Descriptores*: Salas de Espera; Educación en Salud; Desarrollo Infantil; Niños; Atención Primaria de Salud.*

INTRODUCTION

Health promotion through educational actions was highlighted during the 8th National Health Conference in 1986, which, based on a broader concept of health, encouraged more humanized practices and improved the quality of health care services. Within this context, the "waiting room," a moment when users await care, becomes a strategic setting for health education, contributing to humanized care and strengthening the integration between the population and health professionals[1].

Waiting rooms bring together diverse users from different age groups and social contexts, fostering educational practices that encourage knowledge exchange and interaction[2]. Previous studies have identified the waiting room period as an opportunity for educational interventions that promote autonomy, citizenship, and connections among users. Furthermore, health professionals can interact through dialogical approaches, ensuring greater receptiveness and strengthening the relationship between users and the health care system[1,3].

The waiting experience in health care settings can be challenging for children, causing distress for both them and their families. Delays in care may intensify feelings of fear and insecurity, further aggravated by illness-related conditions and caregiver anxiety[4]. In this context, providing opportunities for distraction and social interaction may reduce childhood stress, while well-designed environments may improve treatment outcomes[5].

Nevertheless, health care services often lack appropriate spaces dedicated to pediatric care, reflecting insufficient humanization of care delivery. Children are frequently treated solely as recipients of care, with their needs and rights overlooked. As a result, waiting environments may fail to provide comfort and safety, focusing exclusively on disease rather than the overall well-being of pediatric patients[6,7].

Children's waiting rooms aim to create playful and welcoming environments where children and caregivers can wait for consultations in a pleasant and engaging manner. Within these spaces, participants may receive guidance, interact, and exchange knowledge with health professionals regarding child development and issues related to health and well-being[8].

Therefore, this study aimed to describe the experience of implementing a "children's waiting room" initiative in a reference child health care service in a medium-sized municipality in Brazil through an extension project.

DATA SYNTHESIS

This descriptive and exploratory study reports the experience of the "children's waiting room" initiative promoted by the Early Childhood Academic League (LAPIN), which aims to protect, support, and promote development and well-being during early childhood. Conducted at the Department of Women's, Maternal, Child, and Adolescent Health (DSMGCA) of the Juiz de Fora municipal government, Minas Gerais, the initiative was supported by the Office of

Extension (PROEX) of Universidade Federal de Juiz de Fora (UFJF). The activities were coordinated by a faculty member and performed by undergraduate students from physical therapy, psychology, dentistry, social work, nutrition, and nursing programs.

The waiting room sessions were designed to provide a welcoming and educational environment, encouraging playful family interactions and promoting child development through play while raising awareness of health-related practices. LAPIN's activities were supported by continuous communication and collaboration between the health care unit and league members, an articulation considered essential to the success of the initiative.

The process began with establishing clear expectations and objectives between the health care unit and LAPIN through initial meetings aimed at aligning purposes, expected outcomes, and implementation strategies. Sessions were organized and conducted by undergraduate students from different programs who received specific training before participating, enabling a multidisciplinary approach.

Organization of the waiting rooms

Activities took place Monday through Friday at DSMGCA, selected because of its high demand for pediatric services and its potential to reach a greater number of families. LAPIN members were divided into pairs and strategically allocated to conduct activities during peak service hours. Each session lasted approximately 30 minutes and was held during both morning and afternoon periods, allowing greater participation by parents and children.

Topics addressed in the waiting rooms

The primary objective of these sessions was to promote health education for parents, caregivers, and particularly children. Relevant child health topics were addressed, including dengue prevention methods, the importance of vaccination, oral hygiene, sleep hygiene, child development, reading habits, among others. Topics were selected according to DSMGCA demands and caregiver observations, ensuring alignment with community needs.

Waiting room methodology

Between October 2023 and May 2024, 160 waiting room sessions were conducted four to five times per week with the participation of 15 undergraduate students from UFJF. Each 30-minute session was conducted by two students who engaged caregivers and children while they waited for appointments. On average, each session included 5-8 children aged 2-9 years accompanied by their caregivers.

Activities were planned weekly by pairs of students and consisted of both theoretical and practical components directed toward children. Activities were replicated by other league members throughout the week. Support pamphlets were provided to adults, while children participated in brief interactive activities such as games, puppetry, toys, and storytelling designed to capture attention and encourage active participation.

The small-group approach fostered a calm and focused environment, facilitating individualized interaction and resulting in meaningful exchanges between caregivers and children. Additionally, it strengthened relationships between professionals and families.

The main topics addressed and methodologies applied in each waiting room session are described below (Box 1).

Box 1 – Description of the topics and methodologies applied in each "waiting room" session between October 2023 and May 2024

Topic	Description/Objectives	Methodology
Importance of reading	This topic was proposed based on the importance of recognizing children as individuals in development who require positive stimulation to support growth[9]. Topics emphasizing the value of reading during early childhood were introduced, highlighting its role in cognitive, emotional, and social development and raising awareness about this practice.	The academic league developed a poster presenting information on the benefits of reading and strategies to encourage reading habits. Puppets were used to promote interaction with children, and children's books were provided for free exploration.
Emotional regulation in childhood	Emotional regulation begins to develop during early childhood alongside motor, cognitive, and neurological maturation. Children gradually learn to manage emotions, usually with adult support[10]. The objective was to emphasize the importance of emotional regulation for social and cognitive development, focusing on emotion identification and labeling. Guidance aimed to equip parents to better support children during this process.	Parents participated in discussions supported by printed educational materials covering emotion recognition, emotion labeling, and strategies to help children manage emotional dysregulation.

Sleep hygiene	Sleep is a critical factor in child development. Children experiencing sleep difficulties may present learning problems, irritability, mood changes, and aggressive behaviors[11]. This topic addressed the importance of sleep for child development and offered recommendations to improve sleep quality.	Children participated in a game called "This or That," using printed images demonstrating sleep-promoting habits. Children selected images representing healthy sleep behaviors and received playful explanations according to their responses.
Dengue, COVID-19, or H1N1?	Guidance focused on distinguishing these diseases, identifying warning signs and symptoms, maintaining vaccination schedules, and reinforcing preventive measures. According to the World Health Organization (WHO), immunization prevents disease, disability, and death caused by vaccine-preventable illnesses[12].	Parents participated in discussions using an educational banner provided by the healthcare service. The banner included information regarding symptoms, transmission routes, comorbidities, and preventive care measures.
Oral hygiene	Childhood is a critical period for oral health development, as oral hygiene habits and self-care practices are established during this stage[13]. The objective was to provide guidance regarding toothbrushing techniques, flossing, and the appropriate type and quantity of toothpaste.	The academic league developed and distributed educational pamphlets. Children participated in a playful activity using a laminated smile illustration with simulated debris created using pen markings. Toothbrushes were used to practice appropriate brushing techniques previously demonstrated.
Screen use	Excessive screen exposure during childhood may interfere with social skill development and negatively affect sensory, visual, and motor activities[14]. Discussions focused on electronic device use, associated consequences, and balancing screen exposure with daily activities emphasizing playtime and family interaction.	Parents received educational pamphlets explaining screen-related benefits and risks and recommendations for reducing exposure time. Children participated in puppet activities and logical reasoning games developed using recycled materials. Healthy development concepts were presented through playful and practical strategies.
Healthy eating	Childhood is characterized by growth and development, making healthy nutrition essential because of increased energy requirements and vulnerability to nutritional imbalances[15]. The objective was to raise awareness regarding balanced nutrition and the relationship between diet and health.	The academic league developed educational materials for parents containing healthy eating recommendations. Children participated in activities selecting images representing foods and habits associated with healthy development.
Diabetes	Diabetes, a chronic condition characterized by impaired insulin production or utilization, was addressed to increase awareness among parents regarding the disease, warning signs, and risk factors, particularly those associated with unhealthy eating habits.	Educational materials developed by the DSMGCA were distributed to parents. Children participated in activities involving healthy and unhealthy food choices. At the end of the activity, capillary blood glucose testing was offered to interested parents and children.

Fonte: elaboração própria (2024).

Using pamphlets, posters, and interactive activities enhanced children's attention and stimulated interest in the proposed themes, facilitating discussion and encouraging changes in health-related practices. For example, during the oral hygiene waiting room session, some caregivers acknowledged being unaware of proper toothbrushing techniques or the recommended amount of toothpaste. Following the session, they reported that the information received helped them correct routine brushing mistakes and adopt healthier practices.

Challenges and opportunities

Among the challenges identified were frustration associated with waiting time, urgency to receive care, and screen use, which hindered caregiver engagement. Regarding children, younger age and electronic device use limited participation in playful activities. Nevertheless, caregivers and children generally demonstrated good engagement.

The multidisciplinary team and interactive activities involving toys contributed positively to the initiative. Furthermore, active child participation and age-appropriate communication reinforced educational messages. Activities directed toward both caregivers and children increased engagement, while the multidisciplinary approach diversified topics and broadened participation according to audience interests.

This approach aligns with current discussions regarding child-centered care (CCC), which emphasizes recognizing children as active participants in their health care and ensuring that their needs and preferences are considered[16,17].

Parental and caregiver interaction during activities represented another positive aspect. Many caregivers actively participated and valued opportunities to strengthen relationships with their children in a different environment. This interaction provided emotional and practical support, promoting shared educational and recreational experiences.

From this perspective, activities conducted within children's waiting rooms are grounded in literature on early childhood development, which highlights the importance of parental involvement in educational and playful activities. Positive parent-child interactions in educational and recreational contexts create safe and stimulating environments essential for healthy early childhood development[18]. Moreover, parental involvement in school and community activities supports the development of support networks benefiting children and families, fostering a culture of shared care[19].

The collaborative relationship established between the health care service and the extension project contributed to ensuring commitment toward shared goals and facilitated activity coordination. Likewise, health professionals

provided essential information regarding service routines and patient profiles, enabling adaptation of activities to local realities.

Additionally, implementing children's waiting rooms through LAPIN aligns with teaching-service integration principles, which seek to connect knowledge production and educational activities within the Brazilian Unified Health System (SUS). This integration involves collaboration among students, faculty members, health professionals, and managers to strengthen training processes and workforce development[20].

Participation in organizing and conducting activities provided undergraduate students with practical experiences that enriched their academic training and contributed to personal development. This approach enhances service quality while strengthening the role of future health professionals by expanding competencies and deepening understanding of child and family health care needs[21].

During waiting room sessions, improvements in communication skills among undergraduate students were observed, as participants were challenged to engage with heterogeneous audiences composed of children and adults with varying levels of health knowledge. Effective communication across diverse groups requires understanding group dynamics, sensitivity to audience characteristics, and the use of inclusive practices that avoid prejudice[22]. Developing these competencies strengthens health care training by preparing future professionals to promote community empowerment and disseminate health information safely and effectively. This process involves integrating scientific knowledge with community perspectives to encourage engagement and behavioral changes through knowledge translation. These competencies are relevant not only for professional practice but also for everyday interactions[23].

The multidisciplinary experience also emerged as a valuable aspect. Collaboration among students from different academic backgrounds provided opportunities for teamwork reflecting real-world comprehensive health care delivery. Interaction across disciplines enabled students to develop holistic perspectives regarding health needs and promoted integrated care approaches[24]. Such collaboration strengthened communication and cooperation skills while preparing students to address challenges in professional environments and deliver more coordinated and effective care[25].

By planning and implementing educational activities, undergraduate students developed pedagogical competencies, including adapting complex information for child audiences. These competencies are particularly valuable in health promotion and community education settings. In this regard, the Canadian Institutes of Health Research[26] define knowledge translation as the process of adapting and communicating complex scientific information in accessible ways for different audiences, including children. This process involves simplifying and contextualizing information without compromising scientific rigor, thereby facilitating understanding and practical application. Consequently, educational competency development contributes both to professional training and to knowledge translation, supporting the practical and effective application of scientific knowledge within communities[27].

Despite positive aspects, implementing early childhood-focused activities in health care environments requires clear guidance and planning[28]. LAPIN's waiting room experience revealed barriers that limited activity reach, including high patient flow and participant turnover during sessions. Large numbers of patients made predicting attendance difficult. Rapid fluctuations in participant numbers require awareness of appropriate moments to begin activities[23], representing challenges for planning, resource allocation, and time management.

Another barrier involved the broad age range of participating children. Early childhood encompasses critical developmental periods during which children acquire cognitive, emotional, and motor skills. Consequently, activities must be adapted to diverse age groups ranging from infants to children aged 6 years, each presenting different developmental stages[29]. This requirement demands ongoing adjustments to ensure activities remain engaging and beneficial for all participants.

Furthermore, waiting rooms are inherently characterized by noise, movement, and interruptions[23]. Constant noise and frequent movement observed on certain practice days reduced concentration among children and caregivers, compromising interaction quality and engagement in activities.

CONCLUSION

The strategy of engaging children in the proposed activities proved successful, transforming the waiting room into an interactive setting for health education. This environment enabled meaningful learning by promoting health through playful approaches while maximizing children's engagement and access to information during waiting periods before health care appointments.

Despite the challenges encountered, implementing children's waiting rooms had a positive impact, benefiting both participants and undergraduate students. The project provided an enriching experience that outweighed operational

difficulties and contributed to child health education. Additionally, it supported the professional development of undergraduate students by enabling them to apply theoretical knowledge while strengthening practical skills and competencies.

This experience demonstrated that creating welcoming waiting environments within public health care institutions may represent an effective strategy for promoting health education and family engagement while also serving as a valuable practice setting for health professional training. Therefore, implementing and expanding these initiatives is strongly recommended, given the benefits observed, to strengthen public health efforts and promote healthy child development.

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APPENDIX – EDITORIAL GUIDELINES

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The authors declare that they have no conflicts of interest related to the topic addressed in this study.

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