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KNOWLEDGE AND USE OF INTEGRATIVE PRACTICES AND PSYCHOLOGICAL SYMPTOMS OF UNDERGRADUATE NURSING STUDENTS

CONHECIMENTO E USO DE PRÁTICAS INTEGRATIVAS E SINTOMAS PSICOLÓGICOS DE ALUNOS DE GRADUAÇÃO EM ENFERMAGEM

CONOCIMIENTO Y USO DE PRÁCTICAS INTEGRATIVAS Y SÍNTOMAS PSICOLÓGICOS DE ESTUDIANTES DE GRADO EN ENFERMERÍA

Raquel Valente de Souza[1], Gabrielli Sousa dos Santos[2], Marcella Cecilio de Almeida[3], Adriana Cristina Nicolussi[4]

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ABSTRACT

Objective: To evaluate the knowledge and use of integrative and complementary practices and the presence of symptoms of depression, anxiety and stress in undergraduate nursing students. **Method**: An exploratory descriptive study, with students of both genders, aged 18 years or over, enrolled in the Nursing course at a federal university in Minas Gerais. Google Forms® and Depression, Anxiety and Stress Scale - 21 were used. The data were analyzed using the PSPP® software and approved by the Research Ethics Committee. **Results**: Forty students participated, many were familiar with, but few used integrative practices before the pandemic, several sought out the topic during it and some started using them. The majority were normal or mild, however, there were reports of students with severe and extremely severe depression, anxiety, and stress. **Conclusion**: the use of integrative practices should be encouraged to reduce these symptoms and improve the mental health of undergraduate nursing students.

Descriptors: Complementary Therapies; Nursing Students; Depression; Anxiety; Stress, Psychological.

[1] Nursing undergraduate student at UFTM. Federal University of Triângulo Mineiro. https://orcid.org/0000-0003-2581-234X
[2] Nursing undergraduate student at UFTM. Federal University of Triângulo Mineiro. https://orcid.org/0009-0005-8673-077X
[3] Nursing undergraduate student at UFTM. Federal University of Triângulo Mineiro. https://orcid.org/0000-0002-6287-2117
[4] RN, Master in Fundamental Nursing, Doctor of Science. Adjunct Professor of the Department of Nursing in Hospital Care (DEAH) at UFTM. Federal University of Triângulo Mineiro, Uberaba/MG. https://orcid.org/0000-0001-5600-7533

RESUMO

Objetivo: Avaliar o conhecimento e uso de práticas integrativas e complementares e presença de sintomas de depressão, ansiedade e estresse em alunos de graduação em Enfermagem. **Método**: estudo descritivo exploratório, com alunos de ambos os gêneros, com 18 anos ou mais, matriculados no curso de Enfermagem de uma universidade federal de Minas Gerais. Utilizou-se *Google Forms*® e *Depression, Anxiety and Stress Scale*-21. Os dados foram analisados pelo *software* PSPP® e aprovado pelo Comitê de Ética em Pesquisa. **Resultados**: Quarenta alunos participaram, muitos conheciam, mas poucos usavam práticas integrativas antes da pandemia, vários buscaram o tema durante a mesma e alguns começaram a utilizá-las. A maioria estava em grau normal ou leve, contudo, houve relatos de alunos como graves e extremamente graves para depressão, ansiedade e estresse. **Conclusão**: o uso de práticas integrativas deve ser incentivado visando reduzir estes sintomas e melhorar a saúde mental dos alunos de graduação em enfermagem.

Descritores: Terapias Complementares; Estudantes de Enfermagem; Depressão; Ansiedade; Estresse Psicológico.

RESUMEN

Objetivo: Evaluar el conocimiento y uso de las prácticas integradoras y complementarias y la presencia de síntomas de depresión, ansiedad y estrés en estudiantes de pregrado en Enfermería. **Método**: estudio descriptivo exploratorio, con estudiantes de ambos géneros, de 18 años o más, matriculados en el curso de Enfermería de una universidad federal de Minas Gerais. Se utilizaron *Google Forms*® y *Depression, Anxiety and Stress Scale*-21. Los datos fueron analizados mediante el software PSPP® y aprobados por el Comité de Ética en Investigación. **Resultados**: Cuarenta estudiantes participaron, muchos conocían, pero pocos las usaban prácticas integradoras antes de la pandemia, varios buscaron información sobre el tema durante la misma y algunos comenzaron a utilizarlas. La mayoría presentaba síntomas normales o leves, sin embargo, algunos informaron tener síntomas graves o extremadamente graves de depresión, ansiedad y estrés. **Conclusión**: se debe fomentar el uso de prácticas integradoras para reducir estos síntomas y mejorar la salud mental de los estudiantes de graduación en enfermería.

Descriptores: Terapias complementarias; Estudiantes de Enfermería; Depresión; Ansiedad; Estrés Psicológico.

INTRODUCTION

With all the pressure in the job market and students' desire to become professionals, it is possible to see how undergraduate students are affected psychologically. Factors such as sleep deprivation caused by long workloads, unsatisfactory relationships with family, friends, classmates and teachers, lack of time for leisure or personal care, such as physical activities, are prevalent in research conducted with students in health areas.[1]

Nursing students face heavy pressures throughout their studies, one of which is remaining in higher education, especially when the family income is less than four minimum wages and these students live far from their families, in which students need to seek scholarships for research projects, monitoring, extension, in addition to other aids to be able to cover university expenses.

In addition, insecurity regarding professional training and expectations related to the job market and professional responsibility are also considered very stressful factors.[2]

In undergraduate nursing courses, the following are considered stress-triggering factors: internships, hospital practices, performance of technical procedures, use of new technologies and equipment, constant supervision by professors, the practical assessment system, relationships established with patients, professors' expectations regarding academic performance and the hospital dynamics itself. These factors can also hinder learning, generate errors, lack of or difficulty concentrating[2] and even trigger other psychological problems such as anxiety and depression.

Furthermore, the Coronavirus Disease 2019 (COVID-19) pandemic, which began in March 2020, has proven to be a factor that causes new psychological disorders or worsens existing ones. The periods in which classes had to be interrupted, fear of the disease, uncertainty about the future, grief, and financial instability have all had an impact on students' lives, causing depression, anxiety, and stress.[3]

A multicenter study, carried out with nursing students from two private institutions in Colombia and one public institution in Spain, found that the majority of students (61.9%) had their mental health affected during the pandemic, presenting personal (69.8%), academic (54.6%) and economic (52.6%) difficulties and symptoms of post-traumatic stress (44.4%), and suggests that systematic, continuous and comprehensive strategies be implemented by educational institutions.[4]

Strategies that can be used are Integrative and Complementary Health Practices (PICS) because they use therapeutic resources based on traditional knowledge, aimed at preventing various diseases, in addition to being able to be used as a treatment in conjunction with conventional medicine. Even though Western medicine is predominant in developed or developing countries, the use of PICS has increased greatly.[5]

Brazil is currently considered a world reference country in the use of PICS, which began to have its use established in 2006 through the National Policy of Integrative and Complementary Practices (PNPIC) in the Unified Health System (SUS), with the aim of guaranteeing comprehensiveness in health services, offering practices such as: acupuncture, aromatherapy, art therapy, meditation, music therapy, flower therapy, yoga and others, totaling 29 therapies, provided comprehensively and free of charge in Primary Health Care (APS), the main gateway to the SUS.[5-6]

PICS have been consolidated in Brazil for over a decade through their

implementation in the SUS, but their knowledge and use by the population is still deficient. The lack of studies on the effectiveness of PICS and the low adherence to their use by professionals are among the factors responsible for this scarce use and knowledge by the population. The low adherence by professionals is related to the lack of knowledge about PICS, as well as the lack of practice in its management6, therefore it is important to disseminate knowledge to undergraduate nursing students, as they are future health professionals who will be able to qualify and incorporate PICS into their care.

Aiming to minimize anxiety and stress in students at a university in Rio Grande do Sul, as a health-promoting strategy, a study was developed using mindfulness meditation that promoted positive changes in the students' lives, such as self-knowledge and well-being, in addition to providing increased concentration, focus on studies and quality of sleep.[7]

Knowing the importance of deepening knowledge about PICS and how students are affected by graduation, and may experience depression, anxiety and stress, the study aims to evaluate nursing students' knowledge and use of PICS, thus contributing to the dissemination of knowledge and scientific advancement.

Therefore, the objective of this study is to evaluate the knowledge and use of integrative and complementary practices and the presence of symptoms of depression, anxiety and stress in undergraduate Nursing students.

METHOD

Exploratory descriptive study with a quantitative approach. The quantitative research approach was chosen because it is a project with specific and well-defined hypotheses. The study proposes a topic that has been little discussed, and where many studies can be developed on it, with the possibility of new perspectives, characterizing it as an exploratory study. This study provides detailed descriptions of its topic, outlining the characteristics and profiles of people and groups involved in the research, in order to discover and assume how the profile of the selected group and the topic are correlated, characterizing it as a descriptive study.[8]

The study was carried out at a federal university in the state of Minas Gerais, with undergraduate Nursing students in January 2023, the academic period at this university, in which there were 284 students enrolled from the first to the tenth period. The inclusion criteria were: students of both genders, aged 18 or over, regularly enrolled in the Nursing course at the aforementioned university.

The population was invited through online messages via WhatsApp®, which the

assistant researchers sent to class representatives from the first to the tenth period and these representatives shared in the WhatsApp® groups of their respective period, which provided a link to access the Free and Informed Consent Form (FICF) and explained the objectives of the study. Convenience sampling was carried out, that is, those who agreed to participate were directed to the questionnaire generated by Google Forms®, which allowed students to answer it privately, being accessed by cell phone, tablet or computer, connected to the internet, at the most convenient time for them.

The form used was previously constructed and validated in previous research to collect sociodemographic data, containing questions such as: age, gender, self-reported race, who they live with, monthly family income, year of entry/period studied, religion, presence of pathologies and/or comorbidities and about knowledge and use of PICS.

The Depression, Anxiety and Stress Scale (DASS-21)9 was used to assess depression, anxiety and stress. It consists of 21 items in which subjects indicate the degree to which they experienced each of the symptoms described in each one, during the previous week, on a four-point Likert scale, between 0 (does not apply) and 3 (applies to me a lot or most of the time). Each subscale (depression, anxiety and stress) consists of seven items, the score of which is the sum of the respective items multiplied by two, containing cut-off points that indicate normal, mild, moderate, severe and extremely severe intensity.

The collected data were transmuted into an Excel® spreadsheet. Data analysis was performed using descriptive statistics, where categorical variables were analyzed using absolute and relative frequency measures, using the PSPP® software, a free application used for statistical analysis of sampled data.

The study was carried out following the precepts established by Resolution 466/12 of the National Health Council, and was approved by the Research Ethics Committee (CEP) of the proposing institution, opinion no. 5,824,186.

RESULTS

A total of 40 students responded to the form, with an average age of 23.77 years, with a minimum age of 18 and a maximum age of 46. The majority of students were female, white, single, living with up to three people (including themselves), with a monthly family income of one to three minimum wages and Catholic, as shown in Table 1.

Table 1 – Sociodemographic characteristics of the sample (n=40). Minas Gerais, Brazil, 2023.

VARIABLES	FEATURES	n(%)
Gender	Feminine	35 (87.50)
	Masculine	3 (7.50)
	Non-binary	1 (2.50)
	Other	1 (2.50)
Self-declared color	White	25 (62.50)
	Brown	12 (30.00)
	Black	3 (7.50)
Marital status	Single	37 (92.50)
	Married - Stable Union	2 (5.00)
	Other	1 (2.50)
Number of people living together (including yourself)	1	7 (17.50)
	2	10 (25.00)
	3	9 (22.50)
	4	10 (25.00)
	5	3 (7.50)
	6	1 (2.50)
It's working	No	35 (87.50)
	Yes	5 (12.50)
Family Monthly Income	Up to 1 minimum wage (MW) Above 1 up to 3 MW	6 (15.00) 17 (42.50)
	Above 3 to 5 SM	11 (27.50)
	Above 5 SM	6 (15.00)
Religion	Catholic	19 (47.50)
	Spiritist	10 (25.00)
	Other	8 (20.00)
	Atheist	2 (5.00)
	Evangelical	1 (2.50)
Practitioner	Yes	22 (55.00)
	No	18 (45.00)

Source: Prepared by the authors, 2023.

Table 2 presents clinical data from the sample. Most students had no diagnosed diseases and had not received pharmacological or non-pharmacological treatment.

Table 2 – Clinical characteristics of the sample (n=40). Minas Gerais, Brazil, 2023.

VARIABLES	FEATURES	n(%)
Have a diagnosed disease	No	25 (62.50)
	Yes	15 (37.50)
What diseases	Does not have	25 (62.50)
	Psychological/mental illness	10 (25.00)
	Physical and psychological/mental illness	3 (7.50)
	Physical illness	2 (5.00)
Pharmacological treatment	No	29 (72.50)
	Yes	11 (27.50)
Non-pharmacological treatment	No	36 (90.00)
	Yes	4 (10.00)

Source: Prepared by the authors, 2023.

Regarding the period studied by the participants, considering that the Nursing course at the aforementioned university has 10 periods, the data show that the majority of students were in the 7th period of the nursing course, followed by the 10th period, containing 12 and 10 students respectively; five students were in the 6th period, three students in the 4th and 9th periods each; two students in the 1st and 5th periods each; and one student in the 2nd and 3rd period each.

The data in Table 3 are related to the knowledge and use of PICS before, during, and after the pandemic, as well as its effects and recommendations. Most students had no knowledge and had not studied content related to PICS before the pandemic, but a significant number of students started practicing PICS during or after the pandemic. Most noticed improvements with the use of PICS and would recommend them to others.

Table 3 –Data on knowledge and use of PICS in the sample (n=40). Minas Gerais, Brazil, 2023.

VARIABLES	FEATURES	n (%)
Attended PICS before the pandemic	No	35(87.50)
	Yes - elective/optional subject	3 (7.50)
	Yes - teaching, research, extension and/or academic league project	2 (5.00)
Did you attend PICS during or after the pandemic?	No	17 (42.50)
	Yes - teaching, research, extension and/or academic league project	11 (27.50)
	Yes - elective/optional subject	9 (22.50)
	Yes - course and/or scientific event	3 (7.50)
I knew about PICS before the pandemic	Yes	35 (87.50)
	No	5 (12.50)
I practiced PICS before the pandemic	No	22 (55.00)
	Yes	18 (45.00)
Started practicing PICS during the pandemic	No	30 (75.00)
	Yes	10 (25.00)
Started PICS practice after returning to in-person classes	No	28 (70.00)
	Yes	12 (30.00)
Noticed improvement with the use of PICS	I have never practiced	22 (55.00)
	Yes	18 (45.00)
Noticed unwanted effects with the use of PICS	I have never practiced	22 (55.00)
	No	18 (45.00)
Would recommend PICS	Yes	38 (95.00)
	No	2 (5.00)

Source: Prepared by the authors, 2023.

As shown in Table 4, the five PICS most known by participants before the pandemic were acupuncture, herbal medicine, yoga, massage and meditation; the five most practiced before the pandemic were homeopathy, acupuncture, flower therapy (Bach flowers), herbal medicine and massage. During the pandemic, they were meditation, yoga, herbal medicine, homeopathy and music therapy, while after the return of in-person classes and activities, they were yoga, aromatherapy and music therapy.

Table 4– Data on PICS known and practiced by the sample (n=40). Minas Gerais, Brazil, 2023.

PICS	Known before the pandemic n (%)	Practiced before the pandemic n (%)	Practiced during the pandemic n (%)	Practiced after returning to face-to-face n (%)
Acupuncture	37 (92.50)	7 (17.50)	2 (5.00)	0 (0.00)
Phytotherapy	34 (85.00)	6 (15.00)	3 (7.50)	2 (5.00)
Yoga	34 (85.00)	2 (5.00)	5 (12.50)	6 (15.00)
Massage	34 (85.00)	5 (12.50)	1 (2.50)	2 (5.00)
Meditation	33 (82.50)	3 (7.50)	9 (22.50)	1 (2.50)
Homeopathy	30 (75.00)	9 (22.50)	3 (7.50)	2 (5.00)
Reiki	24 (60.00)	2 (5.00)	2 (5.00)	2 (5.00)
Chiropractic	22 (55.00)	2 (5.00)	0 (0.00)	1 (2.50)
Aromatherapy	20 (50.00)	2 (5.00)	2 (5.00)	3 (7.50)
Shantala	19 (47.50)	1 (2.50)	0 (0.00)	0 (0.00)
Music Therapy	19 (47.50)	4 (10.00)	3 (7.50)	3 (7.50)
Flower Therapy	18 (45.00)	7 (17.50)	1 (2.50)	2 (5.00)
Hypnotherapy	15 (37.50)	1 (2.50)	0 (0.00)	0 (0.00)
Art therapy	13 (32.50)	1 (2.50)	0 (0.00)	0 (0.00)
Relaxation	13 (32.50)	1 (2.50)	1 (2.50)	0 (0.00)
Ozone therapy	12 (30.00)	1 (2.50)	0 (0.00)	0 (0.00)
Hydrotherapy	11 (27.50)	1 (2.50)	0 (0.00)	0 (0.00)
Chromotherapy	11 (27.50)	1 (2.50)	0 (0.00)	1 (2.50)
Circle Dance	10 (25.00)	1 (2.50)	1 (2.50)	0 (0.00)
Family Constellation	10 (25.00)	1 (2.50)	0 (0.00)	0 (0.00)
Ho'oponopono	10 (25.00)	1 (2.50)	0 (0.00)	1 (2.50)
Guided Imagery	5 (12.50)	0 (0.00)	1 (2.50)	0 (0.00)
Reflexology	4 (10.00)	0 (0.00)	1 (2.50)	1 (2.50)
Laying on of hands	4 (10.00)	1 (2.50)	0 (0.00)	1 (2.50)
Others	11 (27.50)	2 (5.00)	0 (0.00)	3 (7.50)
Did not know/did not practice	1 (2.50)	22 (55.00)	24 (60.00)	22 (55.00)

Source: Prepared by the authors, 2023.

Table 5 presents data regarding the presence of possible symptoms of depression, anxiety and stress presented by students of according to the DASS-21 cutoff point. In the sample analyzed, 40%, 40% and 55% of the students were within the normal category for depression, anxiety and stress, respectively; 7.5%, 25% and 10% were also found in the extremely severe category for the same three variables, respectively.

Table 5- Frequency and percentage of the sample (n=40) according to the DASS-21 cutoff point. Minas Gerais, Brazil, 2023.

	Depression Cutoff points	**Depression** n (%)	**Anxiety** Cutoff points	**Anxiety** n (%)	**Stress** Cutoff points	**Stress** n (%)
Normal	0-9	16 (40.0)	0-7	16 (40.0)	0-14	22 (55.0)
Light	10-13	3 (7.5)	8-9	5 (12.5)	15-18	2 (5.0)
Moderate	14-20	9 (22.5)	10-14	7 (17.5)	19-25	6 (15.0)
Serious	21-27	9 (22.5)	15-19	2 (5.0)	26-33	6 (15.0)
Extremely Serious	28-42	3 (7.5)	20-42	10 (25.0)	34-42	4 (10.0)

Source: Prepared by the authors, 2023.

DISCUSSION

The sociodemographic profile of the students in this investigation corroborates a study that found a predominance of the age group between 18 and 64 years old at a private university in Curitiba – PR10, however at a public university in the interior of São Paulo, a change in profile was observed, with a greater intake of students aged 18 to 24 years old.[11]

Regarding gender, collaborating with the results of this research, the literature reveals the predominance of the female gender, the study developed in Curitiba registered 79.3% of women enrolled in courses in the Health area10, and in Ribeirão Preto - SP, in ten years analyzed (2006 to 2015), there was an average of 82.6% of female entrants.[11]

According to the Federal Nursing Council (COFEN) in Brazil, in 2021, Nursing had 2,540,715 professionals, including technicians, assistants and nurses; of these, 85% are women.[12] Nursing is still seen as a female profession because it is a profession that has caring as its main focus, caring that is still seen as something maternal, instinctive, feminine, and not as scientific knowledge, evidence-based care as it has in fact become. The historical weight is carried to this day and can be seen by the number of women present in the profession.[13]

Regarding skin color, the data corroborate the study carried out in Ribeirão Preto[11], which in the period from 2006 to 2015, the majority of incoming students were self-declared white, and also showed that the number of yellow, indigenous,

brown and black freshmen was small or non-existent, and currently, both institutions adopt a racial quota policy, aiming to increase inclusion.

Regarding residence and family income, a study with students in the 1st, 2nd and 3rd periods of a Brazilian and a Portuguese university found that the majority lived with friends, in an apartment/house paid for by the family, were able to cover their expenses through scholarships and considered themselves middle class in socioeconomic terms.[14]

Regarding knowledge and use of PICS, results of a survey developed at a Federal Higher Education Institution showed that more than half of the students (64.7%) were unaware of the PNPIC in the SUS, so they took a mini-course to increase their knowledge about existing PICS and after taking the mini-course, the students' learning was noticeable, in which all reported knowing some therapy[15], demonstrating the importance of these extracurricular activities for expanding knowledge.

A study carried out with Nursing students from the Centro Universitário Tabosa de Almeida (ASCES/UNITA), in the city of Caruaru (PE), promoted the didactic application for the construction of skills and competencies in the use of PICS, presenting practical theoretical material, where students were able to carry out the practice of PICS among themselves, being able to prove the benefits that they caused in maintaining the balance between body, mind and spirit. In the end, they suggest that the theme be offered from the beginning of the undergraduate course, so that the student can improve their knowledge throughout the course.[16] Therefore, it is important that universities include the theme in optional subjects, courses, projects and/or events to provide students with an integral, complete and humanized education that knowledge about PICS can offer.

Students who practiced some PIC reported that they had obtained improvements in their lives with its use, as well as not having had undesirable effects, collaborating with a study developed in Bahia[17] with university students who related PICS to the occurrence of benefits to life, health and the maintenance or achievement of individual quality of life. The students reported believing in the effectiveness of PICS, considering them as linked to the promotion, prevention and recovery of health. However, although they were open to other medical rationales, they still showed themselves to be linked to the biomedical model.[17]

Regarding the psychological symptoms analyzed by DASS-21, it was observed that most of the students were at normal and mild levels, however a small portion were at severe and extremely severe levels, diverging from a study carried out in

Ribeirão Preto, which found 26.8%, 15.8% and 20.7% of students at normal and mild levels, and 41.5%, 53.7% and 31.7% of students at extremely severe levels, for depression, anxiety and stress, respectively.[18] Given these alarming results, they carried out an integrative review with 40 articles that used PICS to manage these symptoms, having found positive effects with mindfulness meditation, music therapy, yoga, aromatherapy and others; and suggest that higher education institutions evaluate the best strategy for their reality to promote the mental health of nursing students.[18]

A study conducted with undergraduate nursing students during the COVID-19 pandemic showed that among the 83 students who participated in the research, 79 (95%) reported having felt mentally affected during the period of social isolation, having developed anxiety, stress and depression during this period, or the worsening of previous diagnoses, presenting worsening or relapses in panic, bipolar and eating disorders. Of the 83 participants, 52 (63%) reported using PICS, with auriculotherapy being the most practiced PIC, and 48 (92%) students reported obtaining positive results with the practices.[19]

An integrative review on the use of auriculotherapy in mental health care showed its use by 71 undergraduate nursing students, showing a reduction in stress levels in 45.39% of these students. In addition, the findings also show a reduction in anxiety levels and a contribution to improving sleep disorders in other university students.[20]

The effects of Pilates performed on the floor were evaluated in an integrative review, which found that regular exercises provide a new way of understanding the body and assimilating the benefits of the body-mind connection, being a powerful strategy in managing both depression and anxiety and stress faced by students, in addition to improving their mood and quality of life.[21]

Another integrative review on the use of PICS by nursing students showed that the most commonly used therapies were music therapy and mindfulness, seeking to reduce anxiety and stress. They identified the lack of records reporting the impact of PICS use on students' lives as a gap. It is believed that further investigations on this topic will bring more future discussions, the possibility of an unusual resource for caring for oneself and others, also bringing different care options, which is only possible with greater knowledge of PICS.[22]

Furthermore, there is currently an increase in the number of professionals trained and qualified to work with these practices, as scientific evidence increasingly shows the benefits of integrated treatment between conventional medicine and PICS.6

CONCLUSION

This study found that undergraduate nursing students were aware of PICS, but few practiced it before the pandemic. Regarding the presence of symptoms of depression, anxiety, and stress, it was observed that most students were at a normal or mild level, according to the instrument evaluated; however, there were reports of students as severe and extremely severe, according to the instrument's cutoff point.

As limitations, the small sample size and a single nursing course stand out, making it impossible to compare depression, anxiety and stress scores between those who practice PICS or not, in addition to the difficulty in students' adherence to responding to the online forms, which makes it impossible to generalize the results.

To expand knowledge and use of PICS by nursing students, it is suggested that undergraduate courses provide more projects, optional subjects and seminars from the beginning of the undergraduate course, which not only clarify their implementation policy, but also show, in fact, what PICS are, how they can be used, how they can be offered and the health benefits, promoting better physical and mental health conditions for both students and their future patients, considering that studies scientifically proving their effectiveness have been growing over the years, thus also being able to collaborate with the dissemination of their use to improve symptoms of depression, anxiety and stress in this population.

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