

Move- Medburnout: emotional regulation program for medical students, using dance as a therapeutic tool

Abstract

This article is experience report, about a intervention developed during research with medical students in the southwest region of Bahia. The main objective of creating and implementing an emotional regulation program for medical students, using dance as a therapeutic resource with a focus on preventing and coping with Burnout Syndrome. The “Movimente-se medburnout” Program was offered in group mode, with weekly meetings, for 8 weeks, permeated by music, dance and creative body movements. 13 students of both sexes participated in the meetings, with a good response and positive evaluation of the activities developed. The result of this work was constituted as a technical technological product that will be presented to the managers of the participating universities.

Keywords: medical students, therapeutic tool, emotional regulation, technological technical product

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Introduction

Burnout Syndrome (BS) is known as a phenomenon of the modern age, resulting from the interaction of chronic stress in the workplace and personal characteristics. It is characterised as a symptomatic triad, which presents itself with a gradual worsening of mood and lack of motivation, culminating in physical and mental exhaustion resulting from the negative reaction to chronic stress and excessive working hours. Recognised in various professions, it is quite common in health professionals and students. Global exhaustion, depersonalisation and a decline in job satisfaction mark the symptomatological triad of this syndrome. Burnout syndrome has been reported among students, as their activities can be a source of stress. In a climate of great pressure and competitiveness, graduating in medicine requires great dedication and an excessive workload.¹ Limited time for leisure, social activities and self-care, coupled with difficulty or embarrassment in recognizing one's own limits, are risk factors for chronic stress and illness during medical school.²

Because they are in contact with the problems of other human beings, health students can develop coping mechanisms to deal with harmful stresses, which can disrupt their professional and personal lives, making them more prone to developing Burnout Syndrome. The concept of Burnout in students can be described in three dimensions: emotional exhaustion, the feeling of being exhausted due to the demands of studying; disbelief, understood as the development of a cynical and detached attitude towards studying and colleagues; professional ineffectiveness, characterized by the perception or interpretation of being incompetent as a student. Authors concluded that the lower the age of the subjects, the greater the emotional exhaustion and disbelief with cynicism, and the lower the feeling of professional efficacy,^{3,4} academic performance can be directly compromised by the symptoms of burnout. According to the author, as the symptoms of the syndrome progress, empathy and self-compassion are reduced, characteristics that are essential to the good performance of care professionals.

It is therefore necessary that medical schools, concerned with the comprehensive training of their students and aiming to guarantee the training of excellent professionals, seek to implement and guarantee

care and prevention actions for the syndrome throughout the undergraduate course. Studies have shown that early psychological interventions, from the beginning of the course, have reduced academic stress and are considered a positive factor in preventing students from becoming ill.^{5,6} The implementation of actions based on self-care, quality of life and the practice of sports and artistic activities in groups contribute to reducing stress and preventing burnout.⁷ With regard to artistic and sporting practices in groups, dance stands out, as it has been described since the dawn of humanity. Even before writing, records of dance can be found in cave drawings and figures on cave walls.⁸ According to Tonelli, dance is an instinctive manifestation of the human being, understood as the art of moving the body in a certain rhythm, in order to meet needs, demonstrate emotions, feelings and communicate. The practice of dance provides various benefits, helping to improve quality of life, contributing to self-esteem, socialization and integration of the individual. According to Laban, dance portrays the anxieties, ideas, needs and interests of human beings to move and extrapolate their essence. The therapeutic use of dance and movement is considered especially useful for people who have difficulties expressing their emotions.⁹

Also considered a powerful bodily activity, dance brings physical and mental benefits to its practitioners; it is, at the same time, sport, art and meditation. According to dancer and choreographer Maurice Brejárt, who prefaced the book “Dancing Life” by Roger Garaudy¹⁰ dance is “a means of knowledge, at once introspective and of the outside world”. It is also an invitation to experience the present moment, to connect with the here and now. So to speak, it is an exercise that requires an intentional focus of attention, allowing for the observation and interaction of feelings and bodily sensations. The body, movement and dance have been increasingly highlighted as therapeutic possibilities, both in physical and mental health. In different forms and approaches, it can be developed in the clinic by psychotherapists, thus constituting the field of Dance Movement Therapy, or outside the psychotherapeutic setting, practiced with a focus on well-being, thus forming therapeutic dances, which include, for example, biodance and works that combine principles of modern/contemporary dance and somatic education.¹¹

When dance is used for therapeutic purposes, during the practice, participants are physically and emotionally present, and it is possible to establish communication through sensory motor and non-verbal expression, communicating thoughts, feelings, emotions and experiences.¹² Dance therapy proposes shifting attention from the word to the body, with movement techniques that encourage a body that is aware of its limits, relating important brain areas for controlling emotions. In this way, dance brings elements that are considered therapeutic and can be used as self-care tools, analogous to the practice of mindfulness, and thus provide empowering experiences, used as adaptive strategies for emotional regulation.

Emotional regulation

Emotions are present in the life of every human being and are seen as adaptive mechanisms that allow the individual to assess risks, as well as giving life, richness and texture to connections with others. Emotions play a fundamental role in adaptation in various contexts of daily life and directly interfere in interpersonal relationships, be they family, social, work or school. Thus, in order to maintain good relationships, as well as promote and maintain well-being in different life situations, individuals need to learn to regulate their emotional responses. According to Leahy et al., all people experience emotions of various kinds and can deal with them in both effective and ineffective ways. The ability to deal with experiences, experience emotions and influence their manifestation, in terms of intensity, duration and expression, is known as emotional regulation. Linehan, cited by Leahy, Tirsch and Napolitano, proposes the concept of emotional regulation as a set of adaptive skills, in which the individual is able to identify and understand their emotions, controlling impulsive behaviors, using adaptive strategies and adjusting their emotions to each situation experienced. Faced with stressful situations, individuals experience emotions of increasing intensity, which can be interpreted as a threat to their effective behavior, thus seeking forms of coping, which can be problematic or adaptive strategies, according to each person's Emotional Competence (EC). Emotional regulation is considered an adaptive coping strategy, capable of keeping emotions at manageable levels, promoting homeostasis and adequate functioning, according to the situation and context.

In contrast, emotional dysregulation can manifest itself in the form of excessive intensification of emotions or excessive deactivation. Excessive intensification can produce feelings of terror, panic and feelings of emotional exhaustion, while excessive deactivation is experienced in the form of derealization, depersonalization and emotional numbness. Traditionally, emotional regulation was a field of study in developmental psychology, but this topic has become the focus of investigation in psychopathology and psychotherapy, since a deficit in the ability to regulate emotions is related to the development of various psychological disorders, including Burnout Syndrome. Burnout is linked to a breakdown in adaptation, accompanied by chronic malfunction (Pinto, 2008), and is a maladaptive way of coping with stress in the academic or work environment. The dimension of emotional exhaustion points to a dysfunctional strategy of excessive intensification, i.e. there is a potentiation of the negative emotions experienced, which the individual feels are problematic or oppressive, thus resulting in a feeling of panic or terror. The symptom of derealization, representing excessive deactivation, occurs as emotional numbness and distances the individual from the experience, preventing it from being processed. According to Leahy, these are examples of emotional dysregulation. With regard to self-efficacy, another dimension of Burnout Syndrome, studies show that it is an important personal resource for protection in the face of stress and

burnout situations, playing a fundamental role in interventions due to its modifiability. In this way, strategies aimed at developing adaptive ways of coping with academic or work-related stress, developing tools for emotional regulation, will be positive for the treatment and prevention of Burnout Syndrome. Developing actions that can help students learn strategies for coping with stress and emotional self-regulation are of the utmost importance for students' mental health during the course.

As far as coping strategies are concerned, they can be divided into those focused on the individual and those focused on the problem. In this paper, we prioritize individual-focused strategies for the prevention and treatment of Burnout Syndrome. As such, some authors point to the following as adaptive strategies for the individual: relaxation exercises, physical exercise, pleasurable activities linked to the humanities and meditation.^{13,14} For centuries, the fields of the sciences and the humanities have been placed at opposite poles, initially, either because of the separation between science and art, or because of the skepticism with which the view of medicine sees knowledge in the humanities, as being slippery, non-metric and essentially incompatible with an "evidence-based" approach. The positive relationship between medicine and the humanities, however, has been demonstrated through a multi-institutional study, the results of which revealed that experiences linked to the humanities become elements of improved academic performance and are in fact associated with increased empathy, tolerance, avoidance of burnout, self-efficacy and spatial skills. Various techniques can be included as part of a humanities programme for students, used for mindfulness training and developed in body activities that promote sensory connection, body and mind, such as yoga and dance. For the philosopher Roger Garaudy,¹⁰ in "Dancing life": Art is the shortest way between two men, because it doesn't involve the abstract, impersonal measurement of concepts and words." In saying this, the author describes dance as a way of connecting body and mind, at the same time art and knowledge, a way of living.

As part of this master's work, a survey was carried out at three medical schools in the southwest region of Bahia. In a sample of 176 students, a prevalence of 64% of young people in need of psychological and/or psychiatric assistance after entering university was detected, a rate considered to be much higher than the normal population. Of the participating students, 10.8% were affected by Burnout Syndrome. Around 17% of students have high scores in emotional exhaustion and/or cynicism, and 48.29% have low scores in professional efficacy, with a high risk of developing the syndrome. In view of the concern about the data presented, it is necessary to call on managers and teachers to get to know the "Move - Medburnout" project. Therefore, the general objective is to create and implement an emotional regulation program for medical students, using dance as a therapeutic resource, with a focus on preventing and coping with Burnout Syndrome. The specific objectives are as follows: a) To contribute to reducing the lack of spaces for care and exchange for students on medical courses; b) To provide a space for students to be welcomed, giving priority to bodily sensations, to the detriment of cognitive processes that are already so exhausted by academic demands; c) To listen to and welcome emotional demands, providing, through bodily techniques, an outlet for emotions that are contained or limited in verbal language; d) Helping students learn to connect with their bodies, experiencing the here and now in order to regulate negative emotions caused by academic stress; e) Enabling group sharing experiences, moments of lightness and relaxation that help reduce and control everyday stress.¹⁵⁻²¹

Method and procedures

The “Move - Medburnout” program was offered in group format, with meetings permeated by music, dance and creative body movements. This format was favored because the studies analyzed point to the effectiveness of group practices and involvement in the arts and humanities in preventing Burnout Syndrome among students. The programme was carried out in a dance school in the south-west region of Bahia, in a comfortable and appropriate place for dance practice, airy and spacious, offering space for the participants to move freely and safely. The doctor-dancer, author of this work, has more than 30 years’ experience in dance, with qualifications in classical ballet and contemporary dance, conducting the work based on contemporary dance techniques and somatic education. It was offered for a period of eight weeks, during the intervention process in this

research, in weekly meetings, with a total of eight meetings lasting approximately 90 minutes, between April and June 2023. According to the students’ evaluation, the period was considered short, and all of them said they wanted to continue the activities in the second half of the year. Each meeting was designed to offer a space for exchange, care and processing of emotions, in an experience of the here and now. Similar to *mindfulness*, the structure was designed to emphasize connection with the body and attention to the present moment. Four stages were considered: 1) Verbal welcome - emotion *check-in*; 2) Body warm-up - me and my body (*body scanner*); 3) Body dynamics (dance and creative movements); 4) *Coulddown*, relaxation and emotion *checkout*. Thus, themes (based on the dimensions of burnout) and objectives were established for each meeting, as illustrated below (Table 1).

Table 1 Meeting schedule

Meeting	Theme	Objectives	Methodology	Materials and music
1	Formation of the group	Welcome, recognition and formation of the working group.	<ol style="list-style-type: none"> 1. Welcome -Emotions check – 15’ 2. Warm-up – 15’ 3. Body dynamics 40’ 4. Relaxation/ finalization-20’ 	Appropriate room for practice, sound system Specific playlist: "A paz"(Gilberto Gil), "AmareloAzul e branco" (Anavitória), "Um Abraço" (Badi Assad,Rafael Cortez, Fabio Lima), "Aquele Abraço"(Gilberto Gil).
2	Exhaustion: life needs breaks	Work on exhaustion and offering a moment of relaxation and pause	<ol style="list-style-type: none"> 1. Welcome - Emotions check – 15’ 2. Warm-up – 15’ 3. Body dynamics 40’ 4. Relaxation/ finalization-20’ 	Appropriate room for practice, sound system Specific playlist: Brazilian Popular Songs (MPB),
3	Emotional detachment vs. empathy and self-compassion	Emotions through body actions and interaction between the participants, with a view to sensations for self-care and caring for others	<ol style="list-style-type: none"> 1. Welcome -Emotions check – 15’ 2. Warm-up – 15’ 3. Body dynamics 40’ 4. Relaxation/ finalization-20’ 	Appropriate room for practice, sound system Brazilian Popular Songs (MPB)
4	Confidence and Self-Efficacy	Experimenting with body movements that would awaken self-confidence and trust in others, using techniques in which the gaze was the driver (The gaze guides me, connects me to the world), followed by work in pairs, trios and groups, using blindfolds.	<ol style="list-style-type: none"> 1. Welcome -Emotions check – 15’ 2. Warm-up – 15’ 3. Body dynamics 40’ 4. Relaxation/ finalization-20’ 	Appropriate room for practice, sound system Specific playlist: Brazilian Popular Songs (MPB), Appropriate room for practice, sound system Brazilian Popular Songs (MPB)
5	Sadness	Recognizing sadness as an important feeling to be embraced detecting body postures representing sadness and developing attitudes to regulate this emotion.	<ol style="list-style-type: none"> 1. Welcome -Emotions check – 15’ 2. Warm-up – 15’ 3. Body dynamics 40’ 4. Relaxation/ finalization-20’ 	Appropriate room for practice, sound system Specific playlist: Brazilian Popular Songs (MPB), Appropriate room for practice, sound system Brazilian Popular Songs (MPB)
6	Resilience	Experimenting with exercises in falling and recovering, making an analogy with the ups and downs of everyday life.	<ol style="list-style-type: none"> 1. Welcome -Emotions check – 15’ 2. Warm-up – 15’ 3. Body dynamics 40’ 4. Relaxation/ finalization-20’ 	Appropriate room for practice, sound system Specific playlist: Brazilian Popular Songs (MPB), Appropriate room for practice, sound system Brazilian Popular Songs (MPB)
7	Lightness	Provide participants with a moment of relaxation, encouraging them to look for other perspectives to face their challenges. Activities were therefore developed using fun music and dynamic rhythms, proposing movements that would bring out the inner child	<ol style="list-style-type: none"> 1. Welcome -Emotions check – 15’ 2. Warm-up – 15’ 3. Body dynamics 40’ 4. Relaxation/ finalization-20’ 	Appropriate room for practice, sound system Specific playlist: Brazilian Popular Songs (MPB), Appropriate room for practice, sound system Brazilian Popular Songs (MPB)

Table I Continued...

Metting	Theme	Objectives	Methodology	Materials and music
8	Closing	The aim was to offer participants the chance to build up pleasant bodily sensations and memories of the work they had experienced throughout the process.	<ol style="list-style-type: none"> Welcome -Emotions check – 15' Warm-up – 15' Body dynamics 40' Relaxation / finalization-20' 	Appropriate room for Specific playlist: Brazilian Popular Songs (MPB), Appropriate room for practice, sound system Brazilian Popular Songs (MPB)

Meeting 1 - forming a group

With the theme “Forming a group”, the first meeting took place with the aim of presenting the proposal and forming a bond and recognition of the working group, in the first welcome stage. The format and objectives of the action were briefly explained, a leaflet with a *check-in of emotions* (Figure 1) was handed out and each participant was asked to mark the figure that most represented their state at that moment. After this, the introductory chat began, in which each participant was invited to introduce themselves by answering the question “Who am I?”. Participation in all stages of verbal expression was optional. This first moment lasted 10-15 minutes.



Figure 1 How do you feel now?.

In stage 2 of the warm-up, “Me, my body and the here and now”, we started the activity by walking around the room to soft music. The participants were encouraged through the *body scanner* technique to pay attention to their own bodies: breathing, perception of the feet, how they step on the floor, which part receives the most pressure and weight in contact with the floor, exploring the possible movements with the feet (outer edge, inner edge, etc.), legs, hips, abdomen, shoulders and arms, neck and head.

In stage 3 of the body dynamic, “Me and the space, me and the other and the formation of us”, while still walking freely around the room, following the beat of the music, the instructor verbally encouraged them to focus on three different things: 1) Individually feeling the space they were in, what the floor was like, the lighting, the noises; 2) Still centered on themselves, walking at different levels (high, medium and low), in different directions (facing forward, backwards and sideways), with varying speeds and intentions (shyly, with an open chest, owning myself and without fear); 3) Next, me and the other, an invitation to look and connect with colleagues, the imaginary hug - a movement that simulates a hug (with my dream, my desire, a dreamed warmth). Then, moving on to real hugging, with the closest colleague, with another and, finally, collective hugging. Finally, with step 4, we begin the *checkout* of emotions, slowing down to return home (Figure 2). Brazilian Popular Songs (MPB) were used in this meeting, chosen for the theme of their lyrics and the rhythm of their melodies, including: “A paz” (Gilberto Gil), “Amarelo Azul e branco” (Anavitória), “Um Abraço” (Badi Assad, Rafael Cortez, Fabio Lima), “Aquele Abraço” (Gilberto Gil).



Figure 2 How are you after the practice?.

Meeting 2 - Exhaustion: life needs breaks

Meeting 2 took place on the theme of “Exhaustion: life needs breaks”. With the aim of working on exhaustion and offering a moment of relaxation and pause, we tried to create pleasant feelings of rest and lightness. Soft, relaxing music was used. At stage 1, there was a verbal welcome, a *check-in of emotions*, with the question “How am I today, my body and my mind?”. The participants voluntarily spoke about how they felt that day. This meeting was extremely emotional, as a young person had died tragically at one of the participating universities. As a result, the researcher had to revise her initial schedule and allow more time for verbal contact. After that, the young people chose to follow the schedule.

In stage 2, the warm-up, we proceeded with a *body scanner while* lying down, isolated movements of each region of the body (*isolations*), observing and paying attention to breathing movements. This was followed by vibratory movements, also sequentially through parts of the body, with the aim of relaxing each region involved.

In the body dynamic, stage 3, everyone sat down to try out movements from the contemporary dance technique on the floor, *cloches* (pendulums) with legs, rolls, movements on the floor. A small choreographic cell was created using the movements studied. In the “How do I feel now?” *feedback*, stage 4, voluntary verbal expressions were proposed. The participants spoke words that reflected their feelings at the moment, such as: peace, lightness, refreshed, serene, calm, water, reconnection, relaxation, fullness.

Meeting 3 - Emotional detachment vs. empathy and self-compassion

In meeting 3, we chose the theme “Emotional detachment x empathy and self-compassion”, with the aim of working on emotions through body actions and interaction between the participants, with a view to sensations for self-care and caring for others. To this end, we sought to develop exercises in collaboration and interdependence.

During stage 1, Verbal welcome, emotion *check-in*, the students were asked to answer the questions: “How was your week? How am I in relation to myself and others? They spoke spontaneously and shared their perceptions of the week. Most of them complained of being very tired and listed difficulties in their relationships with colleagues and teachers. The instructor listened sympathetically, with small interventions during the process, and proposed the programmed body activity.

Stage 2 begins with a warm-up - me and my body. In this stage, the *roll down* and *roll up* technique was applied, which consists of the progressive rolling of the spine downwards and then backwards, followed by self-massage and contractions of the center of the body representing “my sad body”, alternating with extensions - “my happy body” - open, in progressive repetitions and with soft music and then with a more dynamic rhythm.

In stage 3, body dynamics, individual improvisations were proposed (using contractions and extensions), progressing to elaborations in

pairs, using the mirror technique. This was followed by improvisations that encouraged them to dance with the other colleague, looking out from near and far. In this technique, the challenge is to dance next to each other and then separate by walking around the room, without losing the focus of your gaze (I won't lose sight of you). We ended this stage with collaboration exercises (interdependence), using weights and counterweights.

At the end of the meeting, in stage 4, with *feedback*, the participants were encouraged, after a brief standing stretch, to answer the question: "How do I feel now, what do I take with me from today?"

Meeting 4 - Confidence and self-efficacy

The theme proposed for meeting 4 was "Confidence and Self-Efficacy". In this meeting, we sought to achieve the goal of experimenting with body movements that would awaken self-confidence and trust in others, using techniques in which the gaze was the driver (The gaze guides me, connects me to the world), followed by work in pairs, trios and groups, using blindfolds.

Stage 1, emotion *check-in*: "How confident am I in myself and others?", "What makes me confident and trusting". With these questions in the air, the day's bodywork was proposed.

Stage 2 continued with the warm-up: walking around the room, connecting breath, body and mind in the present moment, increasing movements of parts of the body were proposed. Then, warming up the hands, placing the hands over the eyes, noticing the sensations of the gaze before and after the movement. Encouraged to look around, widening our gaze, I seek to welcome and am welcomed, I see and am seen.

In stage 3, the body dynamics begin with dancing freely around the room, shouting your name, bringing out your personality, drawing your name with your body in the space. This activity works on creative power and self-confidence, stimulating in the body sense of potency and individual power.

This is followed by trust exercises in pairs, trios and groups, using blindfolds. At the end of this stage, we worked on collectivity: My movement reverberates and moves the other (sense of collectivity and trust in the other).

Closing the day's meeting, in stage 4, we began the *cold down* process, followed by *feedback* and a *checkout* of emotions: slowing down, sitting in a circle, expanding my gaze to those around me, "and now, then, how do I feel?" The participants who wished to do so spoke about the feelings they had experienced during the work. They mentioned the difficulties of trusting and being confident.

Meeting 5 - Sadness

The theme of meeting 5 was "Sadness", with the aim of recognizing sadness as an important feeling to be embraced, detecting body postures representing sadness and developing attitudes to regulate this emotion. The theme was developed from stage 1, in which the verbal acceptance and *check-in* of emotions takes place, being stimulated with the question: "What makes me sad, how do I deal with sadness?"

In Stage 2, the warm-up began with exercises involving progressive contractions and expansions of the body, trunk, limbs, shoulders, culminating in contractions and expansions of the whole body.

Stage 3, body dynamics, began with a choreographic sequence involving contractions and expansions (standing, sitting and lying down), evolving with rolls and movements that used contractions and expansions as a springboard. The participants accepted the proposals

well, getting involved in each stage in a willing and lively way. This stage ended on the floor with progressive relaxation of the body. In this meeting, voluntary verbal *feedback* was favored in step 4.

Meeting 6 - Resilience

"Resilience" was the theme chosen for meeting 6, with the aim of offering body experiences that denote the possibility of overcoming strenuous and difficult activities. To this end, the participants experimented with falling and recovering exercises, analogising them to the ups and downs of everyday life.

The day's activities began with stage 1, Welcoming, in which the students were encouraged by the initial question: "How do I react to life's challenges and stumbling blocks?"

In stage 2, starting with the warm-up, more dynamic exercises were carried out, with rhythmic music, walking at a faster pace, repeating movements, insisting on postures, aimed at each muscle chain, alternated by periods of rest and focus on breathing and recovery of the heartbeat.

In stage 3, the body dynamics chosen to start with were exercises involving alternating balance (half-point), a position of readiness for movement, swinging and recovery. Descent technique (sitting down with control) and standing up with agility. Falling and recovery sequences, alone and in pairs (contemporary dance techniques). At the end of this phase, we built a small choreographic cell with the movements we had studied.

In step 4, the body slowed down, focusing on breathing movements. This was followed by *feedback*: "How do I feel and what do I take with me?". It's worth noting that the questions didn't necessarily have to be answered verbally. They are thought-provoking questions. However, the space for verbal expression was guaranteed to those who wished to express themselves.

Meeting 7 - Lightness

With the theme "Lightness", the aim of this meeting was to provide participants with a moment of relaxation, encouraging them to look for other perspectives to face their challenges. Activities were therefore developed using fun music and dynamic rhythms, proposing movements that would bring out the inner child. The initial stage, in which the verbal welcome takes place, began with the provocative question: "How do I feel today? What memories do I have of my childhood?". Continuing with stage 2, the warm-up, participants were instructed to walk around the room to the rhythm of the music, progressing to small jumps (imitating skipping rope, hopscotch). The activity continued with movement in space, with free body movements starting from a part of the body chosen by the instructor (the arm, then the head, the hip and so on). Following on from stage 3, with body dynamics in exercises with a ball (bladder), the participants had to maintain body movements and free dance without letting the bladder touch the floor. Imagine a tennis ball being balanced on the body, traveling through the limbs, torso, head and neck. Initially, the exercise was done individually; then in pairs, and the movements should simulate the ball passing from one to the other; then in trios; and finally in groups. Guided relaxation on the floor concludes the meeting in stage 4, complemented by the *checkout* of emotions - "How do I feel after the practice?"

Meeting 8 - Closing

Meeting 8 was marked by the emotion of closure. The aim was to offer participants the chance to build up pleasant bodily sensations and memories of the work they had experienced throughout the process.

The meeting went through the usual stages, starting with a *check-in* of emotions, stimulated by the question “How do I feel today?”, followed by a warm-up, in which we used the well-known movement around the room with a focus on breathing, followed by a progressive body warm-up with circular movements, starting from the neck down to the feet.

The body dynamic that made up stage 3 was a choreographic cell, with excerpts from the body work carried out in the previous meetings. The instructor demonstrated the cell, made up of movements previously performed by the students, repeating some of them with a view to memorization. Afterwards, the participants were encouraged to reproduce the sequence blindfolded, under the watchful eye of the instructor-researcher (without judgment or criticism), each in their own time. At a third point, the blindfolds were removed and the choreographic cell was performed as a group. In this final stage, the cycle of activities ended with progressive body relaxation. Ending in a circle, with a group trust exercise and subsequent *checkout* - My feeling in one word/phrase: “How was your experience with your body?”. The floor was open to those who wished to express themselves. Group farewell.

Results

In response to one of the specific objectives set for this research, we created an emotional regulation programme for medical students, using dance as a therapeutic tool, thus seeking to contribute to the medical schools and participants in the study by proposing a light and fun tool that aims to offer these students a space for exchange, acceptance and expression of emotions in order to cope with academic demands. With *Movimente-se-Medburnout*, the students were able to experience very welcoming moments and mindfulness experiences, based on dance, considered to be an active meditation, improving the perception of bodily sensations and their translation into emotions, thus promoting neurobiological improvement and, therefore, better emotional regulation express their emotions in order to cope with academic demands. The aim is for this integrated body and mind movement programme to help medical students use the resources and sensations they experience during practice to cope with academic stress, equipping themselves with some adaptive strategies for emotional regulation, preventing Burnout Syndrome and contributing to professional training from a technical and emotional perspective. The technical-technological product presented in this article, at the initial stage, acts as a prototype and was offered as an intervention during the research process, entitled Burnout Syndrome in medical students: Dance as a possibility for emotional regulation. However, it should be noted that this product could be used by the participating universities as a basis and model for creating other programmes for the care and attention of students’ mental health, focusing on expressive art as a way of bringing medicine, art and humanity closer together and, therefore, developing more humane and comprehensive training.

Conclusion

It is understood that this is just an initial view of a study carried out with a small number of students, which in scientific understanding can be a limitation and a deficiency. We therefore look forward to new movements, new studies, which should be conducted to verify this and other emotional regulation tools that can contribute to integral human formation, helping students to overcome the challenges of graduation, preventing Burnout Syndrome and becoming empathetic and confident professionals in caring for themselves and others.

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Conflicts of interest

The authors declare that there is no conflict of interest.

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