INTRODUCTION
A period of great importance for the development of the human being is a child, both biological and psychosocial and cognitive factors which development does not depend only of biological maturation, but also the environmental conditions where they live. Depending on the stage of development the child is react in different ways to suit the environment in which an episode of illness or hospitalization may cause a delay or even an interruption of this process of growth and development. In this process, an important indicator is the quality of life, which combines subjective aspects and wellness goals, satisfaction and happiness, which includes the acquisition and development in different areas of the process (BORTOLETO; BRETAS, 2007; VIEIRA; LINHARES, 2011).

The definition of quality of life can be defined according to the World Health Organization (WHO) as "the individual's perception of his position in life in the context of culture and value systems in which they live and in relation to their goals, expectations, standards and concerns." Thus, the definition highlights a multidimensional, encompassing different aspects such as physical, functional and social and psychological well-being, recognizing something much broader than health should be assessed individually and based on individual expectations (SOUZA et al., 2013; MATHIAS et al., 2015).

Interest in evaluating the quality of life is growing every day, making it possible to use this as a significant measure in clinical and epidemiological studies. Such an assessment requires that health professionals do not analyze only issues related to the disease, making it through questionnaires can be generic focusing on several dimensions or specific, assessing issues relevant to a particular group of people or disease (LINS et al., 2014; SOUZA et al., 2013; TEIXEIRA et al., 2012).

In this sense, the importance of assessing the quality of life of children is fundamental, making an instrument with an important role to evaluate concepts ranging from factors with psychological and physical characteristics, requiring personal settings values, skills, satisfaction and well-being and its relation to their goals, expectations, standards and concerns, meaning as your desires and hopes and close to what is actually happening (ASSUMPÇÃO JR et al., 2000; GUEDES; GUEDES, 2011). Therefore, the purpose of this article is to know the production of scientific knowledge about quality of life in children.

METHOD
The method used was an integrative literature review. This type of review allows the integration of evidence of clinical practice, having a purpose to synthesize and gather search results on a particular issue, favoring the deepening of the research theme of knowledge (MENDES, SILVEIRA and GALVÃO, 2008).

To operationalize the integrative review, the following steps proposals were developed by the authors mentioned above: issue identification and selection of the hypothesis or research question; establishment of criteria for inclusion and exclusion, along with the literature search; definition of the information to be extracted from studies; assess this information; interpretation of results; present and disseminate the review.

In preparing the study topic, broke the following question: What has been published in national scientific journals on quality of life of children?

The search was conducted between August and October 2016, taking place in the following open access libraries: SciELO Scientific Electronic Library Online (SciELO), Latin American and Caribbean Health Sciences (LILACS) and International Literature on Health Sciences (MEDLINE).

The inclusion criteria for the selection of articles form: National journal articles in the period from 2006 to 2016 that addressed the theme quality of life of children, which are the Portuguese language, published as full texts available online and with free access. Exclusion criteria were the case reports, official document, book chapters, theses, dissertations, news, editorial, not scientific texts and journals that had the theme of quality of life in oral dysfunction.

From the inclusion and exclusion criteria, the reading of the articles in order to verify its adaptation to the subject originally chosen for the realization of the results was performed. After these articles were placed in a summary table containing the following data: article title, year of publication, thematic, database, journal it was published, keywords, region, institution, population and mode of research.

RESULTS
In the databases SciELO, LILACS and Medline, were found respectively 60, 301 and 172. After reading the title, abstract and full texts were excluded 17 articles of SciELO, 298 and 171 of LILACS Medline. This total of 475 articles excluded because it was not examined the question of the study, which were published outside the period defined by the researchers or did not contain all necessary information, making them untrustworthy for reliability. Thus, selected to form the final sample 47 articles.

The results of the search process carried out between August and October 2016 can be seen in Table 1.

Table 1 - Number of studies that account on the selected data bases.

<table>
<thead>
<tr>
<th>Data Bases</th>
<th>Localicated</th>
<th>Deleted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>SciELO</td>
<td>60</td>
<td>17</td>
<td>43</td>
</tr>
<tr>
<td>LILACS</td>
<td>301</td>
<td>298</td>
<td>3</td>
</tr>
<tr>
<td>Medline</td>
<td>172</td>
<td>171</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>533</td>
<td>486</td>
<td>47</td>
</tr>
</tbody>
</table>

DISCUSSION
In the review, the issues identified as relevant to the review process was the year of publication, the area of concentration in health and thematic addressed.

The first perspective is the relationship between year of publication and the number of published articles. 2 articles were found in 2006; 1 in 2007; 2 in 2008; 5 in 2009; 5 in 2010; 6 in 2011; 7 in 2012; 7 in 2013; 6 in 2014; 5 in 2015 and 2016 with yet one in health and thematic addressed.

The first perspective is the relationship between year of publication and the number of published articles. 2 articles were found in 2006; 1 in 2007; 2 in 2008; 5 in 2009; 5 in 2010; 6 in 2011; 7 in 2012; 7 in 2013; 6 in 2014; 5 in 2015 and 2016 with yet one in health and thematic addressed.
The second perspective is the location of the work concentration area by area. In nursing, they found 5 articles, 2 in physical therapy; 1 in speech therapy; 6 in psychology; 16 in the medical field and 16 in the interdisciplinary area as shown in Figure 2.

The third perspective is how the mode of research. 18 quantitative items were found; 6 qualitative; 13 mixed and 9 bibliographical, as Figure 3.

The fourth perspective is as the subject of research. The themes were: 1 metabolic dysfunction, 2 digestive system, 2 excretory system, 9 cardiorespiratory system, 8 nervous system, 5 sensory system, 4 muscular system, 4 immune system, 2 Dermatological system 2 related psychosocial relations and 8 literature review.

Studies show that there is a predominance of articles published in 2012 and 2013, with a predominance in medicine (34%), followed by a predominance of the sport of mixed research (44%) and 37 (78%) related to disease of children.

These data reveal a gap with respect to instruments which make it possible to exploit the quality of life of children broadly and not only those in the disease process. It is known that the quality of life is an important construct and used in medicine to public health, sociology, economics and political psychology. And the quality of life related to the health of children and adolescents should be considered from an ecological perspective that focuses on multiple levels of analysis, the child, the parents and the family, peers, community and society (GASPAR, 2006).

Perceptions of children and adolescents are influenced by several factors, such as the child's own characteristics and family socio-economic status, parenting style, parental stress and life events. socio-economic disadvantage, social isolation, poor living conditions, lone parents, violence and interpersonal conflicts between family members, parental psychopathology, high levels of stress and lack of social support are usually associated with the child behavior problems (BRONFENBRENNER, 1986).

This predominance of published articles on quality of life that reinforces the disease may be associated with health biomedical model. The health that most dedicated social issues of the subject is psychology, and identify the area of psychology published only six items, that is 12.7%. The other 41 articles that are related to disease are the most diverse areas, such as medicine, physical therapy, speech therapy, nursing and interdisciplinary. These health areas were built by the biomedical model. This model sees man as a machine, and the concept of health that is the absence of disease and tending to specialization and fragmentation, lose the holistic view of man, in their psychological and social dimensions, it is the disease and your healing, the individual diagnosis and treatment, the pathophysiological process to gain space. The biomedical is characterized by unicausalidade, biologicism, recovery, rehabilitation and specialization. On the other hand the integral conception of health the process articulates different dimensions: biological, psychological, economic, social, cultural, individual, collective, etc. (CUTOLO, 2006).

At the United Nations convention on the rights of children was recognized their right to the highest attainable standard of health, leisure and education, and also the right to a standard of living adequate for their physical, mental, spiritual, moral and social. These are all aspects of quality of life. Thus the quality of life involve more than a single view and exclusively for children with diseases, it also implies, in strength and positive qualities in the social context in which the child lives.

CONCLUSION
Aspects and dimensions analyzed allow allowed to argue that the scientific knowledge production about the quality of life of children are directed to a biomedical health conception.

The analyzed issues and coalesce a set of research that prioritize epistemological aspects that are called empiricists; which indicates the neutrality of the subject, object and knowledge and research are investigated unlinked form of broader social dynamics. Articles that strongly consider the historical and social factor are few. The old research questions must give way to new questions, more human and social and less experimental.

Keywords: Quality of life. Child. Health.
El objetivo de este estudio fue conocer la producción de conocimiento científico sobre calidad de vida en niños. El método utilizado fue la revisión integradora. Las bases de datos consultadas fueron SciELO, LILACS y MEDLINE. En total se encontraron 47 artículos publicados de 2006 a 2016. Los resultados mostraron que los años mayor problema fue el 2012 y 2013 con 7 artículos publicados cada año, el área de enfoque con el mayor número de artículos publicados fue la medicina con 16 artículos y que el sujeto notó un predominio en las cuestiones relativas a la calidad de vida de las enfermedades de los niños (78%) de los artículos publicados y sólo el 4.7% relacionados con los temas más sociales. La literatura científica sobre la calidad de vida de los niños está centrada en el modelo biomédico de la salud y hay pocas producciones científicas dirigidas al modelo completo en materia de salud. Por lo tanto, es necesario reforzar la producción de conocimientos científicos en la calidad de vida de los niños en el contexto de la vida en el hogar en el que vive y no sólo la enfermedad, en el que las preguntas de investigación viejas están dando paso a nuevas preguntas y nuevos paradigmas de salud.


A QUALIDADE DE VIDA DE CRIANÇAS: UMA REVISÃO INTEGRADORA

RESUMO: O presente artigo teve o objetivo de conhecer a produção de conhecimento científico sobre qualidade de vida em crianças. O método utilizado foi o de revisão integrativa. As bases de dados consultadas foram SciELO, LILACS e MEDLINE. Ao total foram encontrados 47 artigos publicados no período de 2006 a 2016. Os resultados apontaram que os anos de maior publicação foi o de 2012 e 2013 com 7 artigos publicados em cada ano, a área de concentração com maior número de artigos publicados foi a medicina com 16 artigos e a quanto a temática percebeu-se um predominio nas temáticas relacionando a qualidade de vida das crianças as doenças (78%) dos artigos publicados e somente 4.7% relacionados com questões mais sociais. A produção científica sobre a qualidade de vida das crianças ainda é voltada ao modelo biomédico em saúde e existem poucas produções científicas direcionadas para o modelo integral em saúde. Portanto, faz-se necessário a disseminação da produção do conhecimento científico na área da qualidade de vida da criança no contexto em que ela vive e não só o da doença, em que velhas questões de pesquisa cedem lugar a novos questionamentos e aos novos paradigmas de saúde.