CONCEPT OF USERS ABOUT THERAPEUTIC ACTIVITIES CARRIED OUT IN A CAPS AD III

CONCEPÇÃO DOS USUÁRIOS SOBRE AS ATIVIDADES TERAPÊUTICAS DESENVOLVIDAS EM UM CAPS AD III

DISEÑO DE LOS USUARIOS ACERCA DE LAS ACTIVIDADES TERAPÉUTICAS DESARROLLADAS EN UN CAPS AD III

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ABSTRACT

Objective: understanding the importance of therapeutic activities in the treatment of users of a Psychosocial Care Center Alcohol and other Drugs (CAPSad). Method: a qualitative study of a phenomenological approach, with the use of Alfred Schutz Philosophical Theoretical Framework in the phenomenological analysis of the data with 15 users in treatment in the service. The research project was approved by the Research Ethics Committee, CAAE 22845713.0.0000.5344. Results: in the study emerged an analysis category << Therapeutic activities developed in the CAPS >>. It can identify the development of diverse therapeutic resources in CAPS, such as the realization of groups and workshops, which have been providing the users the development of autonomy, self-knowledge and as facilitators in the treatment of chemical dependency. Conclusion: the CAPS is becoming an important part of the service users daily, through the conduction of therapeutic activities, to establish ties and as a facilitator for social inclusion.

Descriptors: Nursing; Mental Health; Psychoactive Substance User.

RESUMO

Objetivo: compreender a importância das atividades terapêuticas no tratamento de usuários de um Centro de Atenção Psicossocial Alcool e outras Drogas (CAPSad). Método: estudo de caráter qualitativo e abordagem fenomenológica, com o uso do Referencial teórico filosófico de Alfred Schutz na análise fenomenológica dos dados com 15 usuários em tratamento no serviço. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa, CAAE 22845713.0.0000.5344. Resultados: no estudo emergiu uma categoria de análise << Atividades terapêuticas desenvolvidas no CAPS >>. Pode-se identificar o desenvolvimento de diversos recursos terapêuticos no CAPS, como a realização de grupos e oficinas, os quais vêm propiciando nos usuários o desenvolvimento da autonomia, autoconhecimento e como facilitadores no tratamento da dependência química. Conclusão: o CAPS vem se tornando parte importante no cotidiano dos usuários do serviço, por meio da realização de atividades terapêuticas, do estabelecimento de vínculos e como um facilitador para a inclusão social.

Descritores: Enfermagem; Saúde Mental; Usuário de Substâncias Psicoativas.

RESUMEN

Objetivo: comprender la importancia de las actividades terapéuticas en el tratamiento de los usuarios de un Centro de Atención Psicosocial Alcohol y Otras Drogas (CAPSad). Método: un estudio cualitativo y enfoque fenomenológico, con el uso del Marco Teórico Filosófico de Alfred Schutz en el análisis fenomenológico de los datos con 15 usuarios en tratamiento en el servicio. El proyecto de investigación fue aprobado por el Comité de Ética en la Investigación, CAAE 22845713.0.0000.5344. Resultados: en el estudio surgió una categoría de análisis << Actividades terapéuticas desarrolladas en los CAPS >>. Se puede identificar el desarrollo de diversos recursos terapéuticos en el CAPS, como la realización de grupos y talleres, que han estado proporcionando a los usuarios el desarrollo de la autonomía, autoconocimiento y como facilitadores en el tratamiento de la dependencia química. Conclusión: el CAPS se está convirtiendo en una parte importante de los usuarios de los servicios al día, a través de la realización de actividades terapéuticas, para establecer lazos y como facilitador para la inclusión social.

Descritores: Enfermería; Salud Mental; Los Usuarios de Sustancias Psicoactivas.

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INTRODUCTION

The creation and implementation of Psychosocial Care Centers (CAPS) has been strengthened after the changes in mental health care proposed by the Psychiatric Reform Movement. The Mental Health Reform policy, instituted after that, signals the CAPS as strategic devices of Mental Health Care, as well as highlighting primary care as a privileged place for this building and reformulation of new paradigm for the shares to individuals with mental disorders.¹

The CAPS alcohol and drugs (CAPSad) is a unit of care and support for mental health, multidisciplinary team of physician, nurse, psychologist, occupational therapist social worker, nursing technicians, among other professionals who perform individual assistances, assistances in groups and home visits.²

CAPSad stands out for specialized care to people who do use, abuse and dependency of harmful substances, conducting clinical assistance, to provide support to the user's readmission into society and encouraging the reconstruction of his autonomy, in addition to its care strategy for reduction of harms, minimizing individual and social damages caused by the use of psychoactive substances (SPA). In this type of service, it is considered the user and the family as protagonists of his treatment.³

The involvement of users is crucial for the treatment. In this sense, it becomes essential that they feel part of this process and welcomed by the staff of the health service. Understanding the expectations of individuals regarding the treatment offered by CAPSad team enables a greater understanding of their perceptions and analyzes critically the care provided from the needs expressed by users. It is of paramount importance to develop actions from the perspective of users, because, in this way, professionals can develop collection methods and user approach with the reality of his treatment and diagnosis.

In order to providing better assistance to the user, it is essential allowing them to express themselves on the attention paid and the way they see this attention, thereby contributing to the quality of care in the CAPS.

This study is justified by the need to understand the experiences and expectations of the users of a CAPSad through the activities developed in the service in order to give voice to the needs of users inserted in this context; it also enables expanding approaches of care to users, strengthening behaviors, experiences and practices of nursing professionals.

OBJECTIVE

- Understanding the importance of therapeutic activity in the treatment of users of a Psychosocial Care Center Alcohol and Other Drugs (CAPSad).

METHODOLOGY

It is a qualitative study of a phenomenological approach, using the Philosophical Theoretical Framework of Alfred Schutz, held in CAPSad III, connected to the Group Conception Hospital in the city of Porto Alegre, State of Rio Grande do Sul, with the participation of 15 users in treatment in CAPSad, which were chosen for convenience. Convenience sample involves the use of those most conveniently available as participants.⁴

The interviews were scheduled according to the user's availability, these being held in the own CAPS. Inclusion criteria used for data collection were: users in treatment in CAPS over the age of 18, who are in treatment for at least three months. Exclusion criteria used were: users with worsening of symptoms that hindered verbal communication during the interview.

Data collection began through a brief characterization of users and through a phenomenological interview where the guiding questions were: 1) Tell me how your attendance here is at the CAPS? 2) Tell me what do you expect from the nurse practitioners during your treatment? The interviews were recorded with the use of a digital voice recorder and later transcribed in full with minimum interference of the interviewer.

The data were submitted to phenomenological analysis. To unveil the experiences expressed in the speeches of members of the meaning of mental health care, the lines were analyzed as indicated by researchers of social phenomenology, through the following steps⁵: 1) performing the reading and rereading of the speeches of contents in order to get the essence of the meaning of users' interpretations of their treatment; 2) identify stretches of lines that represent the meaning of the treatment provided to users in CAPSad; 3) group the common features of the units of meaning, the convergences that allow the emergence of concrete categories about users' expectations about their treatment.

The research project was approved by the Research Ethics Committee of the Hospital...
RESULTS

Therapeutic activities developed in CAPS

Contact with patients using mental health services gives us a realistic view of the activities provided by the department concerned in this study: the CAPS. During the course of the interviews we observed, among other things, the manner in users see the occupational activities that permeate their therapeutic process, and how these influence so positive this process.

Each CAPS can create its groups and workshops according to the demand of the region where it is deployed, can provide users with greater effectiveness in the therapeutic processes and also being able to use the human resources available in the service.

The inclusion of users in groups and workshops CAPSad III GHC occurs spontaneously by the user, or by therapeutic indication, by the multidisciplinary team. By allowing the user to choose the type of activity he wants to perform within the service and within his capabilities, professionals are allowing this user feel at ease with the treatment, thus generating a higher level of satisfaction and effectiveness in the treatment, as shown in the following lines:

I, I’m with singing, which is Wednesday, Tuesday’s newsletter we did in the group and each month we talk about something, you know, about AIDS, about always have a different matter, about our mother, about family, about drugs, all these businesses. Now this month we made prevention pro holiday weekend [...] (E01)

Oh I do here, I do the group have to do, I do, I belong to them, everything right. What asked me to do. Manual, painting, I have done a lot of the handicraft. They care about us, then treatment is good. (E02)

On Mondays with the X and the other, it is the handicraft there. I’m doing a blanket, I’m doing the blanket since last year, is not that even grandma knitting so, you know, with the needles, is with some nails so on weaving back and forth, okay out the blanket. (E04)

So I come, I participate in groups, I sometimes participate in activities that please me, you know you have ones that do not match my holy with certain activities. The Recriarte kind, I do not like to work with crafts, with, you know, with little thing like that. The motion group is very cool, I watch, sometimes I do not dance because my disability does not allow, but I go, watch, think cool the banter with the Y technique and the other groups we participate in, virtually all of them. (E05)

It is observed that from the activities carried out in CAPS, users are able to develop autonomy, free feel and reflect on their lives and actions. They enable users to work self-knowledge and thus develop new ways to deal with their anxieties and frustrations.

Some users have complained that it is a great period of idle day; however, that there is a better use of this time, it could be created more workshops and groups. However, there is limited physical space and professionals to meet the entire demand of the service.

All activities carried out in CAPS have therapeutic purposes, which are worked with users during the development of groups and workshops. These therapeutic purposes vary according to each user, ranging from socialization and distraction activities to the production of self-criticism and improved self-esteem:

Monday is the group we talk about the weekend. Tuesday is the group of women and the fourth is touching music and Thursday because it has not meeting them. And on Friday has gymnastics, we go to the square, take a walk. It is very good service here. I like more singing, we sing, we play, we laugh. And that I like more. (E06)

I like the groups because then us this along with other people who have the problems of people there it’s easy to talk right, handicrafts are also cool. (E07)

I participate in groups. Reunion, weaving nets, Recriarte, movement, weekend preparation and also has, how welfare is. I like the preparation of the weekend, I like weaving net, Recriarte also. (E08)

Look I have physical activity, I love playing football, I fear now standing a little over, it is so very far. Now we go out, we go to court, do activity, has the welfare, well-being that is with Y nurse, loved nurse too, just kind relaxation right, so thoughts, she sometimes brings a thought for us, and she reads us listening, that there is very good too. The group of men who ended now, the respect that is tomorrow, I get the respect and then we have the, ah on paper, we made a little paper there, weaving net, it is about the newspaper and it is more ouch. (E09)

The true potential of the group is to promote dialogue in the construction of a new self, identity, social interactions and the reality experienced by users and others involved in the groups. In CAPS, this potential should be placed at the service of the
of treatment, significantly increasing treatment compliance and user satisfaction.

According to Ordinance nº 336 from 19th February, 2002, establishing the operation of CAPS, the assistance provided to users of CAPS includes the following activities: individual care (medication, psychotherapy, guidance, etc.); service groups (psychotherapy, operative group, social support activities, among others); care in therapeutic workshops run by top-level professional or middle level; home visits; family care; community activities focusing on the integration of the patient in the community and his family and social inclusion.²

The proposal of the CAPS under the cited ordinance involves throughout the treatment of family members, the community, the user and the CAPS, but this service faces several structural and development problems. CAPS have a higher demand that the service's ability to function infrastructure, lack of qualified professionals and lack of funding for the development of the proposed activities. It is apparent that there is an involvement of professionals in the treatment of users, but is also visible frustration over lack of financial and human resources for the proper development of the premises of CAPS.

The use of the plastic arts and the different forms of expression, by developing some kind of art form of therapeutic workshops, inserted in the treatment of CAPS have produced changes and improvements in the therapeutic process. Art is able to generate subjectivities, catalyze affections, and discover unexplored territories. It is noteworthy that the value of art in rehabilitation is at the user's ability to work and find new ways to develop potential and thus gain new social spaces that are able to reinsert it in society.³

By the development of handicrafts, art and cultures of users skills we can play them on feelings that often lie dormant or are found confusing. It is possible that, through the development of workshops be working on emotions, self-esteem, difficulties, trauma and increase the users look for a new life. It is a teaching and learning which daily involved two major potential are: the users and the CAPS professionals.

Through the development of workshops and therapeutic groups in CAPS is made possible users the prospect of internal-external conflicts through plastic and artistic activities, valued creative potential, imagination and the user's face. Therapeutic workshops have great impact on strengthening self-esteem and self-confidence of users, through miscegenation of
shared knowledge among users and expression of subjectivity of each one. Users of CAPS, through the production of existential territories, generate the possibility of renewal of life and experiences in their most everyday aspects, then, is the everyday that these individuals are incarcerated and their common desire private. The activities of therapeutic workshops act as catalysts for existential territories where users generate the possibility to win back or win their daily lives, their experiences. Therapeutic activities should allow spaces where there is dialogue, interaction, reciprocity and construction of professional bonds. The multidisciplinary team act as facilitators of this therapeutic process endowed with so many complexities. Thus it creates the need for improvement, job training, therapeutic workshops require knowledge and preparation so they can achieve the objectives proposed for them.

The inclusion of the CAPS professionals, family members and users, both in groups and in workshops, enhances respect for differences, recognition of life expertise, not only of academia or services management. Thus, from the therapeutic point of view, group people can recognize roles and identities, being able to rebuild them when they are restrictive to the development of their citizenship. In this sense, the groups are an attention device and promotion of citizenship within the CAPS. Groups should not be used in a minimalist way as to address the demand and supply of services in order to meet more people.

The CAPS as a mental health service is responsible for being the users of the gateway in psychological distress, has several commitments. One is through therapeutic activities to perform hard work of monitoring, care and social reintegration of these users. Like any health service, CAPS has its limitations due to the great demand, but it is still possible to observe the dedication of professionals to conduct a comprehensive care and different for each user in order to introduce it as an actor of his therapeutic processes.

The user must be active during his therapeutic process, must build and improve his conceptions of life and renew his family and social ties. Thus involving the family and society during this process is a key part of building this treatment. The family and the community in which he lives are key element for success and maintenance of the effectiveness of the treatment provided at CAPS.

The CAPS comes in The Psychiatric Reform history as a substitutive service in a larger perspective and humanized of mental health care. Currently, CAPS has become an integral part of the important and fundamental of service users daily, establishing and linking bonds, building expectations, developing a new conception of life for users providing social inclusion thereof. By observing assistance provided to users of CAPS, it identifies that this occurs so that users can stay in their homes, maintaining and strengthening family and social ties without the need for complete isolation of a conventional psychiatric hospitalization; CAPS enables the expansion of the user look about himself, about the treatment to which he belongs and is a fundamental part of the therapeutic plan.

Because it is a service of odd features, the CAPS favor the creation of links and direct contact with the therapeutic team, they are psychologists, social worker, psychiatrist, and nursing staff and over a range of professionals involved in this process. Nursing, in the case of a profession where one of its main features is the direct contact with users at CAPS, would be no different. Nurses at CAPS are a fundamental part of the organizational process and the therapeutic plan of users.


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