THERAPEUTIC WORKSHOPS ABOUT MENTAL HEALTH AS A TOOL FOR PSYCHOSOCIAL REHABILITATION: PERCEPTION OF FAMILY MEMBERS

ABSTRACT

Objective: to analyze the applicability of the therapeutic workshops as a tool for social inclusion of people with mental disorder. Method: this is a descriptive study of a qualitative approach, which was attended by 10 relatives of drug users. The research was developed at the Center for Psychosocial Care-CAPS, through a structured interview guide. The data were transcribed and analyzed qualitatively. Results: it was possible to evaluate the perception of family members about the importance of treatment within the CAPS, as well as scoring these workshops as essential activities for the rehabilitation, restoration and redemption of citizenship of individuals with mental disorder in society. Conclusion: the perception developed by family members is that the therapeutic workshops represent important tools for (re) socialization and psychosocial rehabilitation, admitting the importance of interaction in an effective manner across the health team allied to their cooperation into the treatment.

RESUMO

Objetivo: analisar a aplicabilidade das oficinas terapêuticas como instrumento de inserção social da pessoa com transtorno mental. Método: estudo descritivo, com abordagem qualitativa, no qual participaram 10 familiares de usuários de drogas. A pesquisa foi desenvolvida no Centro de Atendimento Psicossocial-CAPS, por meio de um roteiro de entrevista semiestruturado. Os dados foram transcritos e analisados qualitativamente. Resultados: foi possível avaliar a percepção dos familiares a cerca da importância do tratamento dentro do CAPS, bem como pontuando estas oficinas como atividades primordiais para a reinsertão, reabilitação e resgate da cidadania deste indivíduo portador de transtorno psíquico na sociedade. Conclusão: a percepção elaborada pelos familiares é de que as oficinas terapêuticas representam instrumentos importantes de (re) socialização e reabilitação psicossocial, admitindo a importância da interação de forma efetiva de toda equipe de saúde aliada à cooperação destes no tratamento.

Descritores: Psicoterapia; Reabilitação; Saúde Mental.
INTRODUCTION

From the movement of the Brazilian Psychiatric Reform that the network of mental health care introduced new types of services in order to gradually replace the traditional psychiatry, providing a change of this model of care that gradually goes from an asylum logic and hospital-centric to the psychosocial aspects with the appreciation of the subject.\(^1\)

This transformation in mental health care requires the inclusion of other paradigms in the care of individuals under psychological distress, replacing the word “treat”, which leads to a diagnostic appointment by “caring”, a term that includes various dimensions to be overcome in the care of the subject, since the person under mental suffering cannot be reduced to a set of symptoms and causes.\(^2\) In this regard, the Federal Law N\(^o\) 10,216, of April 2001, redirects the care model in mental health and provides about the protection and rights of people with mental disorders. It is noteworthy that in this law is provided the comprehensive care to individuals under psychological suffering with medical services, psychological, occupational, social care and leisure.\(^3\)

This new model of care for mental health advocates the need for a Comprehensive Care Network on Mental Health that offers a non-exclusive care, listening, and enable social inclusion of individuals in their communities, in conjunction with their family.\(^4\) In this sense, the CAPS comes up with a new support character beyond therapeutic and pharmacological interventions; it involves social intervention, with focus on the reintegration of the patient in the family and in society. CAPS include attendance units in mental health care that offer to users an intensive care program developed by a multidisciplinary team.\(^5\)

The CAPS team works across disciplines with the support of the family, in order to promote better forms of sociability that may rely on other professionals, besides those who form a traditional therapeutic team, such as artisans, music therapists, artists, teachers, physical education teachers, among others.\(^6\)

With the rehabilitation proposal, the Ministry of Health defines the therapeutic workshops as group activities of socialization, expression and social inclusion, aiming the social integration of citizens. Therefore, the main task of those who coordinate a therapeutic workshop is to enable social inclusion opportunities in which its value is rehabilitation; there is the possibility of the user to work and to discover his potential to achieve social spaces.\(^7\)

Therapeutic workshops about mental health as a tool...

The development of therapeutic workshops is applied to intensively users, semi-intensive and non-intensive. Therapeutic workshops include: commemorative festivities, artistic activities, paintings, collages, music therapy, dynamic, testimonials and socio-educational workshops, enabling users of services a place of dialogue, expression and acceptance.\(^8\)

In care logic, it is necessary that the professional team of the CAPS enables the patients with mental disorders to live with better quality of life and autonomy, interventions such, should be acclimated in spaces that no longer see this person only as a carrier of a mental disease, but as a unique and singular individual who needs an individualized care.\(^9\)

Given the above, this study aims to analyze the applicability of therapeutic workshops as social insertion instrument of the person with mental disorder.

METHOD

This study is part of the macroproject "Therapeutic Workshops in mental health: psychosocial rehabilitation instrument ".

The study is characterized by a descriptive research with a qualitative approach, developed in a Psychosocial Care Center - CAPS I, mental health service in the Municipal Health Border-PI, for the care of patients with mental disorders. This service uses the therapeutic workshops as a strategic tool to reintegrate the individual into society in a productive and participatory manner the social and cultural environments where develops every day and family life.

The study participants were ten relatives of CAPS I users that make this treatment service within the three modalities: intensive, semi-intensive and non-intensive. The inclusion criterion was the inclusion of these families in the therapeutic workshops activities with users of the Psychosocial Care Center - CAPS I. Those who met this criterion were invited and accepted after the volunteer signed an Informed Consent Form (ICF).

To the participants there were guaranteed confidentiality, anonymity and non-use of the information to the detriment of others. To maintain the anonymity of the participants in the text where it was exposed to the transcribed form of lines there were identified by dep.1; dep.2 and so on.

Data collection was conducted from November to December 2014, through a semi-structured interview guide containing
information relating to questions about the involvement of family members in the therapeutic workshops of activities to users of CAPS I.

The systematic used by the researcher for the interviews was well organized: There was a scheduled meeting to explain the objectives and interview purposes, the reading and assignment of the free and informed consent, and allowed the recording of statements and following the interview that was recorded on audio equipment (.mp4), then transcribed and rearranged properly all the information gathered to give subsidy to the registration information.

Data were analyzed following three phases: pre-analysis, which comprehends the organization of the material to be analyzed, the definition of the significant sections and categories according to the objectives and study questions;7 in the second phase there was applied what was defined in earlier stage, using the material exploration; the third phase, it performed the treatment of the results and their interpretation.

The study followed all the recommendations required for research involving human subjects, contained in Resolution 466/12 of the National Research Ethics Board of the National Ministry of Health; Health Commission.10 The study was approved by the institution “study setting” and by the Research Ethics Committee (CEP) of the Federal University of Piauí (UFPI).

RESULTS AND DISCUSSION

The group of ten family members is formed mostly by females, aged between 21 and 63 years old, married, with low educational level, living in home with 2 to 5 members of the family cycle, earning a minimum wage and having maid as a profession, as shown in Figure 1.

<table>
<thead>
<tr>
<th>Dep</th>
<th>Gender</th>
<th>Age</th>
<th>Marital status</th>
<th>Schooling</th>
<th>Relatives in home</th>
<th>House members</th>
<th>Family income</th>
<th>Profession</th>
</tr>
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<td>01</td>
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<td>52</td>
<td>Widow</td>
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<td>Kids</td>
<td>03</td>
<td>1 minimum wage</td>
<td>Maid</td>
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<tr>
<td>02</td>
<td>F</td>
<td>23</td>
<td>Single</td>
<td>High School Incomplete</td>
<td>Mother, siblings</td>
<td>03</td>
<td>1 minimum wage</td>
<td>Student</td>
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<tr>
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<td>F</td>
<td>29</td>
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<td>Husband, siblings and mother</td>
<td>05</td>
<td>2 minimum wages</td>
<td>Maid</td>
</tr>
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<td>04</td>
<td>F</td>
<td>21</td>
<td>Stable union</td>
<td>Elementary School Complete</td>
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<td>02</td>
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<td>Maid</td>
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<tr>
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<td>09</td>
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<td>03</td>
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<tr>
<td>10</td>
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<td>Elementary School Complete</td>
<td>Kids</td>
<td>03</td>
<td>3 minimum wages</td>
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</tr>
</tbody>
</table>

Figure 1. Socio-demographic characteristics of the participants. Fronteiras/PI, 2015.

It is notable that the prevalence of low income as a risk factor, since low socioeconomic status is an important risk factor for drug use; added to this, poverty is considered a major stressor and risk factor for young people become delinquents.11 From the analysis of interviews with the participants it was possible to find their perceptions of therapeutic workshops related to their participation, the importance for the treatment of their family within the CAPS and punctuating these workshops as primary activities for the reintegration, rehabilitation and recovery of citizenship of these individuals with mental disorders in society.

It was evident in the speeches of the family that the treatment carried out in the CAPS was presented as positive, providing an...
improvement in the recovery of autonomy, better relationship in the social and family cycle, as well as in rescue skills.

There I saw that he had a life more joyful, happier because started to have contact with other people and no longer at home as if it was just deleted and is much better because of his treatment. (Dep. 7)

Treatment in CAPS is very good, because I observed that he vastly improved. (Dep.10)

Family members feel satisfied with the treatment process that the mental health service came to them, showing that this treatment is very important for the rehabilitation and recovery of the autonomy, making the bearer of psychic suffering feel useful and able to be reinserted in society.

The satisfaction in the treatment offered by the CAPS is connected to the repositioning of users as they learn activities in workshops and acquire greater autonomy and become proactive, in addition to reduction of crises, the possibility of living, socialization, daily enrichment that goes beyond the disorder. 12

It is observed that the family also began to contribute with their participation in the treatment of their family members who are accompanying daily in CAPS.

I always followed, it took him until then, followed the queries, always shared everything, and at home too. (Dep. 5)

I'm going to leave you, I'm going to go get it, I am a part of the meetings, the workshops there with him, and I'm quite entered there, because all the events and all the CAPS provides for him. (Dep. 7) Accompany him on a day-to-day basis within the CAPS, take and bring home, give a medication very carefully, I am dedicated to him. (Dep.9)

I participate in everyday activities at home and in his activities of CAPS. (Dep.10)

Given this reality, the inclusion of the family is an essential element in family maintenance inside and outside the psychiatric institution, providing and developing a better relationship of affection and rescue of their citizenship both in the family and in the social cycle, since the family must make the community and/or society look at the individuals with mental disorders beyond the disease and recognize them as citizens.

Mental health professionals should therefore strengthen and demonstrate the relevance of the presence of family members in the service, informing them that they are partners and co-responsible for the user’s treatment, through this participation to be achieved adherence to treatment from the bond and required mutual responsibility, Therapeutic workshops about mental health as a tool... approaching the ideal of family relationships in the service. 13

As well as the speeches of the families strengthen the view that the workshops activities are paramount in the CAPS, acting as rehabilitation and resocialization process and rescuing their citizenship that was once forgotten and abandoned as a result of a mental problem, helping them putting into practice their internal desires and making them feel able to carry out their activities in order to make them aware of their potential and singularities as these activities become as overcoming target.

It is important, because it showed improvement and was a lot of stuff there, like cutting, drawing paintings. (Dep. 4)

[...] he went on to have other attitudes, started to have more jokes, talking more, because he's back, to feel useful in family and with friends. (Dep. 7)

The workshops helped each day to socialize more with people. (Dep.9)

In the participants’ speeches they emphasize the importance of activities in CAPS, punctuating the benefits they provide workshops, showing that these activities of therapeutic workshops should be understood as one of the many operators that can contribute to the user’s rehabilitation process in the community.

In this sense, the user resocialization process needs to have all possible support within the CAPS, through the optimization of activities carried out and within the family context of each workshop can be the causing factor of improvement, for it is a device for collective work that takes its players to interact with each other and other people who are part of the CAPS context.

Therapeutic workshops activities allow them to regain the desire for work by the user, because through production and free expression unites health, social life, culture and environment, then promoting the health, quality of life and inclusion enabling the transformation of this subject. 14

The workshops become positive when possible the transformation of reality minimizing the suffering that mental illness causes. Between knowledge and practices in therapeutic workshops, care involves constant creating and recreating. In the proposed therapeutic education it is important to raise the ability to live and experience the individuality of the participants. It is further to be through the exchange of trials collectively, in relation to the other that the subject sees itself as part of the life process. 15
Therapeutic workshops about mental health as a tool...

They have a little bit of everything as paintings, dynamic, a lot of things. The participation of patients in these workshops did improve enough, for they participated, there was no way they could think of something else. (Dep. 5)

They work with paintings, with biscuit, with glue, and so they develop more skills [...]. (Dep. 7)

These activities should be filled with offers of support from professionals, family and community, providing opportunities to participate in these devices and breaking the stigmas of the only drug treatment.

Therapeutic workshops are activities carried out in a group with the presence and orientation of one or more professionals; and it is one of the main ways of treatment offered in CAPS. These activities are programmed with the interest of users, the possibilities of technical or service needs in the therapeutic project, aiming to further integrate socially the families.7

Diversification of activities is essential to carry out the reception of users in full, since, with varied and diverse offerings of possibilities, it is reduced much temptation selection.17 In this sense, the workshops enable users to their mutual influence on society with autonomy and recognition of citizens. This work requires assistance from the family, because the user must feel supported to make connections between the various components aspects of daily life, such as: work, leisure, friends, reflecting on the credibility and the whole family maturing.18

It is also possible to identify in the discourse of professionals that therapeutic workshops activities are indispensable tools for the social reinsertion of the user in society, because these activities workshops have great contribution to the productive therapeutic process and integral development of the subject's capacity by providing measures aimed at eliminating or reducing forms of exclusion in society.

Today she is happy, cheerful, is another person to sight than she was before, no doubt someone else [...]. (Dep. 8)

Can help in everyday life to develop more and have a better family relationship and in society. (Dep. 9)

Can help him in the family cycle, in society and especially having more autonomy. (Dep. 10)

The therapeutic workshops are presented as one of the tools, together with other collaborating, for the psychosocial rehabilitation process; valuing life story with its peculiarities and regionalities, so that this guy feel welcome. In this context, it is
understood that the workshops enable this bridge between madness and lucidity, respecting the pace of each.  

The appreciation and recognition of the family as a unit of care, from its insertion in the therapeutic schedule of mental health services as an active agent of interest or transformation, in addition to bringing the deconstruction of an fixed model of intervention in the social imaginary, it is a challenge for health professionals. This fact requires an essential change in therapeutic practices, setting up in a transitional process between the tradition of asylum culture and the new proposal substitutive/reform.  

However, the main objective of the professionals is to distance users from drug consumption, building through the ‘We’ the relationship a new relevance and typifications system, basing this relationship on trust and the bond established in the therapeutic space.

CONCLUSION

Interviewed family members understood the purpose of the activities developed within the CAPS as well, they pointed the main conquests that the patients had through the Therapeutic Workshops in their different ways to be run. Thus, the perception produced by the family is that the therapeutic workshops represent important tools of (re)socialization and psychosocial rehabilitation, admitting the importance of the interaction effectively to all health team combined to their cooperation on the treatment.

REFERENCES


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