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ORIGINAL ARTICLE

BREAKING PARADIGMS IN NURSING CARE IN MENTAL HEALTH WITH COMMUNITY THERAPY

ROMPENDO PARADIGMAS NO CUIDADO DO ENFERMEIRO EM SAÚDE MENTAL COM A TERAPIA COMUNITÁRIA

ROMPER LOS PARADIGMAS EN EL CUIDADO DEL ENFERMERO EN SALUD MENTAL CON LA TERAPIA COMUNITARIA

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ABSTRACT

Objective: to analyze whether training in Integrative Community Therapy has become an instrument of change in the practice of nurses working with mental health. ***Method:*** an exploratory, descriptive study, qualitative, with seven nurses. The data were collected through a semi-structured interview and analyzed by content analysis technique. The research project was approved by the Committee of Ethics in Research, protocol nº 6367.0.000.126-10. ***Results:*** nurse training in Integrative Community Therapy changed their practice, posture, helped them in the knowledge of personal and professional limitations and / or the demands raised by users. These started to value the qualified hearing, moments of exchanges, of self-help, which caused changes, paradigmatic ruptures, this because the nurse came to understand that to take care of the other, also takes care of himself, and recognizes the importance of the role of the interdisciplinary team. ***Conclusion:*** nurses break paradigms and transform their practices from their training in Integrative Community Therapy. ***Descriptors:*** Nursing; Mental Health; Professional Practice; Therapy.

RESUMO

Objetivo: analisar se a formação em Terapia Comunitária Integrativa tornou-se um instrumento de mudanças na prática do enfermeiro que atuam na saúde mental. ***Método:*** estudo exploratório-descritivo, qualitativo, com sete enfermeiros. Os dados foram coletados por entrevista semiestruturada e analisados pela Técnica de Análise de conteúdo. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa, protocolo nº 6367.0.000.126-10. ***Resultados:*** a formação do enfermeiro em Terapia Comunitária Integrativa mudou sua prática, sua postura, ajudou-lhe no conhecimento de limitações pessoais e profissionais e/ou nas demandas suscitadas pelos usuários. Estes passaram a valorizar a escuta qualificada, momentos de trocas, de auto-ajuda, que provocaram mudanças, rupturas paradigmáticas, isto porque, o enfermeiro passou a entender que ao cuidar do outro, também cuida de si, e reconhece a importância da atuação da equipe interdisciplinar. ***Conclusão:*** os enfermeiros rompem paradigmas e transformam suas práticas a partir de sua formação em Terapia Comunitária Integrativa. ***Descritores:*** Enfermagem; Saúde Mental; Prática Profissional; Terapia.

RESUMEN

Objetivo: analizar si la formación en Terapia Integrativa Comunitaria se ha convertido en un instrumento de cambio en la práctica del enfermero que trabaja con la salud mental. ***Método:*** estudio exploratorio, descriptivo, cualitativo, con siete enfermeros. Los datos fueron recolectados a través de entrevista semi-estructurada y analizados por la Técnica de Análisis de Contenido. El proyecto de investigación fue aprobado por el Comité de Ética en Investigación, protocolo nº 6367.0.000.126-10. ***Resultados:*** la formación del enfermero en la Terapia Integrativa Comunitaria cambió su práctica, su postura, le ayudó en el conocimiento de las limitaciones personales y profesionales y/o en las demandas planteadas por los usuarios. Estos han venido a valorar la escucha cualificada, momentos de cambios, de autoayuda, que causaran cambios, rupturas paradigmáticas, esto es porque el enfermero vino a entender que, para cuidar de los demás, también se ocupa de sí mismo y reconoce la importancia del labor del equipo interdisciplinario. ***Conclusión:*** los enfermeros rompen paradigmas y transforman sus prácticas desde su formación en Terapia Integrativa Comunitaria. ***Descriptores:*** Enfermería; Salud Mental; Práctica Profesional; Terapia.

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INTRODUCTION

The intention of reflecting on the contemporary evolution of psychiatric nursing and mental health has the intention to place the reader, who settled in the changes in the practices of this professional category. Thus, the article described herein is intended to show the new paradigms and advances in nursing practice from the disruption made with models and roles that professional exercised in psychiatry. Thus, relying on Thomas Kuhn,[1] who defines paradigm as different way of seeing the world, or even a way of seeing reality. It is considered that the paradigms are important to understand not only the science, but appropriate life in society. However, to discover a different paradigm is based on a possible development of science.

Going further, Kuhn discusses a science evolves in stages that can be configured in a normal evolution, or revolutionary rupture, the latter being the largest contributor to the progress of science because they seek to break the paradigms that governed. However, complements saying that this fact only occurs when they are challenged and replaced by new paradigms.

In this direction, we start from the understanding that the training of nurses to apply the methodology of Community Integrative Therapy (ICT) in the mental health system has provided the construction of a new kind of professional, and that doing so breaks were made by setting advances the profession that stands out as a science. Thus, ICT is within the field of community mental health even in the 1980s, through a university extension project, developed by its founder Adalberto de Paula Barreto, which has been started in a poor neighborhood in Fortaleza/CE/Brazil. However, its expansion was only observed in SUS (Unique Health System) and intensified in 2008, from their inclusion in Policies and Complementary Practices of the SUS.[2-3]

The Ministry of Health has incorporated the ICT as a public policy on health promotion and prevention of illness. Thus, the network of Community Therapists in Brazil grew essentially conquering various spheres such areas of health, education, public safety, community spaces, among others, with more than 30 poles trainers, 11.500 trained therapists, and more than 8,6 million attendances.[4]

The recognition of the effectiveness of the methodology of Community Therapy (CT) occurred through partnerships with Federal Public Universities in Brazil, which has created several university extension projects which enabled its spread across the country. Thus, successful experiences were gradually disclosed, either in Brazilian congresses or scientific studies published in electronic database.[5-9]

It is understood that such a practice, it is a light technology for care, which has been reflected in the most successful and innovative various spheres. Thus, this article proposes to disclose and call for reflection, nurses and health managers, educators and community therapists throughout Brazil and in other Latin American countries, and the importance and need for expansion of this practice to community spaces.

ICT works individuals as subjects woven into a social network that promotes social inclusion, since, favors the expression of difficulties and concerns experienced in the various dimensions of life and potentially affecting the health of people.[2] From this perspective, it was realized that the NHS from investment in alternative practices of care, stimulates discussions of strategies in health, settled in experiments capable of conceiving the human being as a whole is not compartmentalized between body, mind and spirit to portray a vision of health that goes beyond barriers biologicism.[10]

This policy change and care in relation to mental health increased the autonomy of nurses in practice that no longer a takers to become responsible for effective therapeutic activities that contribute to the social rehabilitation of the user. This study[11] conducted in 2005 revealed that for effective care is necessary to have professionals committed to ethics, a practice consistent with the speech and academic training that supports the professional to act together with mental disorders. And it raises TCI training for nurses.

It focuses, therefore, that[12] "Modern science has established the man as epistemic subject, but cast him as the empirical subject", this behavior is leaving aside the subjectivity of the individual during their professional careers. That thought makes Cartesian care dichotomized and ineffective, being essential that health professionals, especially those working with mental health, empower yourself a view toward comprehensive care, seeing it as a being who needs demand, and thus promote health and to undertake major changes to this field of action.

In this process, the nurse is acting as community therapist, however, some

characteristics are essential for such a professional. Thus, this must be a person open to the community, knows how to accept differences as values worthy of being taken into consideration.[2,13] Being in the service of human growth and community, and in addition, it needs to be a real person and committed. The community therapist is one who sees every flaw in an appeal, a sign of grace and help and has very sharp sensitivity to be able to understand the other.

The nurse doing the training in community therapy becomes the facilitator and warm therapeutic group work, it is important that, at this time, seek raise questions, provoke discussion, and bring elements clarifiers, so that the group develops its own vocation therapy. Thus, the professional finds himself challenged to go further, which would lead one to empowerment.[13]

This ability to empower participants wheels ICT, set a break in nursing practice, because, empowering it is a process that enables people to assume greater control over personal factors, social, economic and environmental directly or indirectly influence their health. For much, it is necessary that the subjects have strategies that seek to promote independence and self-confidence by building self-esteem, ability to adapt to the context in which the person falls and the development of mechanisms for self-help and solidarity, which are reflected in the manifestation of healthy and productive and increase the perception of well-being and self-realization.[14-6]

It was noticed that the new technologies of care, invite health professionals for an innovative activity, to the extent that seek to enter the users back to the social and family context, and return the autonomy and the right to citizenship. In this perspective, the nurse to enter into a professional team, and starts to develop an interdisciplinary practice, it seek to provide care that often has crossed the borders and boundaries of primary, secondary y care, in which the bonding and trusts constructed, provide a great opportunity to treat and cure in a few moments.

TCI has been shown to be an important tool for health care, to demonstrate strategic value in the context of execution of the SUS, especially in primary care, with emphasis to a recent survey conducted on the impact of the TC, which according to data MS came to the conclusion that 89% of the regulars of the wheels had their demands met, with no need for referral to other levels of care and health services, reinforcing the logic of this tool as a strategy for care.[3] Thus, the objective is to analyze to what extent a formation Community Integrative Therapy has become an instrument of change in the practice of nurses who work in mental health.

METHODOLOGY

This is an exploratory, descriptive study with a qualitative approach. Therefore, it was necessary to rely on bibliographical and documentary. The study included nurses who underwent training in community care; however, the clipping described here was carried out with the lines of seven nurses. Analysis and construction of the article were held between May and July 2012.

It was established as inclusion criteria: 1) Interviews with nurses who underwent training in community care; 2) Interviews conducted between 2010 and 2011, 3) Interview that addressed the subject of study. Were excluded from the sample those interviews that were not in the inclusion criteria.

Seeking to assess changes in the practices of nurses from the formation of ICT was accessed the empirical material collected through semi-structured interviews, built by the Research Group on Community Mental Health of the Federal University of Paraiba, more specifically, the Extension Project, titled: the formation of community therapists: a new path to mental health.

The exhaustive reading of the analyzed material and clippings of speeches of nurses of these databases, we worked through the light of content analysis[17], having allowed the construction of an original version of the moments of Brazilian nursing and advances on new knowledge and practices performed by these professionals from the ICT training. Thus, narratives were constructed and subsequently discussed. Thus, the authors decided to examine the theoretical researched so critical, reflexive, referring to an update this article with secondary sources relating to books, articles in electronic databases and scientific that address.

Aiming to respect the anonymity of professionals, their lines were identified by the letter E followed by a numeral sequence. The research was conducted according to the ethical aspects involving humans recommended by Resolution 196/96 of the CNS, submitted to the Ethics Committee in Research of UFPB which issued a favorable opinion on 14/12/2010 according to protocol CEP / HULW nº 6367.0.000.126-10.

RESULTS AND DISCUSSION

● The community integrative therapy as an instrument for changes in nursing practice - breaking paradigms

ICT is an instrument of care that works and transformative therapeutic potential that each individual possesses, resizes the subject role "passive" to which the user puts health, having as parameter and priority development experiences and particular situations each participant, shifting the focus and responsibility placed on health professional focus for the user while positively reorder caregiver responsible for conducting your life.

It is understood that the relationship between users and nurses should go in addition to the listening demands, ie, dialogue must overcome the immediate need of attention that the client presents in order to enter the plan that comprises the actual causation of the problem so that the health professional can refocus their actions and forms of care.[18]

In studies [19-20] conducted in 2007 and 2010 identified that the wheels of ICT provide changes in everyday health care team, to strengthen the construction of harmonious ties between professionals and users reflecting the quality and effectiveness of the work, making it the most warm and human.

Thus, from the new perspective of care, practice nurses gain new dimensions, which have recognized the profession as a science, and thus they start to get more value with other professionals. Boff[21] states that care is essential to develop the human dimension, by allowing the right of citizenship from the ability to feel the other, to be altruistic with suffering; enhance the emotions and subjectivity of the subject. Thus, the care can be considered more than an act; it would be an attitude of occupation, concern, responsibility and emotional involvement with others.

Nurses who have training in ICT revealed changes in their professional practice. These statements can be found in the speech below:

> *I feel I am in the right place doing what I like. [...] there are changes, small changes that come together making a difference. [...] [I] had more interest in routine work [...] something that did not lead to any change, ie, it was a more paternalistic than preventive, participatory, while the CT it takes to create networks, ties, to question. (E.8)*

An important factor that the nurse was interviewed reveals that before the course ICT he appropriated the historical legacy of psychiatric nursing, based on their daily behavior mechanized, using tools of domination, however, was from ICT training in a new direction was given his professional practice, referring it to a more active and focused on sectors work together.

Also showed that the therapy has helped him understand the importance of interdisciplinary articulation [22] to strengthen the network of mental health care, to ameliorate the health problems of the community and hence providing comprehensive care, as desired by the population, managers and professionals in the NHS in recent years.

Regarding Therapist Community, Barreto[2] recalls that when assisting others in the professional care of himself and awakens feelings, emotions, ideas and thereby discovers while unfinished beings, and with it, go make a new reading of your daily practice , posing in paradigmatic ruptures toward their professional practice. Continues to this discussion below:

> *The Community Therapy enters as an additional tool that allows for this contact, this approach, this bond and especially the approach of user needs. Here you have the opportunity to get closer to the difficulty, the pain, the feeling of the user, because it is an extremely important tool, the lightweight technology that works a lot with the subjectivity of the user. (E. 5)*
>
> *Changes, the benefits are not just for the user but also for the professionals, because they become more sensitive in listening and start to treat differently, they begin to realize that this nuisance, that abuse of that pain, that gastritis, not is something only physical, it is also emotional. (E. 6)*

View that from the formation of the ICT professional comes to know and better understand each user with their subjectivity and particularity, and this is due to the bonds built between professional and user, allowing a relationship horizontalized that evokes respect, mutual aid and sharing of knowledge.

The nurse E.6 shows that this practice enables advances regarding physical contact, approach, and building bonds and emotional ties between users and professionals, making feasible a relationship that heals the needs of both. This is because, to the extent that this nurse has the opportunity to get closer to the difficulty, the pain, the feeling of the user, it starts to view it from another perspective care.

The ICT is a tool of great value in the work process, as it acts in the perspective of breaking paradigms, and thereby promotes itself advances the profession, either in the

way of humanization, or even caring dimension, being able to remodel nursing practice in order to meet the basic needs of users.[23]

Nurses revealed that the development of the wheels of therapy, facilitated the expression of his own subjectivity, repressed by the historical context in which the caregiver has always been a place of superiority in front of the user, thus creating linkages ever made, as can be confirming the statement that follows:

> *[...] Remember the last wheel Therapy that participated this year, [...] I talked about my feelings that somehow freed me because I was very comfortable ... Had a lot of people talking about their feelings and it also helped me open [...] I spoke of things that usually can not speak [...]. Only for my best friends, you know? [...]. I can say that the therapy greatly helps the person to get rid of things, to see the suffering of others, to stop being insensitive to certain things with certain feelings that exist and sometimes the person does not even matter to them, you know? And she actually caused changes in me. (E.1)*

ICT provides enriching experiences that promotes empowerment and helps the individual to meet the challenges of everyday life. However, the focus is on the discovery of individual strengths, and skills for a better life. As seen, the ability of practice to provide empowerment should start in the therapist, so that this can help the participant to develop their potential. Furthermore, this empathy between therapist and patient is fundamental to the transformation of the therapeutic process.[24] Has widened this discussion below:

> *[...] It is simply a matter of giving. And this is a tremendous personal growth, becoming beings loving, supportive, and less selfish. Going to be supportive of each other because the pain because it reflects on me, so it was another thing that I began to understand and realize. (E.7)*

It is noteworthy, then, the power transformer that provides therapy to the professional that develops, causing it to view its limitations, making them more humble throughout their practices and thereby, they improve their quality of life and consequently their welfare. The speech below reveals a nurse more sensitive to health care practice and highlights the need for constant change and growth:

> *I think I'm still in the process of permanent transformation, corn and popcorn[...]. There are times when I am corn, sometimes I am a female turkey, there are times that I am popcorn. [...] I always say I'm like a being in transformation [...]. Realize that I have the right to be unfinished, crying, saying if I did not understand something today, but tomorrow I can understand. Because I was such a person, or rather I was not, I am, but I'm improving, because we had not seen another person, I'm the same [...] carry the same things in my luggage [...]. I've been trying to improve every day. (E.4)*
>
> *The formation in CT is fundamental in my life, mainly, because I grew. [...]. Learned to grow by pain, but now, after adult, needed some tool that could make me to carvel more, which would me lapidate, so he could begin to understand why certain things that had inside me not knew working. The formation in CT me worked one way and will continue me working. [...] Today I can have a different look. [...]. (E.3)*
>
> *Training in CT for me is life. Changed my life, my day-to-day, let me closer and with fewer masks. Today I know the limits. Occasionally feel strength, I help one another. Training in CT was that magical moment in my life and this here, I always say I am not cured, because every day I need to reframe, I look at each other and it is a continuous process. Just do not understand how. This is a very large legacy of CT, like talking about touching people. (E.2)*
>
> *So, thank you too to those people innocents who suffered, and because contributed to my personal development and to strengthen my line of work in my life. Looking for those simple [...] helps us to discover and rediscover the roots. I am grateful to these people for rich learning opportunity, because the life stories of others in the community are reflected in my own story. (E.7)*

The training gives the nurse the ability to know better, so these rescue his life story, and become more prepared to listen to the other. Professionals present above reveal inner growth, personal development and broader world view, understanding that the therapist community during the development of the wheel, also a therapist himself. However, we found that the differential training in ICT in nursing practice, is through that to develop it, it goes through a process of personal healing and interior, which makes further treatment in the course of wheels made later with users, in that from the suffering of others and their coping strategies, he reframes its history, with the group developing their autonomy, self-esteem and power resilient. This condition causes them to break with the paradigms welfare still present in the current context which, in turn, hinders care universal, comprehensive and equitable.

As seen, the nurse therapist community is considered an unfinished being, constantly

changing, so it shows up more empowered of their actions. You can see that ICT does see its limitations. Another finding of this investigation was in relation to improvements in self-control that professional to manage their feelings and their ability to forgive each other:

> *So, thank you too to those people innocents suffered and because contributed to my personal development and to strengthen my line of work in my life. Looking for those simple [...] helps us to discover and rediscover the roots. I am grateful to these people for rich learning opportunity, because the life stories of others in the community are reflected in my own story. (E.7)*

Thus, nurses develop their resilience, expanding their world view, a view that ICT brings as theoretical cultural anthropology, causing them to a rescue of its social roots, and family history.

Corroborating this argument, carried [25] out a survey in 2011 indicated that the distinction between ICT and other individual therapeutic practices is that it helps the individual overcome the mental suffering, to endure the hardships of everyday life and provides for rehabilitation therapist's life social.

> *Today, with the training, I feel prepared, of course I need to improve, but now I realize how much I improved. Every moment, I realize that history is always a story behind, and now I can see that. What I learned and my reunion with myself, it certainly makes me so very happy. (E.6)*
>
> *The wheels of Community Therapy helped because we start to think more about listening to the other, because the wheel we [...] listen more than you talk [...] helped me to have patience to listen to [...] even making a little time, and you have to give quality to that time! [...] I do not know why we in the health hear little [...] I am really want to talk, give advice, to listen, to talk about treatment. But with the Community Therapy, I thought I was talking too much. (E.1)*

It is clearly the qualitative effect that the training provided in the professional practice of nurses and in your personal life. His speeches reveal how they came to value the qualified listening and how they perceive their practices should be permeated by moments of relaxation, exchange, self-help and the most important change, be it individual or collective.

In this context, the ICT is to represent learning experience and growth, provides opportunities reflections not only for its participants, but also for their own community nurse therapist who often are healthcare professionals who carry thoughts and casts centered healing model.

Thus, ICT emerges as an innovative tool that the nurse practice, in that it stimulates new ways of thinking about care, allowing these professionals to release institutional autism, hierarchical and unilateral relationship of knowledge, eagerness for immediate solving problems and mechanism that still permeates the reality of health practices.

FINAL REMARKS

At the end of these reflections, it was seen that the practices of nurses for many years, were restricted to a curative care, segregated and limited and is far from a careful focus on health promotion and comprehensive care. It is worth noting, therefore, that among the advances in professional practice Seasons specific integration of ICT in PNPIC-SUS, a network of primary care, making this an instrument of great value and need for nurses and other professionals who work in communities and in several areas.

This study sets out that ICT technology take care innovative and successful, which started to be developed in the areas of health, and how greater emphasis on local community and greater risk for psychological distress, allowing, thus, disruption of paradigms and psychiatric care, raising in transformation their practices. Moreover, this practice has provided both the therapist and empowerment of its participants. Thus, it is evident that after the training of nurses in community care practices have changed significantly since these showed improvement in their postures, learned to know each other better and yourself, making them more humble to see in the course of their practice, their limitations and, therefore, they give a new meaning to their profession and improve also their quality of life and consequently the users.

Another factor identified was the fact that professionals have recognized the importance of interdisciplinary team work for the comprehensive care of the subject. In this context, ICT consists action on health highlighted within the primary, which deserves attention in the network of NHS services, it encourages community participation, the link between scientific and popular knowledge, listening to warm, while still allowing the health staff and nurses working in these services, understand the cultural diversity of the community by allowing the promotion of health, the concept of autonomy and comprehensive care users by

emphasizing the logic of breaking the paradigm welfare. In this perspective, it appears that nurses break paradigms and transform their practices from their training in community care.

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