INCLUSIÓN DE PESSOAS EM SITUACIÓN DE SOFRIMENTO PSÍQUICO ATRAVÉS DA TERAPIA COMUNITÁRIA INTEGRATIVA

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ABSTRACT

Objective: to evaluate the contribution of Community Integrative Therapy for the inclusion of users in a Psychosocial Care Center - CAPS in the family and community. Method: case study grounded in understanding and interpretive method, developed in Pedras de Fogo / Paraíba / Brazil, with twenty users between 19-60 years old. The empirical material was produced in the period from June 2009 to June 2010, analyzed with support in Technical Thematic Enunciation. The study was the research project approved by the Research Ethics, Protocol nº 0129. Results: The participation of users in therapy allowed the exchange of experiences, improved interpersonal relationships, increased self-esteem and empowerment. Conclusion: it was shown that the therapy helps restore self-esteem and strengthening linkages healthy, increasing the quality of life and citizenship. Descriptors: Mental Health, Therapy, Community.

RESUMO


RESUMEN

Objetivo: evaluar la contribución de la Terapia Integrativa Comunitaria para la inclusión de los usuarios en un Centro de Atención Psicosocial-CAPS en la familia y la comunidad. M étodo: estudio de caso fundamentado en la comprensión y el método interpretativo, desarrollada en Pedras de Fogo / PB / Brasil, con una veintena de usuarios entre 19-60 años. El material empírico fue producido en el periodo desde junio de 2009 a junio de 2010 se analizaron con el apoyo de enunciación temática técnica. El estudio fue el proyecto de investigación aprobado por la Ética de la Investigación, el Protocolo nº 0129. Resultados: La participación de los usuarios en la terapia permitió el intercambio de experiencias, la mejora de las relaciones interpersonales, el aumento de la autoestima y el empoderamiento. Conclusión: se demostró que la terapia ayuda a recuperar la autoestima y el fortalecimiento de los vínculos sanos, el aumento de la calidad de vida y la ciudadanía. Descriptores: Salud Mental; Terapia; Comunidad.
INTRODUCTION

Since ancient times, to seek explanations for the “madness”, which permeate the mythology to religion, which is characterized as harmful to society from the emergence of Rationalism by classifying the mentally ill as one who violates or ignores a rational morality, and therefore deserved to be segregated from society. The care and treatment offered to these people occurred predominantly in psychiatric institutions and these people reflected and still reflect the dominant values of the culture in relation to the perception of mental illness.

From the second half of the twentieth century began a change in the paradigm of mental health care due to significant advances in psychopharmacology, the discovery of neuroleptics and antidepressants, the human rights movement promoted by the United Nations (UN) and the new concept of health with the interplay of biopsychosocial factors.

In Brazil, the Psychiatric Reform Movement began to gain visibility as a result of the 1st National Conference on Mental Health and the 2nd National Congress of Mental Health Workers in 1987. This movement emphasized that it was not enough to humanize hospices, improve the environment asylum or increase the number of professionals in these institutions. It was necessary to reinsert the mentally ill back to social life, rescuing their citizenship.

In order to transform the paradigm of “madness” in the country, the Ministry of Health of Brazil has to bet and invest in Psychosocial Care Centers (CAPS) in the late 1980s, taking as inspiration the Italian Mental Health Centers, with the aim of offering an intensive care from a logical role in the community, bonding, care and daily attention and different treatment asylum. They currently occupy a strategic role in Brazil for the transformation of the practice of mental health care.

The CAPS facilitated the establishment of action jointly between Mental Health and Family Health Strategy, providing comprehensive care and community for people with mental disorders. Thus, public policies should develop actions of Mental Health to ensure the applicability of the broad concept of health, not sickness centralizing and directing care for prevention and health promotion.

In this perspective, the Community Integrative Therapy (TCI), emerges as another tool for Mental Health, which can be used by health professionals, related fields, and by the community, representing a soft technology of care that can be applied in several areas, including CAPS, which already had successful experiences. TCI approach constitutes a facilitator of self-empowerment, since it enhances the individual and collective resources, to the extent that appropriates the qualities and strengths that already exist in power in social relations.

Thus, this study aimed to examine the contribution of Community Integrative Therapy for the inclusion of the user of a Psychosocial Care Center, both in the family and in the community.

METHOD

Cut Work Course Conclusion << The Community Therapy in Psychosocial Care Center - CAPS Municipality Stones of Fire / PB >> conducted by the Department of Nursing of the Federal University of Paraiba in 2010.

Case study method grounded in understanding and interpretation due to the specificity of the object, to know that it requires the observer-researcher, comprehensive effort mediated by interpretation, since the material to be worked is the expression of subjectivity through speech a thinking subject, active and reflective in his narrative that puts it in a context diverse culture and values, builders of their identity.

The field research was developed in a Psychosocial Care Center (CAPS) in the municipality of Pedras de Fogo / Paraiba / Brazil. The service was founded in 2006 and has 376 registered users at the time of the publication of the material produced by signing the consent form.

Took part in this survey users about twenty participants wheels TCI, of both sexes, aged between 19 and 60 years old. All were informed about the study and consented to the publication of the material produced by signing the consent form.

The empirical material was produced on the wheels of TCI and the researcher adopted the technique of non-participant observation, using the field notebook to record the statements of users over the wheels of therapy. TCI is done in five steps: reception, choice of topic, context, questioning and conclusion. The wheels were conducted by community therapists.

Step in the choice of topic, participants reported briefly the concerns they bring to
the wheel and then the group chooses a theme to deepen. Contextualising the protagonist, who has chosen his subject, gives more information about your problem, answering questions from the therapist and the group, and problematization occurs Reporting situations similar to that of the protagonist, but with a focus on strategies overcome. So these moments were considered the most important to record the lines in the field notebook. All this material has been transformed into narrative and analyzed based on the analysis techniques of enunciation and thematic, because they are more appropriate to the context in which the empirical material was produced.

This study met the requirements proposed by Resolution 196/96, which sets forth the standards and regulatory guidelines for research involving humans, submitted to the Ethics Committee in Research of the Center for Health Sciences, Federal University of Paraiba, which issued assent on 18/05/2009, under protocol nº 0129.

RESULTS AND DISCUSSION

The inclusion of the user in the family and community

The Psychiatric Reform brought a major objective include the person with mental illness in the family and in society, providing with this idea, significant changes in these everyday individuals. If previously removed from the family because they are considered a threat, are now included in this group, from which can reconstrcut the perception of himself and his troubled contextualized to resume life in society. Therapies emerge the difficulties faced by both users and families in the process of recovery and social reintegration.

The model of psychosocial care to invest in new forms of technology in healthcare has prioritized the use of lightweight technologies, like TCI. This innovative mode of treatment of Mental Health has shown very positive results in changes of interactive patterns, interpersonal relationships as dialogical and sensitive, opening a possibility to accept and interact with a difference, by the members of society.

From this perspective, ICT has contributed to the social inclusion of users in CAPS because they accustomed to the exclusion and prejudice, participate in a time when they are encouraged and seen as people with great potential, where their speech is important and has the force to help others out of the emotional conflicts and anxieties experienced in day-to-day.

Users of this service reported out of the wheels with more courage and determination to continue in daily victories due to the understanding that they are important and have value that can make a difference even with its limitations. The exchange of experiences, according to them, have been critical to meeting alternatives to overcome their problems before unsolved, and to understand that problems are inherent to the human being in his daily life, but are often springboards for true personal growth and social.

Thus, users stated that:

[…] Today found that therapy can help my family at home without hurting my bones, I can wash the dishes, lining my bed [...]. (User 7)

[…] Now when people call me boring will not, I will pray and read the Bible, not to fight with them [...]. (User 9)

In moments wheels TCI is common users reporting how they have overcome their problems and what the experiences of other participants brought learning to resolve their difficulties. Life experiences express the resilient characteristics of each person, contributing to the maintenance of community mental health.

Another important aspect to be elucidated refers to citizenship, since participants feel valued when they realize they are in a group that appreciates your knowledge and your experience of life, giving them the opportunity to hear and be heard. Therefore, we emphasize several relevant aspects that were reported by participants at the end users of the wheels when it comes to the benefits generated by the TCI, which are revealed from the following lines:

[…] Therapy is very good because I dance, chant, pray and have fun [...].

(User 1)

[…] Is a relief I feel when I tell the bad things that happen in my house, looks out a lot of bad things inside me [...]. (User 3)

It appears, by the narratives, there were improvements in the lives of these people, either because they feel more accepted by the group and colleagues, through socialization and sharing of experiences, either because they can express their anxieties, allowing to minimize negative feelings that interfere directly in the process of recovery and rehabilitation of the participating users. All this denotes the benefits from therapy, allowing infer that the
TCI has an important influence in the lives of its participants.

Thus, analyzing the responses when asked if there was a change in the life of the participant and the TCI after participating wheels TCI, we highlight the following narratives:

[…] I was very mad, now with therapy not fight with both my mother […]. (User 4)

[…] Therapy helped me to tell my problems because before I could not speak and suffered much. (User 5)

[…] Part of the therapy is good because now I can control more and not get nervous fast as before. (User 6).

This therapeutic tool is not intended to solve problems, but building solidarity networks to strengthen the self-esteem of individuals, families and communities. The focus wheel TCI is not about the diagnosis or problem definitions and theories of change, but about human suffering in all its forms and manifestations, seeking basic health community, with the goals of prevention, measurement and crises social inclusion. Strengthen links between people in the community, enhance skills that come from experience, local knowledge and culture, community therapist puts the service of transforming social consciousness that returns people to the condition of being a subject of his own history.10

Overcoming difficulties in individuals generates the skill and knowledge that make them experts on that issue, making them protagonists of their lives and able to be reintegrated into society, to build awareness that they have rights to be enjoyed inherent to a dignified life.9

Thus, when people change the community also becomes.11 The increased sense of authorship generates a greater willingness to follow his life and face their problems, improves interpersonal relationships and family, promoting recruitment and empowerment necessary for a quality life and citizenship. That's why TCI presents itself as a viable alternative to the demands generated by culture, permeated by inequality, contradicting some values established by culture, permeated by segregation, in which the powerful are strengthened permanently disadvantaged and increasingly are posted on the fringes of what is socially imposed. Thus, taking into account the aspects discussed above, is perceived the great contribution of the actions implemented at the community level, it come out to be as a way to build the solidarity network.

CONCLUSION

The Psychiatric Reform has brought hope to an increase in the quality of life of people with mental disorders by seeing them as deserving individuals to enjoy a dignified life in society. This movement has identified the need for health devices offering a humane treatment and CAPS has been an essential tool in this process, because it facilitates the reintegration of its members in the community in which they live.

Integrative Therapy Community has added to the CAPS in aid to the inclusion of users in the family and community, to stimulate building healthy bonds through dialogue and listening qualified, and in moments of exchanging experiences on wheels that patients with mental disorders expressed their difficulties and successes, so that together are alternatives to solve their problems and thereby discover the power of each resilient.

The change in the lifestyle of the participants wheels TCI was perceived as this inserted CAPS users without judging them or suppress them, increasing their self-esteem when they perceived that through his experiences could help others find important outputs for daily difficulties, it did also increase the autonomy, for these interfere positively in their social groups.

Given the successful experience of ICT on CAPS, identified the need for applicability of this technology lightweight and low cost in many different spaces and community health, as powerful tool for the prevention and rehabilitation of community mental health.

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