CHALLENGES OF INTERDISCIPLINARITY IN PET-REDES DE ATENÇÃO PSICOSSOCIAL AND NURSING ACTIVITIES

DESAFIOS DA INTERDISCIPLINARIDADE NO PET-REDES DE ATENÇÃO PSICOSSOCIAL E ATUAÇÃO DA ENFERMAGEM

RETOS DE LA INTERDISCIPLINARIEDAD EN EL PET-REDES DE ATENCIÓN PSICOSOCIAL Y ACTUACIÓN DE ENFERMERÍA

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ABSTRACT

Objective: to report the experience as a scholar in the program PET-Redes de Atenção Psicossocial, in order to stimulate other undergraduate students to embark on the paths of university extension, once it can provide a more integral health education. **Method:** an observational and descriptive study, with a critical-reflexive approach to the experience on the Program PET-SAÚDE in the area of psycho-social care in the context of the services of the municipality of Maceió-AL, during the period of validity of the scholarship (August 2013 to August 2015). **Results:** the experience made possible the construction of a network, interprofessional work, intersectoral actions, as well as a stimulus to broaden the view of contexts, complexity and intersubjectivity of the research universe. **Conclusion:** this study contributes to the knowledge and compilation of data about the health care of people in social vulnerability and who use alcohol, crack and other drugs. **Descriptors:** Harm reduction; Nursing; Public Health; Nursing care; Psychosocial Attention Center; Mental Health.

RESUMO

Objetivo: relatar a experiência como bolsista no programa PET-redes de atenção psicossocial, a fim de estimular outros graduandos a enveredarem pelos caminhos da extensão universitária, já que isso possibilita uma formação em saúde mais integral. **Método:** estudo observacional e descritivo tipo relato de experiência, com abordagem crítico-reflexivo sobre a vivência no Programa PET-SAÚDE na vertente redes de atenção psicossocial no contexto dos serviços do município de maceió-AL, durante o período de vigência da bolsa (agosto/2013 a agosto/2015). **Resultados:** a experiência possibilitou a construção de vínculo, trabalho interprofissional, ações intersectoriais, bem como um estímulo a ampliação da visão contextos, complexidade e intersubjetividade do universo da investigação. **Conclusão:** acredita-se que este estudo contribua para o conhecimento e compilação de dados acerca da atenção a saúde de pessoas em vulnerabilidade social e que fazem uso de álcool, crack e outras drogas. **Descritores:** Redução de Danos; Enfermagem; Saúde Pública; Cuidados de Enfermagem; Núcleo de Atenção Psicossocial; Saúde Mental.

RESUMEN

Objetivo: relatar la experiencia como becario en el programa PET-redes de atención psicosocial para fomentar entre otros graduandos a entrar en los caminos de la extensión universitaria, ya que esto permite una formación en sanidad más integral. **Método:** estudio observacional y descriptivo tipo relato de experiencia, con abordaje crítico-reflexivo sobre la vivencia en el Programa PET-SALUD en la vertiente redes de atención psicosocial en el contexto de los servicios del municipio de Maceió(AL) durante el periodo de vigencia de la beca (agosto/2013 a agosto/2015). **Resultados:** la experiencia permitió la construcción del vínculo, trabajo interprofesional, acciones intersectoriales, así como un estímulo a la ampliación de la visión de contenidos, complejidad e intersubjetividad del universo de la investigación. **Conclusión:** se cree que este estudio contribuya al conocimiento y compilación de datos acerca de la atención a la salud de personas en vulnerabilidad social y que consumen alcohol, crack y otras drogas. **Descriptores:** Reducción de Daños; Enfermería; Sanidad Pública; Cuidados de Enfermería; Núcleo de Atención Psicosocial; Salud Mental.

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INTRODUCTION

The history of health care in Brazil is marked by struggles and social claims. One of the most important is known as a health reform that culminated in the VIII National Health Conference, where the challenges of health care in the country were discussed. From it, came the formulation of the 1988 CF, which, among other things, ensures health as the right of everyone and as duty of the State.¹

The Unified Health System (SUS) begins to be structured in the 90's with Law 8080/90, which refers to the promotion, protection and recovery of health, and Law 8142/90, which concerns about social control and health financing being duly legalized, becoming the national health system.²⁻³

SUS guarantees in these laws the integrality, universality and equity of health care to all individuals. However, there are numerous challenges to be overcome, one of them being the implementation of Health Care Networks (RAS), which seeks to link health devices in a way of network to guarantee the principles and directives that the system has as goals. Also, it makes intersectoral interconnection to guarantee the integral rights of individuals, taking into account not only the scope of health but also seeing the human being as complex beings, analyzing its singularity.⁴

Thus, RAS comes as a new way of organizing the health care system in integrated systems that allow to respond, with effectiveness, efficiency, safety, quality and equity to the health conditions of the Brazilian population.⁵

Assistance to people who use alcohol, crack and other drugs is also part of the network health care logic, being called Network of Psychosocial Attention (RAPS), where these individuals are seen in a holistic way, working with the reduction of damages and practices of education in health, having as presupposition the social context to which these individuals are inserted.

The document Portaria nº 3.088, of December 23, 2011 establishes for people with suffering or mental disorder and with necessities arising from the use of crack, alcohol and other drugs, within the scope of the single health system (SUS), the guarantee of articulation and integration of attention points in the health networks in the territory, qualifying the care by means of the reception of the continuous accompaniment.⁶

The psychosocial care network (RAPS) establishes the attention points for the care of people with mental problems, including the harmful effects of the use of crack, alcohol and other drugs. The network integrates the single health system (SUS) and is made up of various services and equipment, such as: psychosocial care centers (CAPS); residential therapeutic services (SRT); the centers of coexistence and culture, the units of care (UAS), and the beds of integral care (in general hospitals, in CAPS III).⁷

Hence, the present study tries to show the importance of health professionals to know the RAS functioning, being this knowledge of fundamental importance for a quality health care which should be based on the search of the effectiveness of the guidelines that the SUS has, aiming at the quality life of this target audience. The purpose of this study is to describe the experience of fellow scholars from the PET-Rede de Atenção Psicossocial/UNCISAL, presenting the interfaces of the health services that make up the RAPS in the health care of the population using alcohol, crack and other drugs.

It is evident that the study is of utmost importance guaranteeing the dissemination of this experience as useful as reported in this work, not only for the training of students directly involved, but for the entire population that needs qualified assistance at all levels of assistance at SUS.

Hence, this research had as a goal to report the experience of the scholars during the two years of participation in the program, subsidized by the Universidade Estadual de Ciências da Saúde de Alagoas - UNCISAL, where the academicians carried out the health services that compose the RAPS in the approach to the use of psychoactive substances, emphasizing the interdisciplinary and transdisciplinary action in health care to the target public, as well as teaching-learning work.

OBJECTIVE

- To report the experience as a scholar on the program PET-Rede de Atenção Psicossocial.

METHOD

A critical and reflexive approach to the experience in the PET-Rede de Atenção Psicossocial through Universidade Estadual de Ciências da Saúde de Alagoas - UNCISAL, during the period of validity of the grant (August 2013 to August 2015) in the city of

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Maceió-Alagoas. It was carried out in the context of the services that compose the psychosocial care network (State General Hospital - HGE, CAPS, Psychiatric Hospital, Doctor's Office on the street).

The group that comprised the experience was composed of Professor Tutor, Teachers Tutors who worked in the services of the Psychosocial Network, and Students interdisciplinary scholarships, with the following categories in all (Psychology, Pharmacy, Nursing, Speech Therapy, Medicine, Occupational Therapy, Assistance Social), many of these categories were also preceptors.

The experience took place in cycles, where each pair of academics rotated, with duration from 4 to 5 months in each service available as a practice field in the psychosocial network of the municipality of Maceió-AL.

In these services, several activities were carried out, among them, actions related to alcohol, crack and other drugs, especially harm reduction, health education, conversation, etc; aimed at the population in social vulnerability and its diverse sociocultural contexts.

In addition to acting in the field of practice, there were weekly meetings for sharing among students, preceptors and tutors the experiences lived during the week, as well as unusual case discussions, and stimulation and development of scientific research.

There was also the need for accomplishment and delivery to the preceptors of the field diaries, which facilitated the execution of the critical sense regarding the challenges of practice in the services, as well as the experience of the program for academic formation.

RESULTS E DISCUSSION

The experience in the PET-Rede de Atenção Psicossocial brought with it many forms of protagonism of the academics in the services, building of bond, sharing of knowledge, etc. In this way, it was decided to present the experience in topics, for a better specificity of the experience in all the services that the scholarship students did during the two years they participated in this project.

♦ Trajectory in the services of the Psychosocial Attention Network

In all the services in which I performed the experiences, many challenges were presented, as well as the fragility points and their potentialities. However, before going into the experience rep3wort, it is important

to emphasize the importance of university extension, to the point of guaranteeing a formation capable of promoting social transformation, even during the period of professional training, as the following text states:

While the axis of the university extension exits, academics extend their routine to outside the classroom, starting to practice what was proposed in it and approaching the people, objectifying quality in the assistance rendered. Social change is one of the main objectives of extension, which leads to an improvement in the quality of life of people assisted. It is a progress of the academy with the communities.⁸

Thus, to carry out the experience the psychosocial network existed in exactly five practice fields, the CAPS, the Psychiatric Hospital, the General Hospital of the State-HGE and Two teams of the Office, the specificities of each one of them will be addresses as follows.

The CAPS AD III of Maceió-AL operates 24 hours and carries out activities ranging from individual attendance to workshops with users and family members, reducing harm as the basis of the actions and activities they carry out.

There was a reference system for Therapist and Reference Users, which was a reference professional for a given user of the service, where this professional, together with the scholarship students, users and family members he/she performed the reception of the client, and later construction of a project therapeutic tool, which consists of a tool to better guide the treatment of the client, where he/she is becomes co-responsible and protagonist in his;hers treatment process, along with family support.

Among the activities offered by Caps were workshops on health education, spirituality, art and culture, the latest as a stimulus and incentive to produce income. There was also physical education activity, held both in the sports court available in the caps themselves on the beach. He also had clinical care and referral to other points in the network.

The challenges of Caps consisted of a very large relapse of hospitalization by the users, mostly street dwellers, just because it was a place of shelter for some, which led to the discouragement of some professionals.

The potentialities were of the users to be seen with parts of the treatment process and for the autonomy to be stimulated, as well as the interdisciplinary work developed, where they consisted in sharing of learning and joint

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planning of actions of the service, or even discussion of cases.

Another field of activity was the Psychiatric Hospital Portugal Ramalho, UNCISAL school hospital, which unlike the Caps consisted of a totally hostile environment and full of paradigms in its own characteristic structure of imprisonment, as well as the work processes themselves and total dehumanization towards service customers. Different sensations suggest when we come across a service totally focused yet the institutionalization and imprisonment of the users.

The activity developed in the psychiatric hospital was of qualified listening, that by identifying the users of the services were quite thirsty for affection and that someone who could listen to them, much more than talk. Thus, we also participated in the follow-up of individualized psychological care, where we performed anamnesis, qualified listening not only to the clients being treated, but also to their relatives, who brought innumerable anxieties. There were also, craft activities, developed by only a few users.

The psychiatric hospital also had an attached physical structure layer of green house caps, however this one was not officially a Caps because it still does not have independence from the hospital, needing the support of professionals and food, etc. In any case, it was quite different from the work developed in this environment of the hospital offered proper, the "caps" in question worked in the logic similar to Caps AD, with workshops, leisure activities, health education, harm reduction, soon the pet scholarship students performed all the activities in question. Along with another intention of the hospital, the Center for alcohol and other drugs - CEAD, which was active with a group of Alcoholics Anonymous - AA, with its motto "just for today I am clean", which also held talk wheels, activities of leisure, among others.

The challenges of the Psychiatric Hospital are numerous, from the lack of a consistent reception, such as the insufficient struggle of deinstitutionalization, either because Maceió does not yet have therapeutic residences or because of the countless patients who have totally lost their family ties, presenting atrophy of limbs, malnutrition. Furthermore, their form of treatment of patients is still very focused only on medicalization.

The potential is shown by the attitudes of a few professionals who are fighting for the end of the hospital, for the construction of therapeutic residences, for humanization in

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the treatment of these people, making the difference in their daily work practice.

Other services that comprised the Maceió psychosocial care network and to which the students also lived the routine of the work developed for personnel using alcohol and other drugs was the General State Hospital - HGE. This in turn had even more complex challenges, probably because it is a large hospital, which made it difficult to find the clients mentioned previously, since it did not have specific beds for users of psychoactive substance, which brought great obstacles to the work of the academics and preceptors in this area.

Thus, academics in their practices needed initial support from the nursing team that is more directly in the follow-up of hospitalized patients in the search for those who fit the profile of users of alcohol and other drugs and the one with suggestive symptomatology were approached, where students developed qualified listening as well as health education with a view to harm reduction.

The challenges of the General State Hospital to assist this population were as cited: the lack of specific beds as laid down in laws, and the treatment only for external accidents, such as shooting, knife wounds, which was the of these patients, and their history of alcohol and other drugs was not taken into account.

We can cite as potential, the link built with some clients to which the approach was taken, as well as the approximation with some professionals and demonstration of the importance on the integrality of attention to these people, needing to take into account also their subjectivity and their life history. In addition, there was also an attempt to demystify with health professionals the use of alcohol and other drugs, sensitizing them to the need for a broader view of health.

The last broad action of academics, but not least, on the contrary, is the office on the street, a device that is inserted in basic care that provides health to people who live on the streets or who are in social vulnerability. This service has been shown to be the closest approach to interdisciplinary work in health and intersectoral work.

The office on the street works by providing assistance to people who live on the streets, mainly by distributing inputs (condoms, lubricants, water, etc.), but its greatest success consists in the techniques taught through health education to reduce harm alcohol and other drugs to the target population of their actions.

This service carefully develops actions both making a true link between the points of the health care network, as well as intersectoral actions (being of it social assistance, tutelary councils, education, sports and leisure and others); to realize the integrality of the attention to these people.

It must be emphasized that, in addition to the delivery of inputs, there is a enhancement of bond construction and qualified listening by professionals-users; distribution of SUS card to those who have lost it; referrals in the care network; individual and subjective care of each individual. The challenges of this service consist on lack of car to exit the field, lack of inputs and effective support of points belonging to the psychosocial care network. Its potential lies in the extreme commitment of the professionals that make up the services, the approach of professionals - users, interdisciplinarity, in reaching those who have often been forgotten.

In this way, we can see that the psychosocial care network of the municipality of Maceió still has numerous challenges to be achieved, but also shows it is on the right path.

Moreover, the inclusion of undergraduates in these services has an amazing potential, as it creates a struggle to improve the single health system and to implement the principles of integrality, universality and equity.

♦ The challenge of Interdisciplinarity and Nursing Performance in the Psychosocial Network

Professional action focused on interdisciplinarity is not an easy task, it requires the willingness of all who are involved, as well as an extreme desire for change in the daily life of the service to which health actions and interprofessional relationships are developed.

Although it is not yet the ideal of the interdisciplinary action in all the health services in the psychosocial network, the experience made it possible to observe that there are several advances in the field of interpersonal relationships, since it is known that the success of health actions is also linked to the objectives professionals have, and what strategies they will use for this purpose.

Thus, working inter-professional relationships becomes an important feature to be approached since the academy, showing that the actual passage through the health services at our PET has brought about a significant change in the teaching-learning

process of the scholarship students of the program.

It is also worth mentioning the challenge of the work developed by nursing professionals, especially in some points of the psychosocial care network, such as the office on the street, in which nurses are needed to substantially overcome the challenges of daily work, often conducting pre-natal in the street or other environments not propitious, but that as a matter of urgency and a series of factors, such as access to the users in the health services, by these environments is impregnated with prejudices and paradigms towards this target population. Also, the materials to perform dressings, and other procedures, such as listening to fetal heart beats for lack of sounding were scarce, among other examples.

However, nursing has its work with a precise intention to provide quality assistance to the population, even if with several obstacles. Bond construction, welcoming, intersectoral work, integrality, valuing the subjectivity of the subject, etc. All these characteristics were observed in the work of the professional nurses in the various services to which the students come in direct contact.

Hence, it is clear that interdisciplinary action is an essential feature to work with people who use psychoactive substances, also lacking willpower as the common intention among the staff forming the health service in question, because, this way, there will be a guarantee of the resoluteness of the real demands of the target population, and consequently the implementation of SUS principles.

♦ Advances in Health Training: professional/personal experience

The experience lived in the PET-Redes de Atenção Psicossocial met its main objective, changing the standard of professional training in health, demonstrating that it is a fundamental strategy for teaching in health.

The direct approach to health services since graduation allowed me to get in contact with the knowledge of both potentialities and challenges that SUS still faces, guaranteeing a total modification of the world view of the students, stimulating a critical-reflexive formation of the different contexts in which were immersed to perform harm reduction actions for the population that used alcohol and other drugs.

Hence, this experience generated knowledge about teamwork in a transdisciplinary manner. Its importance in the possibility of improving health care for clients, families and communities in a

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situation of social vulnerability, assisted by the office staff on the street, in order to suit health practices with the principles and guidelines of SUS, to guarantee the rights to health in an integral and equitable way.

The experience lived in the Program for Education for Work for Health (PET-REDES), provided the sharing of knowledge among academics, tutors, preceptors, professionals and users of the services that make up the psychosocial care network of the municipality of Maceió, such as CAPS AD II, Teams of the Office on the Street, Hospital Escola Portugal Ramalho, HGE, and the intersectoral sectors, such as tutelary council, social assistance, tickets house, etc.

The experience contributed significantly to the academic training of the scholarship students, since it enabled the development of scientific research, and especially the knowledge of the operation of SUS services, as well as their challenges. Thus, PET-Saúde is a tool of fundamental importance in the training of critical professionals, capable of acting in the most diverse points of attention and making interconnections of both the network devices and the sectors that are external.

It is important to emphasize the relevance of the experience to ensure integrated work of teams of students and preceptors/tutors, then, ensuring a greater chance of qualification of future professionals differentiated.

Thus, the experience was not only beneficial for academics, but also for the community involved in health services, since the students actively participated in the work process in these health care devices to the population, contributing to a greater efficiency of attention and quality of the assistance. However, we must not fail to show that the SUS as a whole has numerous challenges to be overcome, such as precariousness of services and lack of professionals in the process, which leads to strikes, claims for delayed payment of salaries to contractors, lack of safe transportation, the knowledge of all the health professionals of the various points of the care network, as well as their work, lack of commitment of some professionals, among other things. So, there are some questions: Where was the theory exposed in the SUS legislation, in the codes of ethics of the professions? How do we end up with so much lack of co-responsibility, lack of commitment for the other, for the well-being of the other? I know that changing the system is a long process, but are we doing our part? Are we struggling to transform SUS?

Of course, we must continue to insist on making a difference, in being differentiated professionals, having co-responsibility to change the imposed reality, in order to guarantee the implementation of SUS principles, to ensure the rights and duties of ourselves and the entire Brazilian population.

CONCLUSION

The experience lived in the PET-Rede de Atenção Psicossocial has allowed the collaborative construction of personal and professional inner knowledge, generating a deep respect for the improvement necessities of some health services, but also to verify the existence of nuances, hitherto unnoticed, about the different realities existing in the contexts of life and subjectivity that we experience in the health services that we have been engaged in.

Thus, the study contributed to the expressive sharing of knowledge and experiences contributing significantly to the formation of critical and reflective professionals, knowledgeable of the health services, where they will be their fields of work in the future.

It also showed the relevance of interdisciplinary and intersectoral work in health, updating the precepts of universality, integrality and equity, as well as social control, decentralization, regionalization necessary for the SUS to function in order to meet the demands of the population, and generating positive health indicators and quality care.

Therefore, the experience produced relations between PET-Health academics, preceptors/tutors, clients, family members and the community itself that are linked in some way to the treatment of users of crack, alcohol and other drugs in the psychosocial care network.

In this manner, we can not deny the relevance of this experience, since it guaranteed space for much learning and contributed to the future of SUS, hence, for the entire population. It will enable the formation of qualified professionals to act and fight to heal the problems, seek to solve the challenges and to engage more and more to make SUS more just and egalitarian.

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REFERENCES

1. Brasil. Constituição (1988). Constituição da República Federativa do Brasil. Brasília - DF; 1988.
2. Brasil. Lei n. 8.142, de 28 de dezembro de 1990. Dispõe sobre a participação da comunidade na gestão do Sistema Único de Saúde (SUS) e sobre as transferências intergovernamentais de recursos financeiros na área da saúde e dá outras providências. *Diário Oficial da União* 1990; 28 dez.
3. Brasil. Lei n. 8.080, de 19 de setembro de 1990. Dispõe sobre as condições para a promoção, proteção e recuperação da saúde, a organização e o funcionamento dos serviços correspondentes e dá outras providências. *Diário Oficial da União* 1990; 19 set.
4. Ministério da Saúde (BR). A Política do Ministério da Saúde para a Atenção Integral a Usuários de Álcool e outras Drogas. Brasília - DF; 2004.
5. Mendes EV. As Redes de Atenção à Saúde. Organização Pan-Americana da Saúde. Organização Mundial da Saúde. Conselho Nacional de Secretários da Saúde. Brasília-DF. 2011; 2:1-554.
6. Brasil. Portaria nº 3.088, de 23 de dezembro de 2011. *Diário Oficial da República Federativa do Brasil*. Brasília-DF; 2011.
7. Ministério da Saúde (BR). Conheça a RAPS-rede de atenção Psicossocial. Brasília - DF; 2013.
8. Rodrigues ALL, Prata MS, Batalha TBS, Costa CLNA, Passos Neto IFP. Contribuições da extensão universitária na sociedade. *Cadernos de Graduação - Ciências Humanas e Sociais*. 2013 mar;1(16):141-148.

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