

KNOWLEDGE OF NURSES AT A PSYCHIATRIC HOSPITALIZATION UNIT OF A TEACHING HOSPITAL¹

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This study aims to identify the knowledge of the nurses in a psychiatric hospitalization unit at a university hospital. It is an exploratory, descriptive research with a qualitative approach, utilizing semistructured interviews. The nurses refer to a change in the assisting care, starting from their experience in the asylum mode and making references to the concepts of the psychosocial mode: integrality, welcoming, interdisciplinarity and interpersonal relationship. Integral and individual care, knowledge of the psychiatric syndromes and their treatment as well as the consideration of the subjectivity of the subject under psychiatric suffering are part of the knowledge that guides nursing actions in mental health.

DESCRIPTORS: mental health; psychiatric nursing; hospitals, university

SABERES DE LOS ENFERMEROS EN UNA UNIDAD DE INTERNACIÓN PSIQUIÁTRICA EN UN HOSPITAL UNIVERSITARIO

Este estudio tiene por objetivo identificar los saberes de los enfermeros en una unidad de internación psiquiátrica en un hospital universitario. Se trata de una investigación exploratoria, descriptiva, con aproximación cualitativa, utilizando la entrevista semi-estructurada. Los enfermeros refieren una transformación en el cuidado asistencial a partir de su experiencia en el modo asilar, haciendo referencias a las concepciones del modo psicosocial: integralidad, acogida, interdisciplinaridad y relación interpersonal. El cuidado integral e individual, el conocimiento de los síndromes psiquiátricos y su tratamiento y la consideración de la subjetividad del individuo bajo sufrimiento psíquico son formas del saber que orientan las acciones de la enfermería en salud mental.

DESCRIPTORES: salud mental; enfermería psiquiátrica; hospitales universitarios

SABERES DOS ENFERMEIROS EM UMA UNIDADE DE INTERNAÇÃO PSIQUIÁTRICA DE UM HOSPITAL UNIVERSITÁRIO

Este estudo tem o objetivo de identificar os saberes dos enfermeiros em uma unidade de internação psiquiátrica em um hospital universitário. Trata-se de pesquisa exploratório-descritiva, com abordagem qualitativa, utilizando a entrevista semi-estruturada. Os enfermeiros relatam transformação no cuidado assistencial a partir de sua experiência no modo asilar, fazendo referências às concepções do modo psicossocial: integralidade, acolhimento, interdisciplinaridade e relacionamento interpessoal. O cuidado integral e individual, o conhecimento sobre as síndromes psiquiátricas e seu tratamento e a consideração da subjetividade do indivíduo, em sofrimento psíquico, são saberes que norteiam as ações de enfermagem em saúde mental.

DESCRIPTORES: saúde mental; enfermagem psiquiátrica; hospitais universitários

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INTRODUCTION

Mental health nursing care has been going through a challenging process: the experience of a change in paradigm from the asylum to the psychosocial model. This transformation started in Brazil in the 1970s, amid a political movement called Psychiatric Reform, which aims to implement extra-hospital services, focusing on care delivery to the subject in the territory, aiming to overcome the conception of the asylum as a space of segregation, restraint and isolation.

In this new context, the psychosocial model, recommended by the Psychiatric Reform, focuses on the subject as a being full of subjectivities, and is concerned with this person's daily life, family, school, church, club and others. Consequently, the nurses' actions must aim to deliver care that considers the individual's totality: consider him(er) as a person full of feelings, belonging to (and having) a family, inserted in a social context that cannot be discarded, but rather used in favor of his(er) treatment.

In view of this new, amplified conception of care, we aim to discover psychiatric nurses' body of knowledge, understood as these professionals' knowledge and conceptions about their work. Knowledge is defined as knowing, being instructed, having information and possessing knowledge⁽¹⁾.

In the asylum context, the nurse's role was, in most cases, that of assistant, observing and recording the patients' behavior, that is, they were responsible for watching the "crazy people", watch and reprehending the mentally ill⁽²⁾. They were also in charge of direct care: maintaining hygiene and comfort, administering medication, restraint, and taking care of the patient's clothing and feeding.

Currently, the nurse uses the formation of a therapeutic bond as one of the main work tools. This process of help to the psychiatric subject implies theoretical knowledge associated to the nurse's capacity of communication and self knowledge, which demands some basic requirements: capacity to love, empathy, technical, scientific capacity and critical awareness⁽²⁾.

Concomitantly to the change of the psychiatric nurse's functions, the population's demands also changed, which made nurses assume new roles and impose themselves as qualified professionals to perform functions of the highest care and scientific level⁽³⁾.

Thus the objective of this study is to identify the nurses' knowledge at a psychiatric hospitalization unit of a teaching hospital.

METHODOLOGY

This is an exploratory-descriptive study with a qualitative approach. The research was performed at a university hospital with eight nurses who work at the psychiatric hospitalization unit. It is an intentional sample, composed by inviting subjects. The instrument used for data collection was the semistructured interview. Data analysis was divided in three stages according to Minayo⁽⁴⁾: data ordination, data classification and final analysis. This study was approved by the Institutional Review Board, project 05-331, on August 25th 2005.

NURSES' KNOWLEDGE

The interviewees' knowledge appoints knowledge of the psychosocial model as opposed to the asylum model⁽⁵⁾. The latter reduces clinical care to a classification of insanity as a disease that must be treated, cured and controlled. In this sense, the psychosocial model proposes the expansion of the insanity conception, perceiving the subject in his(er) individuality and subjectivity, inserted in the social context, being valued as a citizen with rights and obligations in society⁽⁵⁾. Regarding the paradigm change, the interviewees visualize knowledge of this transformation.

I had previous experiences in which the patient's rights were not met. He was seen as that old thing of a mentally ill person, the crazy patient. And that here, the psychiatric patient is a patient who is in mental pain and needs care and help [...] So, we have to welcome him (N1).

The transformation of the focus on the mental disease is observed, considering the existence of suffering. This report reveals knowledge about welcoming, bonding, responsibility and care contract, which are directives of integral care in Mental Health. Thus, attempts are made to consider health as a global condition, resulting from individual functioning and social relationships⁽⁶⁾.

The nurse-patient relationship must be characterized as a partnership that requires competence, social responsibility, interdisciplinary collaboration from the nurse and ethical-legal parameters⁽⁷⁾.

Here we are more nurses, more caregivers. We participate more in the patient's treatment in all senses. We talk to the family, exchange information, discuss with the medical team, meetings [...] The main psychiatric nursing tools, I think that is communication, empathy, and the professional's self knowledge (N2).

This report shows knowledge that recognizes the need for actions that require availability for care and listening. The care in health must be guided by new conceptions and, thus, the professionals have their actions oriented by an ideology of citizenship, ethics, humanization and integral care⁽⁸⁾. The interviewees are concerned with their self as a work tool. Based on this knowledge, the professional will know his(er) possibilities and limits. Self knowledge is the first step for a better understanding of the other. Perceiving one's own feelings, sensations and emotions implies realizing that the other's afflictions can also be one's own. Discovering the self can be used as an extra resource to treat the other⁽⁹⁾.

Another issue presented by the interviewees refers to the knowledge of psychiatric syndromes, their care and treatment, emphasizing the psychopathological conditions that enabled the nurse for quality care.

The knowledge of pathology, symptomatology, treatment, medication, adverse effects. I think that the knowledge of symptoms, which serves as a good guide for care (E6).

This report is centered on the idea of what is normal and pathologic, focusing on the symptom, which explains the importance of this knowledge as necessary and valued. It is important for this professional to be able to link knowledge and the importance of the pathology that affects the subject⁽¹⁰⁾.

The interviewed nurses point to the importance of knowing, in which knowledge, due to its dynamic nature, transforms itself in the reality of care practice.

I try to keep myself updated, studying [...] We have to try to keep ourselves updated about theory, with new knowledge, a lot of reading. Be informed of the novelties so that we can help the patient (E3).

These professionals appoint seeking theoretical knowledge through study and reading, as a foundation for practical knowledge, as extremely important for their knowledge, guiding their professional practice.

FINAL CONSIDERATIONS

The interviewees report on a transformation in assistential care, based on their experience in the asylum method, referring to conceptions of the psychosocial method: integrality, welcoming, interdisciplinary, interlocution, self knowledge and suffering of the singular subject. Other knowledge they value relates to psychiatric syndromes, their care and treatment.

This knowledge indicates the nurses' technical and scientific knowledge. However, their political capacity must be improved, as a space for participation. Nursing must seek a better articulation between the movements and transformations in psychiatric care. Criticizing and debating allow for thinking and rethinking psychiatric nursing.

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