

THE NURSING OF PSYCHOSOCIAL CARE CENTERS IN A NORTHEAST CAPITAL OF BRAZIL

A ENFERMAGEM DOS CENTROS DE ATENÇÃO PSICOSSOCIAL DE UMA CAPITAL DO NORDESTE DO BRASIL

LA ENFERMERÍA DE LOS CENTROS DE ATENCIÓN PSICOSSOCIAL DE UN CAPITAL DEL NORDESTE DE BRASIL

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ABSTRACT

Objective: to describe the characteristics of nursing that works in the Psychosocial Care Centers of a capital city in northeastern Brazil. **Methodology:** This is a descriptive study with a quantitative approach. The study was carried out in five CAPS in Maceió-AL and the subjects were nursing workers. A structured questionnaire and the grouped data were applied and analyzed by simple statistics, by percentage. **Results:** Of the 41 nursing workers who participated in the present study, 12 were nursing auxiliaries; 11 were in charge of nursing technicians; and 18 the position of nurses. Of these, 88 declared themselves women and 12% declared themselves men. The study still provides information regarding the training, job training, and activities performed by these professionals. **Conclusion:** It was perceived that the professionals have specific characteristics and perform the primary functions of the actions in the Centers of Psychosocial Attention of Maceió.

Keywords: Nursing; Mental Health; Mental Health Services.

RESUMO

Objetivo: descrever as características da enfermagem que atua nos Centros de Atenção Psicossocial de uma capital do nordeste do Brasil. **Método:** Trata-se de um estudo descritivo, de abordagem quantitativa, realizado em cinco CAPS de Maceió-AL, tendo como sujeitos os trabalhadores de enfermagem. Foi aplicado questionário estruturado e os dados agrupados e analisados por estatística simples, por meio de porcentagem. **Resultados:** Dos 41 trabalhadores de enfermagem que participaram do presente estudo, 12 exerciam o cargo de auxiliar de enfermagem; 11 exerciam o cargo de técnico de enfermagem e 18, o cargo de enfermeiro. Destes, 88% eram mulheres e 12% homens. O estudo ainda traz informações referentes à formação, trabalho, capacitação e atividades desempenhadas por esses profissionais. **Conclusão:** Percebeu-se que os profissionais possuem características específicas e desempenham funções primordiais na realização das ações nos Centros de Atenção Psicossocial de Maceió.

Descritores: Enfermagem; Saúde Mental; Serviços de Saúde Mental.

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RESUMEN

Objetivo: describir las características de la enfermería que actúa en los Centros de Atención Psicosocial de una capital del nordeste de Brasil. **Metodología:** Se trata de un estudio descriptivo de abordaje cuantitativo. El estudio ocurrió en cinco CAPS de Maceió-AL y los sujetos fueron los trabajadores de enfermería. Se aplicó cuestionario estructurado y los datos agrupados y analizado por estadística simple, a través de porcentaje. **Resultados:** De los 41 trabajadores de enfermería que participaron del presente estudio, 12 ejercían el cargo de auxiliares de enfermería; 11 ejercían el cargo de técnicos de enfermería; y 18 el cargo de enfermeros. De ellos, el 88% se declararon mujeres y el 12% se declararon hombres. El estudio aún trascende informaciones referentes a la formación, trabajo capacitación, y actividades desempeñadas por esos profesionales. **Conclusión:** Se percibió que los profesionales poseen características específicas y desempeñan funciones primordiales la realización de las acciones en los Centros de Atención Psicosocial de Maceió

Descriptores: Enfermería; Salud Mental; Servicios de Salud Mental.

INTRODUCTION

Nursing is a profession characterized by the health care of the individuals, families and communities. It is present in all stages and situations of life, considering that it has an immeasurable value.¹ It is also present at the moments in which people face situations of extreme mental distress, whether in the home or in the health services.²

For many years, the nursing care to person in mental distress was determined by the psychiatric hospitals, playing a role quite characteristic at the time, which was to assist psychiatrists in procedures and treatments, as well as carry out the administration of drugs, surveillance and management of patients, and remained so for many years.^{3,4}

With the changes of mental health policies and the emergence of new services, such as the Psychosocial Care Center, nursing also had to rethink their practices,

including strategies that go beyond those usually performed, in order to contribute to the new model of care, focused on integration of the mental suffering individuals in the family, community and work.¹

The main existing mental health service in the Unified Health System (SUS) is the Center for Psychosocial Care (CAPS). These are mental health services with specialized team to assist people in mental distress. It arose during the process of Psychiatric Reform and carry out activities that contribute to the psychosocial rehabilitation of these individuals.⁵

Nursing professionals in medium and higher level, make up the minimum staff to work in CAPS in all of its 07 existing modalities: CAPS I, CAPS II, CAPS III, CAPS i II, CAPS ad II, CAPS ad III and CAPS ad IV. These professionals are a requirement of the Ministry of Health to

play roles and contribute significantly in mental health care in Brazil.⁶

Nurses, technicians or nursing assistants make up the professional staff working in CAPS and perform specific activities, such as nursing consultation, the systematization of nursing care, medication administration, conducting dressings, among others, which are their competence in health care, including the care centers.

In addition, they develop other activities in conjunction with the other professionals of the service, such as home visits, therapeutic workshops, reception and activities outside the service with users, also providing an interdisciplinary work, which is a strong point of CAPS, which in Brazil had considerable growth, the same as the number of nurses working in these services.^{7,8}

With all the changes that have existed over the years in the process of care in mental health, nursing traveled this path and still remains active, which leads us to realize the importance of these professionals.² Thus, this study aims to describe the characteristics of the training, working aspects and activities developed by the nursing professionals who are in the psychosocial Care Centers in a northeast capital of Brazil.

METHOD

This is a descriptive study with a quantitative approach. Descriptive studies are best suited for researches that are intended to bring features or profiling of individuals, verifying the relationship among the variables in the quantitative approaches.⁹

The study took place in five CAPS in a northeastern capital of Brazil, linked to the Municipal Department of Health. The study subjects were the nursing professionals, comprising a population of 56 workers. The inclusion criterion established was being part of the CAPS nursing staff and the exclusion criteria were to be on maternity leave, sick leave or on vacation.

For this research it was established the census sample that is chosen when one wants to investigate the whole population or a universe in particular.¹⁰ Thus, the participants were 41 of the total of 56 nursing professionals, who work in the municipal CAPS, where the remaining 15 did not enter in the sample, because they met the exclusion criteria (to be on vacation and maternity or medical leave) or do not wish to participate. The professionals were invited to participate in the survey in the CAPS themselves, where they were working, through a verbal invitation, where the researcher provided the necessary information about the conduct of the study and its stages.

The Informed Consent was given for the collection of signatures, based on the guidelines of Resolution CNS/MS 466/12. This study was submitted to the Research Ethics Committee and had its approval by CAAE: 84827417.3.0000.5011.

Data collection took place in July and August 2018, having been used three specific structured questionnaires, developed by the authors, one for each nursing professional category of the CAPS (Nurse, Technical and Nursing Assistant). It was not applied prior test questionnaire and peer review. Each questionnaire contained questions regarding sociodemographic

information, vocational training, labor aspects and activities developed. Data were analyzed and arranged descriptively by simple statistics, through percentages.

RESULTS

Of the 41 nursing workers who participated in this study, 12 were nursing assistants; 11 were nursing technicians and 18 nurses, as is shown in Table 1. Of these, 88% (36 professionals) reported being women and 12% (05 professionals) declared being men.

Table 1 - Number and proportion of CAPS nursing workers by professional category in exercise in SMS. Brazil, in 2018.

Professional category	n	%
Nursing assistant	12	29
Nursing technician	11	27
Nurse	18	44
Total	41	100

Source: Research data, 2018.

All workers have Brazilian nationality, with 44% (18) from the capital, 29% (12) from other cities in the state; 17% (07) from other northeastern states; and 10% (04) natural from other regions of the country. Of these, 85% (35) live in the capital; 12% (05) live in other municipalities of the state and 2% (01) in another northeastern state.

About the time of workers training, in their respective categories, in CAPS, 90% (37) graduated for over 05 years; 5%

(02) 04 years ago; 2% (01) 05 years ago and 2% (01) less than 01 year.

Still regarding training, 54% (22) graduated in another higher education course; 44% (18) do not have other types of training and 2% (01) did not answer. Of those who had other training, 73% (16) are assistants or nursing technicians and 27% (06) are nurses. Of these, 50% (11) have training in other course in health; 36% (08) other course in human area; 5% (01) having

two trainings, in health and human areas; and 9% (02) did not answer.

It was found that 51% (21) do not participate in continuing education program in health; 37% (15) participate; and 12% (05) declined to answer.

Most nurses surveyed never worked in Psychiatric Hospitals, represented by 88% (36). Only 12% (05) have worked in institutional psychiatry services.

Regarding the type of employment relationship with the CAPS, all of them work in a regime of 30 hours per week, with 80% (33) being effective, statutory servers and 20% (08) temporary servers under contract. Of the workers with temporary contracts, all of them are nurses.

When analyzed the work time, the result was quite varied. Most workers, 41% (17) are in CAPS for over 05 years; 20% (08) are in CAPS for 04 years; 20% (08) 03

years; 7% (03) 05 years; 5% (02) 02 years; 5% (02) 06 months and 2% (01) for 01 year.

When asked about the decision to work in CAPS, 51% (21) answered they have chosen for the service; 34% (14) reported they have not chosen for the service and 15% (06) declined to answer.

About the beginning of activities in services, 73% (30) reported they have not received any training to work in CAPS; 20% (08) received at least one training and 7% (03) did not want to respond.

Concerning the frequency of training and professional training received by nurses to work in CAPS, the answers were quite diverse. A portion of the workers did not receive any training since they joined the service, and a good portion chose not to answer this question, as shown in Table 2.

Table 2- Training Frequency and Professional Training received by the Professional Nursing to perform activities in CAPS. Brazil, in 2018.

Training Frequency and Professional Training	n	%
Annually	8	20
Semiannually	1	2
Quarterly	1	2
Monthly	3	7
Weekly	1	2
I have not received since I started working on CAPS	13	32
I do not want to answer	14	34
Total	41	100

Source: Research data, 2018.

About the stimulus for training at work, 66% (27) reported they do not receive

incentives to train in the area; 15% (06) said they receive incentives; 20% (08) declined to answer the question.

The activities most performed by the CAPS nursing teams are outlined in Table 1

and show the answers that appeared in the questionnaires of all respondents.

Chart 1- Activities most undertaken by the nursing staff and nurses of CAPS. Brazil, 2018.

Nursing Team activities	Nurses' activities
Drug Administration	Supervision of nursing staff
Simple dressings	Nursing consultation
Anthropometric measurements	Therapeutic groups
Verification of vital signs	Home visits
Capillary blood glucose test (HGT)	Singular Therapeutic Project
Systematization of Nursing Assistance (SAE)	Health Education

Source: Research data, 2018.

When asked if they like work, 76% (31) responded they like work a lot; 20% (08) said they do not like much; 2% (01) reported they like the work; and 2% (01) said they do not like the work.

With respect to disconnect from work in CAPS; 56% (23) do not think to disconnect; 37% (15) sometimes they feel like disconnecting; 5% (02) they feel like disconnecting from CAPS and 2% (01) did not answer.

DISCUSSION

One can find more women as professional nursing than men in health services, as in the CAPS. A survey conducted by the agreement of the Brazil's Federal Council of Nursing (COFEN) and the Oswaldo Cruz Foundation (Fiocruz) on the profile of nursing in Brazil reports that

in the state of Alagoas 88% of the professionals are women, corroborating the proportion of this study, in which 88% of the nursing staff of the capital CAPS are women.¹¹

This significant presence of women in the profession is history, as nursing is considered an occupation initially held by the nuns in charities services for the poor and excluded from society, which led to the feminization of the profession, which until years ago was practiced exclusively by women. This has been changing recently, given the need and requirements of the labor market.¹²

A survey organized by Machado and collaborators¹¹ reports that 75% of the professionals are natural from the state where the study was conducted, which is similar to the 73% of the nursing

professionals of the CAPS of the city that are also natural from the state. About the training time, the study shows that most nurses have their training, be it higher education or technical secondary education, for more than five years, also corroborating this study.

Most nursing staff does not participate in continuing education programs in health. This is due to several factors; however, depends primarily on the initiative of the Municipal and State Secretariats, respectively, to supply and provide opportunities for the workers.¹³

CAPS are health services relatively new, that started in mid-2000, remaining in expansion throughout Brazil, which implies that most of the nursing professionals who have provided assistance to people in mental distress has worked in psychiatric hospitals during the initial period of the Psychiatric Reform. The latest courses are already forming nursing professionals to work in the substitutive services.¹⁴

CAPS are public health services and that require public servants to develop the activities proposed. When the permanent workforce is not sufficient for the operation, municipalities can hire or have selection for the acquisition of human resources to perform specific roles in health services, which is allowed by SUS.¹⁵ However, the fact that there are professionals who temporarily provide services in public

health increases the turnover of workers in services. Nursing is considered, in some studies, the professional category that suffers most rotations in CAPS of the most capitals that justifies the little working time of half of the professionals in this study.¹⁶

The area of mental health, particularly the Psychosocial Care, is very specific and has little demand by the nursing professionals, maybe because of the job complexity or lack of personal professional interest. To work in mental health, it takes at least little affinity with the work process, but some studies show that it is not what happens. Many professionals go to work in mental health services, like the CAPS, because it is the opportunity that appeared at the time of insertion of the work market.¹⁷

Training to work in CAPS deserves attention because it is not just something exclusive to nursing professionals. Most workers employed in mental health services do not receive training or qualification to start their assignments. It impacts greatly on the results of the psychosocial rehabilitation process that the CAPS advocate. Direct assistance to people in mental distress becomes significantly damaged. Training during graduation is often not enough so that workers understand how to deal with mental health. There are some professions that are closer during training on the issues that guide the psychosocial care; others end

up having to learn when working in the service.^{5,18}

A little training for work in the mental health cause some anxiety in the professionals and this often generates a feeling of frustration, also contributing to fatigue at work. However, this is not enough for workers to leave work in CAPS, as shown in this study, in which more than half of the professionals do not think about leaving work.⁸

It is common for nursing assistants and technicians to have higher education level. Most seek training in health and biological areas, quite often attending a nursing undergraduation course or even looking for another vocational training. Some are trained in the humanities, moving away from health. What makes the nursing assistants and technicians to pursue a degree in higher education is a better place in the labor market; however, many of them conciliate work in both formations, acting as a technician nursing professionals, or as nurses and even as professionals from other health categories and distinct areas.¹²

Nursing professionals play very characteristic duties of the profession, such as administering medication, dressings, checking vital signs, capillary blood glucose test, in addition to home visits and participation in workshops and therapeutic groups. Nurses are meant to nursing consultations, embracement, PTS

construction of the service user, health education, preparation of workshops and therapeutic groups, among others. Although nurses care for specific nursing tasks, most develop important activities in the psychosocial rehabilitation process of the CAPS users, either at greater or lower frequency.¹⁹

Nurses also play an important role in therapeutic groups and workshops held by CAPS. Many of these professionals do not only participate in these activities, but help in building, preferably happening collectively with professionals from other higher education training; but nursing also creates groups with CAPS users.²⁰

Another activity fairly carried out in CAPS is the construction of users PTS, in which nurses also contribute. The PTS that is applied at CAPS is a group of therapeutic actions to be developed by the users over the week, aiming at providing psychosocial rehabilitation of these subjects. The construction is an activity performed by the higher education level professionals, but nothing prevents other nursing team members to collaborate.¹⁴

The use of the Systematization of Nursing Care and Nursing consultation in CAPS are not very common activities; however, when used by nurses, promote organization in the activities of the nursing team and also increase the contributions to

the overall health of the subjects beyond that expected in conventional activities.¹⁶

Working the nursing consultation in CAPS is a challenge for most nurses. Many services do not have private rooms and when they exist, they are shared with most professionals where the therapeutic groups are held, which ends up competing with the consultations of doctors, psychologists and therapists. When the nurse does not appropriate this activity and shows its importance to the multidisciplinary team, the consultations end up being restricted only to embracement, which does not understand the reality of the nursing consultation.⁷

In addition to these activities presented, one should not forget the home visits, which are opportunities for the professionals to monitor and know the reality of the CAPS users. Home visits are most used by the teams of the Family Health Strategy, but were also quite incorporated in the work process of CAPS, since most of the users do not have sufficient autonomy to go to the service. Many of them are brought by the cars of the health secretariat. While some of these users have some weakness or are unable to leave their homes, teams are organized and take turns to perform service in the home, which promotes greater comprehensiveness and universality of the services.⁸

All these questions that guide the nursing characteristics and tasks in CAPS help to better understand the process of work in those services, mainly by the nursing staff that are important professionals to care for people in mental distress. However, it is necessary to deepen subjective issues involving the nursing working process in mental health to know whether the information presented here interfere positively or negatively in the psychosocial rehabilitation of service users.³

The main limitations of the study are related to its temporal and spatial clippings, and may not be reference for nursing professionals from other cities in the Northeast and Brazil. The study sample, in spite of being based on census, has not covered the minimum number of participants to apply any statistical test to serve as a reference.

CONCLUSION

This study sought to identify the characteristics of the nursing that works in the Psychosocial Care Centers of Maceió-AL, then, bringing issues regarding sociodemographic information, training of these professionals, aspects related to work in the services and the main activities developed.

It was noticed that most professionals were women and that most are

effective public servants, who have their training for over five years. Most are working on CAPS for more than five years and have never received training for work in the services, which may compromise the effectiveness of the psychosocial rehabilitation. All of them work in a regime of 30 hours per week, regardless of the CAPS in which they work.

The activities most performed by the nursing teams are: drugs administration, simple dressings, checking vital signs, capillary blood glucose test (HGT), home visits and participation in groups and therapeutic workshops, and exclusively to nurses: supervision of nursing staff, participation and development of therapeutic groups, construction of users' PTS, nursing consultation, embracement and home visits.

It was noticed that the nurses are essential to the accomplishment of the actions in the Psychosocial Care Centers of Maceió, given that some of the activities performed are specific duties of their work process. One cannot think the mental health services without the collaboration of these professionals, from the administrative matters to the psychosocial rehabilitation process of people in mental distress that are supported on these units.

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