

Nursing and the humanization of mental health care: perspectives and challenges

Enfermagem e a humanização da assistência em saúde mental: perspectivas e desafios

Enfermería y humanización de la salud mental: perspectivas y desafíos

RESUMO

Objetivo: Este estudo objetivou descrever a literatura recente sobre humanização da assistência de enfermagem na saúde mental. Método: trata-se de uma revisão integrativa de literatura realizada nas bases de dados Biblioteca Virtual de Saúde (BVS) e Web of Science em busca de publicações datadas entre 2011 e 2021. Resultados: Foram identificados oito artigos. As ações principais de humanização de enfermagem foram: Desenvolver escuta terapêutica e empática; estabelecer relação terapêutica; participar do reestabelecimento de cidadania e autonomia; e considerar as necessidades do núcleo familiar. As principais barreiras para a humanização da assistência identificadas foram: Prática automatizada e tecnicista; rede de atenção em saúde mental desarticulada; uso de violência; sobrecarga de trabalho; e preconceito. Conclusão: Considera-se que a enfermagem tem papel importante na construção do cuidado humanizado à pessoa com demandas de saúde mental e este cuidado deve ser construído com base na luta antimanicomial e no respeito à condição humana.

DESCRIPTORIOS: Enfermagem; Saúde Mental; Humanização da Assistência

ABSTRACT

Objective: This study aimed to describe recent literature on the humanization of nursing care in mental health. Method: this is an integrative literature review carried out in the Biblioteca Virtual de Saúde (BVS) and Web of Science databases in search of publications dated between 2011 and 2021. Results: Eight articles were identified. The main actions of humanization in nursing were: Develop therapeutic and empathic listening; establish a therapeutic relationship; participate in the reestablishment of citizenship and autonomy; and consider the needs of the household. The main barriers to the humanization of care identified were: Automated and technicist practice; disjointed mental health care network; use of violence; work overload; and prejudice. Conclusion: It is considered that nursing has an important role in the construction of humanized care for people with mental health demands and this care should be built based on the anti-asylum fight and respect for the human condition.

DESCRIPTORS: Nursing; Mental health; Humanization of Assistance.

RESUMEN

Objetivo: Este estudio tuvo como objetivo describir la literatura reciente sobre la humanización del cuidado de enfermería en salud mental. Método: se trata de una revisión integradora de la literatura realizada en las bases de datos Biblioteca Virtual de Saúde (BVS) y Web of Science en busca de publicaciones fechadas entre 2011 y 2021. Resultados: Se identificaron ocho artículos. Las principales acciones de humanización en enfermería fueron: la escucha terapéutica y empática; establecer relación terapéutica; participar en el restablecimiento de la autonomía; y considere las necesidades del hogar. Las principales barreras identificadas fueron: Práctica automatizada y tecnicista; red desarticulada de atención de salud mental; uso de la violencia; sobrecarga de trabajo; y prejuicio. Conclusión: Se considera que la enfermería tiene un papel importante en la construcción de un cuidado humanizado para pacientes de salud mental y este cuidado debe construirse a partir del respeto a la condición humana.

DESCRIPTORIOS: Enfermería; Salud mental; Humanización de la asistencia.

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INTRODUCTION

Nursing in the field of mental health traced historical paths of coercion and dissemination of practices that restrict the freedom of people with mental health demands. Literature brings several examples of these practices and how nursing had the function of execution and control, not always with therapeutic purposes or with therapeutic planning aimed at improving and independent of these individuals. 1-3

Literature provides several examples of how mental health has weaknesses in terms of the humanization of care: considering the estimate that there are currently more than 36 thousand psychiatric beds destined for hospitalization in Brazil; 4 the quality of services provided by the Psychosocial Care Network; 5 resolutions of the Federal Nursing Council in search of more humanized techniques and care; 6,7 or the scientific interest in studying psychiatric reform from the perspective of nursing care. 8

Since 2001, the psychiatric reform began in Brazil, led by Law 10,216, which marked the gradual reduction of beds in psychiatric hospitals and asylums across the country and promoted legislation on basic rights for people in need of mental health care. Even after many years of anti-asylum struggle, there are still many challenges to be overcome and barriers to be overcome, especially for nursing. 3

One of these barriers is the humanization of care in these care spaces, as nursing is often assigned to manage clients in crisis and is responsible for more direct care to them related to self-care, food and hygiene. 1-3 Furthermore, there is a lack of scientific research in the field of mental health nursing as a whole, as pointed out by some recent integrative reviews. 9-11

Based on the above, the guiding question was formulated: “What are the scien-

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tific productions of nursing on the humanization of mental health care from 2011 to 2021?”. In search of answers to this question, this study aimed to describe the recent literature on the humanization of nursing care in mental health and as specific objectives: a) Identify the recent literature on the humanization of nursing care in mental health; b) List humanization actions that nurses can perform in mental health care; and c) Mention the barriers to humanization in nursing care in mental health.

METHOD

Integrative literature review regarding scientific production on the proposed theme. This method is developed in six distinct phases, carried out in the research in question in the following order: identification of the topic and elaboration of the research question, sampling or literature search, data collection, critical analysis of the included studies, interpretation and discussion of results and presentation of the knowledge review/synthesis. 12

The first step is to define the research problem, hypothesis and guiding question; followed by the identification of the databases to be consulted, descriptors based on the Health Sciences Descriptors (DECS) and inclusion and exclusion criteria; soon after, a search is carried out in the databases in search of publications that fit the established criteria, this step also includes the categorization of studies according to pre-established subject/thematic criteria. 12

The steps corresponding to the critical analysis of the studies and the interpretation and discussion of results are carried out based on the identification of overlapping issues and the analysis of divergences; discussion is also held based on recent literature to bring new perspectives to the topic. Finally, the synthesis of the analyzes is organized and arranged in the format of

tables, graphs and systematized discussions.¹²

The selection of articles took place in the first half of September 2021. During this period, articles published and indexed in the Web of Science and Virtual Health Library (VHL) databases were selected using the following descriptors: “enfermagem”, “saúde mental” and “humanização”; or its equivalents in English “nursing”, “mental health” and “humanization”. Inclusion criteria were: Original articles; from a qualitative or quantitative exploratory field research method; available in full in national or international journals; published in Portuguese, English, French or Spanish from 2011 to 2021. Studies in which other professionals from the multidisciplinary team participated in data collection without specifying nurses separately in the results were not included.

To define the sample, the titles and general information of the articles were read in the indexing bases in search of descriptors and inclusion criteria, preliminarily. The second stage consisted of reading the abstracts in search of inadequacies to the criteria presented and, finally, the full text was read. After all steps, the final sample of articles for analysis was defined. All steps were performed by two researchers and the samples were compared to define the final quantity of publications.

For data analysis, the Content Analysis method was used, which advocates the organization of information into distinct or related categories, which allow the analysis of the identified content. This classification takes place in three phases: Pre-analysis, material exploration and treatment of results.¹³

For the treatment of the results, the contents of the publications were analyzed in search of coincidences and divergences between the information found, and it was possible to make considerations about the perspectives and challenges that nurses need to face in the humanization of their mental health care.

RESULTS

A total of eight articles were found according to the reported criteria. On the VHL platform, the first search resulted in 96 results, of which only six met the criteria chosen for the selection of articles. On the Web of Science platform, the first search resulted in 16 results, ending with three articles that were included in the criteria. After searching for repeated publications in the chosen samples, one work was excluded, ending up with a total of eight articles participating in the final sample. Information

regarding the publications analyzed can be seen in table 01.

As for the method of articles, seven of the eight found used the qualitative exploratory approach 14-20 and one used a descriptive observational method. 21 The most identified humanization actions were: Develop therapeutic and empathic listening; 14,15,17-20 establish a therapeutic relationship; 14,15,17,18,21 participate in the restoration of citizenship and autonomy; 14,17,18,21 and consider the needs of the household. 14,18

About the identified barriers, the

Table 01: Identification of articles on the humanization of nursing care in mental health published between the years 2011 to 2021.

DATABASE	AUTHOR	YEAR	TITLE
BVS	Oliveira LC, Silva RAR, Medeiros MN et al.	2015	Humanized care: discovering possibilities in mental health nursing practice
BVS	Lima GZ, Feltrin JÁ, Rodrigues JJ et al.	2016	Perception of nursing students on mental health home-care: a qualitative approach
BVS	Moll MF, Mendes AC, Ventura CAA et al.	2016	Nursing care and the exercise of human rights: An analysis based on reality in Portugal
BVS	Oliveira LC, Menezes HF, Oliveira RL et al.	2018	Mobile care for psychiatric urgencies and emergencies: perception of nursing workers
BVS	Guimarães JCS, Santos BL, Aperi-bense PGGG et al.	2018	Electroconvulsive therapy: historical construction of nursing care [1989-2002]
BVS	Lima DWC, Paixão AKR, Bezerra KP et al.	2021	Humanization in mental health care: nurses' understandings
Web of Science	Thifault MC, Kirouac L	2019	Les infirmières psychiatriques témoins d'un mouvement d'humanisation au cours des premières et deuxièmes vagues de la désinstitutionnalisation au Québec (1960-1990)
Web of Science	Silva PMC, Costa NF, Barros DRRE et al.	2019	Mental health in primary care: possibilities and weaknesses of reception

Source: The authors

following can be listed: Automated nursing practice based on techniques; 15-18 lack of an integrated and articulated mental health care network; 15,20 use of violence in assistance; 15,16 work overload in nursing; 19 and prejudice against people who have mental health demands. 14

DISCUSSION

Other integrative reviews with the same theme also found results similar to those described, both because most of the articles identified use the exploratory qualitative approach for data collection and the emphasis on the development of new approaches in mental health, with respect to the principles of psychiatric reform and the establishment of the therapeutic relationship and encouragement of the user's autonomy. 9-11

The integration of the Psychosocial Care Network was a relevant finding that coincided with another integrative review that sought to identify multiprofessional humanized care and identified the Psychosocial Care Centers (CAPS - Centros de Atenção Psicossociais) as tools for humanized community care and strong allies in the development of citizenship and autonomy for both its users and their families. 22

Regarding the challenges, few reviews sought to explicitly identify the barriers to the humanization of the process, but it is common to identify reports on the automation of little therapeutic nursing routines, which do not prioritize the development of comprehensive care and the person's autonomy. 9,11

The results found related to humanized nursing actions are already recommended in the specialized literature in the area. Establishing a therapeutic relationship, performing empathic and specialized listening, family care and encouraging the subject's autonomy are frequently mentioned in the development of nursing care plans in mental health. 1-3

This finding in the specialized literature contrasts with the result found in the current research on barriers to the development of humanized care, since the tech-

nicist-automated practice and the use of violence in therapy should not be present issues if nurses were following the recommendations for humanized care already recommended.

This discussion raises issues related to the training and continuing education of

practices. humanized and asylums, which can be a cause of the continuity of poorly humanized and asylum practices. 23,24

Another finding that is identified in recent literature is the overload of nursing work and how this can be an aggravating factor for the development of dehumanized practices in care, 25,26 including in the area of mental health itself, a space in which the professional also needs to deal with specific inter and intrapersonal issues such as the difficulty of managing mental health services and the very concept of working with "madness". 27

The difficulties mentioned in the paragraph above also include the lack of integration between services in the Psychosocial Care Network, one of the findings of this research regarding barriers to humanization actions. This specific issue is already a difficulty reported for decades for the adequate comprehensiveness of the service, and it is an issue that has emerged and deserves greater attention since the year 2016, in which there are clear setbacks in public policies in mental health that distance from the comprehensive care, community and anti-asylum. 28

CONCLUSION

Humanized care in nursing in the area of mental health is a topic of great importance given the history of psychiatry and the role that this class has already played in asylums. Therefore, care must always be taken, both clinical and scientific investment, to develop technologies and investigations on the subject.

The current study has its potential in the development of a topic of great relevance to the field of mental health and nursing and in the scope of data collection, bringing national and international articles, including in languages little explored by other reviews already carried out. At the end of this study, it can be considered that it was possible to carry out a survey of recent research on the humanization of nursing care in mental health from 2011 to 2021, in addition to bringing relevant discussions on this topic.

The limitations, which are already men-

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nurses working in mental health. Some authors have already pointed out in recent studies how the area of mental health nursing lacks continuing education initiatives so that its care is based on evidence and on the precepts of ethics and anti-asylum, which may be a cause of the continuity of little

tioned here as indications for the continuation of the scientific development of the subject, consist in the delimitation of humanization actions in the field of mental health nursing. The development of research in the field of mental health, prioritizing

a multidisciplinary view, is diverse and can bring different perspectives on generalist care, which goes beyond the objectives of the current research.

The commitment to the anti-asylum fight and its precepts of humanized care

should be daily goals for any professionals working in mental health, with emphasis on nursing that deals with the health needs of the subject and how it fits into their social, family and intrapersonal bonds.

REFERENCES

- 1 Townsend MC, Morgan KI. *Psychiatric mental health nursing: concepts of care in evidence-based practice*. 9^o ed. Philadelphia, PA: F.A. Davis Company; 2018.
- 2 Videbeck SL. *Psychiatric-mental health nursing*. 8^o ed. Philadelphia, PA: Wolters Kluwer; 2020.
- 3 Fukuda IMK, Stefanelli MC, Arantes EC. *Enfermagem psiquiátrica: em suas dimensões assistenciais*. 2^o ed. São Paulo: Manole; 2017.
- 4 Conselho Federal de Psicologia. *Hospitais psiquiátricos no Brasil: relatório de inspeção nacional*. 2^o ed. Brasil: Conselho Federal de Psicologia; 2020.
- 5 Barcelos MV, Teixeira ER, Santana PPC. Satisfação com os serviços dos centros de atenção psicossocial: uma revisão integrativa. *Saúde Coletiva (Barueri)*. 2021;11(68):7827–7836.
- 6 Conselho Federal de Enfermagem. Resolução COFEN N^o 427/2012. *Normatiza os procedimentos da enfermagem no emprego de contenção mecânica de pacientes*. Diário Oficial da União. 07 mai. 2012;90(176 seção 1):176.
- 7 Conselho Federal de Enfermagem. Resolução COFEN N^o 678/2021. *Aprova a atuação da Equipe de Enfermagem em Saúde Mental e em Enfermagem Psiquiátrica*. Diário Oficial da União. 19 dez. 2018;245(148 seção 1):899.
- 8 Silva JS, Ribeiro HKP, Fernandes MA, Rocha DM. O cuidar de enfermagem em saúde mental na perspectiva da reforma psiquiátrica. *Enferm. Foco*. 2020;11(1):170–175.
- 9 Júnior JMP, Clementino FS, Santos RCA, Vitor AF, Miranda FAN. *Enfermagem e o processo de desinstitucionalização no âmbito da saúde mental: revisão integrativa*. *Rev Fund Care Online*. 2017;9(3):893–898.
- 10 Silva PO, Silva DVA, Rodrigues CAO, Santos NHF, Barbosa SFA, Souto VD, et al. *Cuidado clínico de enfermagem em saúde mental*. *Rev enferm UFPE online*. 2018;12(11):3133–46.
- 11 Santos BM, Silva RMCRA, Pereira ER, Joaquim FL, Goés TRP. *A percepção dos estudantes de enfermagem sobre o cuidado humanizado: revisão integrativa*. *Rev Bras Enferm [Internet]*. 2018;71(suppl 6):2965–73.
- 12 Sousa LMM, Marques-vieira CMA, Severino SSP, Antunes AV. *A metodologia de revisão integrativa da literatura em enfermagem*. *Revista Investigação em Enfermagem*. 2017;2(21):17–26.
- 13 Cardoso MRG, Oliveira GS, Ghelli KGM. *Análise de conteúdo: uma metodologia de pesquisa qualitativa*. *Cadernos da Fucamp*. 2021;20(43):98–111.
- 14 Lima GZ, Feltrin JA, Rodrigues JJ, Buriola AA. *Perception of nursing students on mental health home-care: a qualitative approach*. *R. pesq. cuid. fundam. online [Internet]*. 2016;8(2):4255–68.
- 15 Oliveira LC, Menezes HF, Oliveira RL, Lima DM, Fernandes SF, Silva RAR. *Atendimento móvel às urgências e emergências psiquiátricas: percepção de trabalhadores de enfermagem*. *Rev. Bras. Enferm.* 2020;73(1):e20180214.
- 16 Guimarães JCS, Santos BL, Aparibense GGS, Martins GCS, Peres AA, Santos TCF. *Eletroconvulsoterapia: construção histórica do cuidado de Enfermagem (1989–2002)*. *Rev. Bras. Enferm.* 2018;71(suppl 6):2743–2750.
- 17 Lima DWC, Paixão AKR, Bezerra KPF, Azevedo RJMA, Sousa LD, Rosado FR. *Humanização no cuidado em saúde mental: compreensões dos enfermeiros*. *SMAD. Revista eletrônica saúde mental álcool e drogas*. 2021;17(1):58–65.
- 18 Oliveira LC, Silva RAR, Medeiros MN, Queiroz JC, Guimarães J. *Cuidar humanizado: descobrindo as possibilidades na prática da enfermagem em saúde mental*. *Rev. Pesqui. (Univ. Fed. Estado Rio J., Online)*. 2015;7(1):1774–1782.
- 19 Silva PMC, Costa NF, Barros DRR, Silva SJJ, Silva JFRL, Silva BT. *Saúde mental na atenção básica: possibilidades e fragilidades do acolhimento*. *Rev Cuid [Internet]*. 2019;10(1):e617.
- 20 Thifault MC, Kirouac, L. *Les infirmières psychiatriques témoins d'un mouvement d'humanisation au cours des premières et deuxième vagues de la désinstitutionnalisation au Québec (1960–1990)*. *Recherche en soins infirmiers*. 2019;139(4):99–108.
- 21 Moll MF, Mendes AA. *Os cuidados de enfermagem e o exercício dos direitos humanos: uma análise a partir de realidade em Portugal*. *Esc. Anna Nery*. 2016;20(2):236–242.
- 22 Araujo VSC, Souza LO, Duarte KO, Pereira RMO, Almeida LS, Reis MH, et al. *O desempenho exercido no processo de humanização da saúde mental: uma revisão integrativa*. *Revista Eletrônica Acervo Saúde*. 2020;53(e3642):1–9.
- 23 Santos RGF, Nascimento JL. *Panorama da educação continuada em enfermagem: conseqüências à qualificação do trabalho de enfermagem em saúde mental e psiquiatria*. *Revista Saúde e Desenvolvimento*. 2017;11(7):1–15.
- 24 Scafuto JCB, Saraceno B, Delgado PGG. *Formação e educação permanente em saúde mental na perspectiva da desinstitucionalização (2003–2015)*. *Com. Ciências Saúde*. 2017;28(3/4):350–358.
- 25 Gomes, RM. *Humanização e desumanização no trabalho em saúde*. Rio de Janeiro: Fiocruz; 2017.
- 26 Muniz DC, Andrade EGS, Santos WLS. *A saúde do enfermeiro com a sobrecarga de trabalho*. *Rev Inic Cient Ext*. 2019;2(Esp.2):274–9.
- 27 Bellenzani R, Paro DM, Oliveira MC. *Trabalho em Saúde Mental e Estresse na Equipe: Questões para a Política Nacional de Humanização/SUS*. *Revista Psicologia e Saúde*. 2016;8(1):32–43.
- 28 Cruz NFO, Gonçalves RW, Delgado PGG. *Retrôcesso da Reforma Psiquiátrica: o desmonte da política nacional de saúde mental brasileira de 2016 a 2019*. *Trabalho, Educação e Saúde*. 2020;18(3):e00285117.