

Weaving Care: Embracing Demands to Older Adults in the Light of Therapeutic Monitoring

Tecendo o Cuidado: Acolhimento de Demandas Às Pessoas Idosas à Luz do Acompanhamento Terapêutico

Tejiendo el Cuidado: Acogiendo las Demandas de las Personas Mayores a la Luz del Seguimiento Terapéutico

RESUMO

Objetivo: relatar a experiência de estudantes e docentes sobre o processo de preparo, planejamento e execução de uma atividade de acolhimento do projeto de extensão com pessoas idosas à luz do acompanhamento terapêutico. **Método:** relato de experiência sobre uma atividade de acolhimento de demandas de um grupo de pessoas idosas, embasadas no acompanhamento terapêutico, entre julho e outubro de 2023. **Resultado:** os participantes destacaram a necessidade de um espaço para socialização, ressaltando a fragilidade das relações no envelhecimento e seus impactos na saúde mental. Foram abordados temas como depressão e solidão. As avaliações indicaram a demanda por encontros mais frequentes e atividades musicais. **Conclusão:** evidencia-se a importância do acompanhamento terapêutico e da promoção da convivência para a saúde mental dos idosos. As universidades desempenham papel crucial na formação de profissionais capacitados para atender a essa população e na produção de conhecimento sobre o envelhecimento.

DESCRITORES: Saúde do Idoso; Atenção Primária à Saúde; Saúde Mental; Continuidade da Assistência ao Paciente.

ABSTRACT

Objective: to report the experience of students and faculty regarding the preparation, planning, and execution of an extension project activity with elderly people in the context of therapeutic accompaniment. **Method:** experience report on an activity addressing the needs of a group of elderly people, based on therapeutic accompaniment, conducted between July and October 2023. **Results:** participants emphasized the need for a space for socialization, highlighting the fragility of relationships in old age and their impact on mental health. Topics such as depression and loneliness were addressed. Evaluations indicated a demand for more frequent meetings and musical activities. **Conclusion:** the importance of therapeutic accompaniment and the promotion of social interaction for the mental health of elderly people is evident. Universities play a crucial role in training professionals to care for this population and in producing knowledge about aging.

DESCRIPTORS: Health of the Elderly; Primary Health Care; Mental Health; Continuity of Patient Care.

RESUMEN

Objetivo: informar sobre la experiencia de estudiantes y docentes en el proceso de preparación, planificación y ejecución de una actividad del proyecto de extensión con personas mayores a la luz del acompañamiento terapéutico. **Método:** relato de experiencia sobre una actividad de acogida de demandas de un grupo de personas mayores, fundamentada en el acompañamiento terapéutico, realizada entre julio y octubre de 2023. **Resultados:** los participantes destacaron la necesidad de un espacio para la socialización, subrayando la fragilidad de las relaciones en el envejecimiento y su impacto en la salud mental. Se abordaron temas como la depresión y la soledad. Las evaluaciones indicaron la demanda de encuentros más frecuentes y actividades musicales. **Conclusión:** se evidencia la importancia del acompañamiento terapéutico y la promoción de la convivencia para la salud mental de los mayores. Las universidades desempeñan un papel crucial en la formación de profesionales capacitados para atender a esta población y en la producción de conocimiento sobre el envejecimiento.

DESCRIPTORES: Salud del Anciano; Atención Primaria de Salud; Salud Mental; Continuidad de la Atención al Paciente

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Experience Report

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INTRODUCTION

Historically, Brazil has faced a period marked by dehumanization in mental health care. In the last century, the term "crazy" was often used indiscriminately to label anyone suffering from mental illness or who did not conform to conservative and exclusionary social standards. ⁽¹⁾ Psychiatric hospitals functioned as true human warehouses, characterized by unsanitary conditions and cruel treatments, such as isolation and physical punishment, denying patients their rights and dignity and, consequently, marginalizing them. ⁽¹⁾

Fortunately, this scenario became the target of criticism and mobilizations that culminated in the Psychiatric Reform, a movement aimed at humanizing care and guaranteeing the rights of people with mental health disorders. ^(1, 2) This progress was supported by the

Federal Constitution of 1988 and the creation of the Unified Health System, which, based on the principles of universality, comprehensiveness and the right to health, established the bases for the transformation of this care model. ⁽²⁾ In this context, the Mental Health Workers Movement, which began in 1979, denounced the abuses committed in psychiatric hospitals and highlighted the need to reformulate care practices. ^(1, 2)

The Psychiatric Reform Law consolidated this process by ensuring the rights of people with mental health problems, promoting the gradual abolition of inpatient institutions and the implementation of new services aimed at psychosocial rehabilitation and care in the territory. The legislation recognized that mental health problems require an approach that goes beyond traditional psychiatric practices, replacing them with a territorial care network

that values the uniqueness of individuals and promotes their inclusion in society. ⁽³⁾

The aging process, characterized by cognitive and physical declines, significantly impacts the mental health of the elderly. However, psychological distress in this age group is often aggravated by ageist stereotypes, which associate old age with incapacity, fragility and obsolescence. ⁽⁴⁾ In this sense, it becomes essential to promote activities in the territory that stimulate autonomy and the development of social skills, contributing not only to the mental well-being of the elderly, but also to reaffirming their value and capacity within society. ⁽⁵⁾

From this perspective, Therapeutic Monitoring (TM) emerges as an important tool in new mental health care services and devices. With a horizontal approach, TM establishes a collaborative relationship between the health professional and the person being mon-

itored. ⁽⁶⁾ Its actions focus on activities integrated into the person's daily life and carried out in their territory, with the aim of empowering them, strengthening their social ties and developing skills to deal with the demands of everyday life. ⁽⁶⁾

University extension projects play a fundamental role in promoting activities in the territory aimed at promoting health. ⁽⁷⁾ By bringing the university closer to the community, these projects enable the practical application of technical-scientific knowledge, the training of more qualified professionals and the strengthening of citizenship. ⁽⁷⁾

This highlights the importance of student protagonism in the processes of curricularization of university extension, emphasizing the ability of students to be authors of their own formative process. ⁽⁸⁾ However, for this to happen, there is a need to prepare these students, which must include pedagogical practices that stimulate autonomy, reflective thinking and the integration between theory and practice, favoring significant and transformative learning. ⁽⁸⁾

There is a shortage of literature regarding TM in the elderly. ⁽⁹⁾ Therefore, the present study aimed to report the experience of students and teachers regarding the process of preparing, planning and executing an extension project activity with elderly people in light of the TM.

METHODS

This is an experience report on the process of preparing, planning and executing an activity to accommodate the demands of a group of elderly people by students and teachers in the health area, supported by the TM framework. ^(6,9)

The activities linked to the university extension project were carried out at a School Health Center (CSE - Centro de Saúde Escola) located in a city in the State of São Paulo, Brazil. The experience of the process of preparation,

planning and execution of the activity took place between the months of July and October 2023.

The TECER Project is the result of the integration of two university extension projects with the objective of meeting the mental health demands of the elderly population in the area covered by two CSE (nearby territories). The project focuses on the implementation of actions related to TM and Life Production (LP), seeking to promote the autonomy of participants, expand support networks and encourage their active participation in community life.

The name "TECER Group" is an acronym that represents the pillars of the project, especially regarding the approach to TM: Therapeutic, Emancipation, Care, Listening (*Escuta, in portuguese*), Reconstructing and Rehabilitating, and also alludes to the act of intertwining, symbolizing the union of different areas of knowledge and the construction of comprehensive care. It was collectively conceived and approved by the elderly population assisted, being adopted as the identity of the mentioned projects.

The participants in this experience were extension students from undergraduate courses in Nursing and Medicine, mental health professionals, postgraduate students, nursing professors and elderly people from the CSE.

As for the ethical aspects, since this is an experience report, it was not necessary to submit the report to the Research Ethics Committee.

RESULTS

The meeting took place in October 2023, at the CSE, and was attended by 15 elderly people, a very positive number. The invitation was made in two ways: a printed invitation prepared by the students and a telephone call made by the residents.

In total, 15 elderly people, seven undergraduates, one resident and two professors from a public university par-

ticipated in the activity to welcome the demands of a group of elderly people.

The participants were over 60 years old, 10 (66.7%) were female and five (33.3%) were male. Regarding the undergraduates, six (85.7%) were nursing students, one (14.3%) was a medical student. All (100.0%) were in the second semester of their courses. As for the resident, she was a nurse who was part of a Multidisciplinary Residency in Mental Health. She had been part of the extension project for at least six months and had already participated in theoretical activities aimed at understanding TM. As for the teachers, both have experience in the areas of health and education, with expertise in the use of active teaching methodologies. Their work was essential in encouraging students to take a leading role in the learning process and in developing practices that valued the independence, autonomy and active participation of the elderly.

The initial stage of the university extension activity involved the preparation of extension workers and subsequent planning of the demand reception activity.

Student preparation

The students deepened their theoretical knowledge about TM through research in the literature and presentations in dialogue with professors, residents and mental health specialists. Above all, they addressed themes that permeate TM, such as reception, Psychiatric Reform and the evolution of public mental health policies in Brazil.

In addition, they were trained to form therapeutic groups, emphasizing both the relevance of these interactions and the challenges involved.

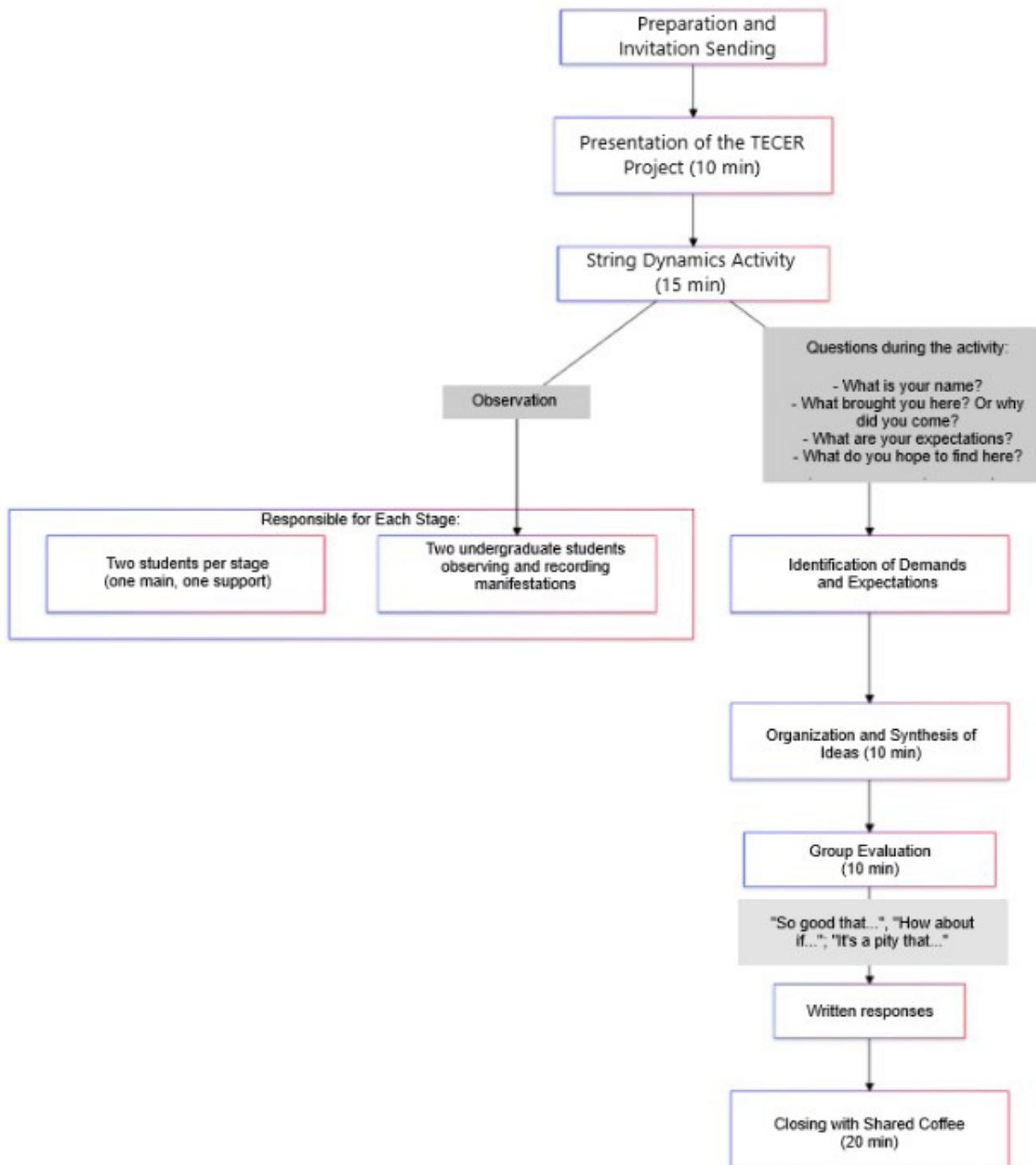
Activity planning

To structure the first contact with users, a detailed script was created to guide the execution of the activity, as shown in Figure 1.

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Figure 1 – Script for carrying out the activity of the first meeting of the TECER Group.



It is important to note that the division of functions was organized so that two students would take on each stage, one being the main person in charge and the other providing support. In addition, two undergraduate students were assigned to observe and record the elderly people's manifestations during the demand-based activity.

Execution

The invitation to the elderly was made through the delivery of printed material, prepared by the project students using the Canva® tool (Figure 2), and by telephone call made by the residents.

On the day of the meeting for the welcoming activity, the guests chose to start with coffee, which in the initial planning was only planned for the end. This moment, however, was not just a break, but an essential part of the proposal based on the TM. In addition to nourishing, coffee provided a space for socializing and affection, fostering bonds between the participants and creating a welcoming environment for the activity. Even with a pre-defined itinerary, the students knew how to adapt to the context, respecting the dynamics and needs of the group, which reinforced the importance of sensitive listening and flexibility in the process.

After the initial gathering, the project and its objectives were presented. To this end, a space was opened for dialogue among those present about the function of that space, dedicated to education and health promotion through the exchange of knowledge and experiences in a safe and protected manner, with an emphasis on respect and understanding. Throughout the conversation, simplified language was used, avoiding technical terms, to facilitate user understanding.

Next, the "string dynamic" was performed, and this activity was chosen due to its ability to promote bonding, one of the pillars of TM. In this dynamic, upon introducing themselves, each user tied the string to the tip of their finger and passed the ball of string to another participant, randomly. During the dynamic, the beginning of bonding was observed, since the activity provided a moment of relaxation and closeness between the participants. This interaction is directly aligned with the objectives of TM, which seeks to strengthen interpersonal relationships and foster the creation of an emotional support network.

Within this dynamic, some questions were planned for each participant: 1) "What is your name?"; 2) "What brought you here?" or "Why did you come?"; 3) "What are your expect-

Figure 2 - Invitation to the first meeting of the TECER Group.



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tations?"; and 4) "What do you hope to find here?". Through these questions, we sought to promote an active approach, capture users' perceptions about the meeting and understand the motivations behind this mental health care initiative in the group context. At the end of the dynamic, there was a moment to organize and summarize the ideas shared during the activity.

During the meeting, many users expressed the need for a space dedicated to socializing with different people, which would allow the creation of new interpersonal and emotional bonds with "the other". The participants discussed these issues, highlighting that, as we age, existing relationships often weaken, leading to the breakdown of bonds, which has a negative impact on mental health. Implicitly, in the statements of those present, it was possible to perceive the presence of other key points: loneliness and social exclusion.

At the end of the dynamic, the students recognized the formation of a "web" of string and explained it to those present, referring to the name of the TECER project and the initiative to "weave" the effective recovery, potential and skills of these members of the community. In the end, the aim was to conquer and regain these skills, in addition to the recovery of autonomy and emancipation.

Finally, an evaluation was proposed to users through a questionnaire with the following options: "So good that...", "How about if..." and "What a shame that...". For those with writing and reading difficulties, help was offered to complete the evaluation, so that each of these users was accompanied by a student.

In the survey of demands from the elderly, it was identified that the main need highlighted was an open space for social interaction, where it would be possible to exchange ideas and create bonds between people, reducing loneliness.

The evaluations showed that, al-

though the participants enjoyed the content of the meetings, many felt that the monthly frequency could be greater. Several expressed the desire to continue with the project, although some mentioned difficulties due to other commitments. They also suggested including more moments with music in the next meetings.

Based on the preparation and planning of the activity, with the support of the TM, it was possible to welcome and create bonds with the elderly, better understanding their desires and their daily lives through the subtle questions asked in pairs or groups of up to four people. This activity proved to be essential as a starting point for concrete actions by the TM, being fundamental for its sustainability, especially in collective actions.

DISCUSSION

This experience report aimed to describe the process of preparation, planning and execution of an activity to accommodate the demands of a group of elderly people, by students and teachers in the health area, in light of the TM. The activity allowed the project team to identify the needs of the group of users through their demands and statements. Thus, it was identified that the main need highlighted was that of an open living space, where it would be possible to exchange and create bonds between people, reducing loneliness and social exclusion, conditions frequently associated with aging.⁽⁴⁾

Aging is influenced by biopsychosocial factors that determine how each individual experiences it. Although it is a natural process, it is often associated with ageism, a prejudice that permeates various spheres, such as the job market, the academic environment and the media.⁽⁴⁾ By devaluing the elderly's capacity for active and productive participation, ageism generates significant impacts on their mental health, promoting isolation and the loss of social identity.⁽⁴⁾

A study conducted in Australia, with participants aged 60 and over, revealed a direct correlation between age discrimination and the development of mental health problems, such as depression and anxiety.⁽¹⁰⁾ Corroborating these findings, a recent systematic review, which analyzed 422 studies, found an association in 95.5% of the studies between age and impaired mental health in the elderly.⁽¹¹⁾ These data reinforce the urgency of interventions to combat this prejudice deeply rooted in our society, using available therapeutic resources.

Interventions that combine education and intergenerational relationships, as suggested by another systematic review, have great potential to substantially reduce ageism and should be incorporated into international strategies to promote a more just and inclusive society for all ages.⁽⁵⁾

In this context, TM emerges as an essential practice to dismantle the retrograde political-ideological treatment that still isolates patients with mental suffering, including the elderly. TM seeks to integrate these people into their daily lives, promoting their psychosocial rehabilitation through the recognition and appreciation of their singularities and potential, aligning itself with efforts to combat ageism and other prejudices that marginalize the most vulnerable populations.⁽⁵⁾

Associated with TM, peer groups also play a significant role in improving mental health, especially among older adults. These groups provide a collective space for sharing experiences, strengthening social bonds and mutual support, helping to reduce isolation and loneliness.⁽¹²⁾ By facilitating socialization in a welcoming space, group relationships contribute to strengthening self-esteem, promoting autonomy and emotional well-being, complementing the psychosocial rehabilitation provided by TM.⁽¹²⁾ In the evaluations carried out by users during the inaugural meeting, the idea of organizing meetings to build bonds and promote health in a

safe and trustworthy environment was extremely well received.

In addition, it was suggested that the proposed activities be accompanied by music.

“ In this sense, music is considered an extremely important tool for psychosocial rehabilitation, as well as for cognitive and limbic stimulation, presenting a restorative potential, especially for

elderly populations, as indicated in a study on the therapeutic power of music in institutionalized elderly people.

(13) ”

Furthermore, university extensions play a crucial role in promoting mental health and the inclusion of older adults, creating opportunities for social interaction and strengthening bonds. A study conducted in Ceará reports the activities of an extension group developed by nursing undergraduates, which allowed older adults to share their life stories and give new meaning to the aging process.⁽¹⁴⁾ Initiatives like this not only promote self-esteem and autonomy, but also challenge ageism by valuing the trajectory of the elderly in a welcoming environment.

Therefore, this study emphasizes the urgency of implementing and expanding similar initiatives, since strengthening support networks and promoting mental health in the territory are essential to address the difficulties that many elderly people

experience in their daily lives. Thus, investments in extension projects, which reflect the social commitment of universities, have the potential to improve the quality of life of the elderly and enrich the community as a whole. These initiatives promote a more inclusive and welcoming environment, in which academic knowledge is articulated with local needs, creating bonds and favoring individual, social and human development.

As limitations, it is worth noting that the TECER Project carried out the activity in a single health service and municipality, reflecting local practices and conditions. However, it is an activity that can be reproduced in any reality.

CONCLUSION

It was identified that the main need highlighted was that of an open space for social interaction, where it would be possible to exchange ideas and create bonds between people, reducing loneliness and social exclusion, conditions frequently associated with aging.

University extension activities enable the exchange of knowledge and experiences between the community and the academic sphere. Carrying out the activity of welcoming demands in light of the TM and in social groups is essential for psychosocial rehabilitation. In this sense, universities take a leading role in the training of professionals capable of meeting the complex demands of this population and fostering the production of knowledge about aging.

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