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The roles of the professional and the policies of mental health in the city of Natal, Brazil: an analytic study

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ABSTRACT

Aim: To analyze the process of psychiatric reform and mental health policies in the city of Natal, Brazil.

Method: This is an analytic, transversal research, using quantitative and qualitative data. It was performed on the substitutive mental services of mental health of Natal, provided by 65 undergraduate professionals, from March to August 2013. A questionnaire was created, composed of open and semi-open questions, generating data that was analyzed using descriptive and analytical statistics, with the support of the ALCESTE software and content analysis. **Results:** The participant sample was composed mostly of women, from 36 to 55 years of age, who had finished their college education between 6 and 15 years ago. 86% of them worked with users' groups; 97% of them provided individual care; 92% also worked with family care. The qualitative analysis of the data led to the identification of five categories. **Conclusion:** It was evident the adequacy of the roles and of the tasks to be developed by the professionals in substitutive services in mental health in the city of Natal were having to face constant challenges.

Descriptors: Mental Health Services; Health Manpower; Professional Role; Politics.

INTRODUCTION

Historically, psychiatric assistance and mental health policies have gone through many political, social, cultural, and scientific changes, identified as involving both development and cutbacks, the last based on the stigmas, disinterest, and prejudice that are still present in society and which overcome common sense, and which can be seen in some professionals that work in this area⁽¹⁻⁴⁾.

In terms of this study, a number of questions arose:

- What is the profile of the members, and what roles do they play in the substitutive services teams in mental health in the city of Natal, Brazil?
- What is the opinion of these professionals with regard to the policies, the practices and the education in mental health?
- How adequate are the roles and tasks of these professionals when working in substitutive services in mental health?

AIM

To analyze the process of psychiatric reform and the mental health policies in the city of Natal, in terms of the adequacy of the roles and tasks of the professionals in substitutive mental services.

METHOD

This is an analytical, transversal research, collecting qualitative and quantitative data, performed in the substitutive mental services in mental healthcare in Natal, Brazil, from March to August 2013, after the approval of the Committee of Ethics in Research of Rio Grande do Norte Federal University, registered under protocol #217.808/CAAE 10650612.8.1001.5537 had been obtained.

The sample was to be composed of 65 undergraduate professionals from the mental health teams available. It involved a questionnaire containing closed and semi-open questions about the socioeconomic profile, the policies, experiences and educational background of the participants. The responses were converted into tables, and then the closed questions were analyzed through the use of statistical software SPSS version 20.0, using descriptive statistics. The chi-square test, and Fisher's exact test, using $p < 0.05$ were utilized. ALCESTE software, which was supported by Bardin's content analysis⁽⁵⁾, was used to analyze the information gathered from the semi-open questions.

RESULTS

It was observed that the participants were mostly women (79%), between 36 and 55 years of age (52%), working 40 hours a week (62%), had finished undergraduate studies between 6 and 15 years ago (57%), had been working in mental health for at least 10 years (72%), and had worked at the institution under consideration for the past five years or less (52%).

83% of the studied sample was composed of professionals who worked on the CAPS, while 17% worked in wards. On the mental health teams, three professional categories were predominant: nurses (23%), physicians (21%) and psychologists (17%). Of the studied sample, 86% supported users' groups, 97% performed individual care, 94% observed patient's behavior, 92% also worked with family care, using a cognitive approach (28%).

The qualitative data generated five categories: academic education and work in mental health; the lack of further education and supervision in mental health; difficulties in professional practices of the substitutive mental services in mental health; teamwork: between right and wrong; the Brazilian National Policy of Mental Health: a still distant reality.

Also detected were concerns over the adequacy of the roles and tasks of the professionals regarding their own period of experience in the area of mental health and in the institution under consideration; over individual care; on the promotion of actions that support the autonomy of the patient; in the support of groups of patients; and specially the family/relative of the patients with mental disorders. However, some inadequacy in terms of the support of relatives' groups (52.3%), the specific formation in mental health (69.2%; $p=0.02$) and the challenges found in the work of this kind (87.7%) was found.

CONCLUSION

It is concluded that there was some degree of conformity in terms of the roles and tasks performed by the mental health professionals, despite the fact that they experience countless challenges related to professional practices and working conditions. It is expected that this research will provide some contribution to the modus operandi of the professionals who work in the CAPS and wards, to the municipal and state health managers regarding this issue and in supporting the academic education of future professionals; moreover, to help to produce more information regarding mental health in Brazil, thus strengthening the Brazilian National Policy in the area. In conclusion, this study aims to call attention to the decline of the processes in the field of mental health. In particular, it draws attention to the poor working conditions and the capacity to solve issues in mental health services.

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