Teaching nursing care in mental health in undergraduate nursing

Ensino do cuidado de enfermagem em saúde mental na graduação em Enfermagem

Enseñanza del cuidado de enfermería en salud mental en el pregrado en Enfermería

Jeferson Rodrigues¹, Silvia Maria Azevedo dos Santos², Jonas Salomão Spriccigo³

ABSTRACT
Objective: To analyze the teaching of nursing care in mental health through the contents for Educational Projects and Teaching Plans for Undergraduate Nursing Courses in the state of Santa Catarina, in the period of 2009 and 2010. Methods: Qualitative, descriptive and exploratory research, using the technique of data collection by document analysis, conducted between November/2009 and January/2010 with 26 Coordinators for Undergraduate Courses in Nursing in Santa Catarina. Results: Nursing care in mental health is present in the content of the disciplines / modules of 20 courses. The content of care demonstrated contradiction about which paradigm governed the teaching of these courses. Conclusion: The teaching of nursing care in mental health progresses in a field of knowledge in construction, composed of different nuclei of knowing – doing about a broader multidetermined concept of health / mental health.
Keywords: Teaching; Nursing care; Mental health

RESUMO
Descritores: Ensino; Cuidados de enfermagem; Saúde mental

RESUMEN
Descritores: Enseñanza; Atención de la enfermería; Salud mental

¹ PhD. Nursing Graduate Program, Federal University of Santa Catarina – UFSC – Florianopolis (SC), Brazil.
² Associate Professor at the Nursing Department and at the Nursing Graduate Program, Federal University of Santa Catarina – UFSC – Florianopolis (SC), Brazil.
³ Associate Professor at the Nursing Department, Federal University of Santa Catarina – UFSC – Florianopolis (SC), Brazil.
INTRODUCTION

Teaching Nursing Care in Mental Health (NCMH), with curriculum change, has been facing the challenge of including mental health in comprehensive health actions, while maintaining the specificity and general education. Since it is new, it has been seen a gap and absence between what is taught in university education and what is practiced in basic health units, in relation to nursing care in mental health. The situation requires a replanning from the course and the professor about their theoretical and practical activities involving the teaching of nursing care in a perspective of psychosocial paradigm.

This redesign of oriented activities for implementing the National Curriculum Guidelines (NCGs), despite also the Psychiatric Reform, brings the need to express in Teaching Plans new goals for qualification based on the content and approach that integrate theory and professional practice. Among the contents, nursing care in mental health, materialized in Educational Course Projects and Teaching Plans with the curriculum change of Graduate Nursing Course in Santa Catarina, and it is understood as a content approaching the teaching and the nursing practice, therefore it is inserted in the processes of changes between the areas of mental health and education. In the state of Santa Catarina, there are no recent studies on nursing care teaching in the field of mental health and psychosocial care and that may contribute to the Brazilian reality panorama.

It is understood that the nursing care, as an epistemological object of this profession must not only track historical, social, political, economic and epistemic changes, but permanently be researched, analyzed, questioned and reflected to be intentional, due to the transformations result in mental health services in recent decades, in the Brazilian reality. Thus, the use of Psychosocial Paradigm in Nursing Education presents itself as an opportunity to think about the university education of the generalist nurse who also takes care of the mental health demand, under the principles of Unified Health System (UHS) in the basic attention.

However, when considering the academic qualification of nursing and health professionals, it is noted a continuity of a curriculum organized based on very specific subjects. The lack of integration between them can lead teachers to a non-interactive educational practice and future professionals to a fragmented care practice, which may promote a conformation of the mental institution paradigm. Thus, when faced with the reality, the professional can experience a contradiction paradigm, because they are not able to deal with everyday situations in which patients demand mental health care in primary health service. This can lead to a practice of referral to specialists without the least professional care and resoluteness in nursing care.

Therefore, knowing the teaching of nursing care in mental health, which is presented in the Educational Course Projects – ECP and Teaching Plans – TP, provides insight into how the Undergraduate Nursing Course relate and integrate the process of health-disease-care of patient, family, community, allied to the epidemiological, sanitary and professional reality, in order to provide a comprehensive and interdisciplinary action of caring in nursing and in health, in the academic curriculum.

Based on these facts, the research question was obtained: How did the Undergraduate Nursing Course in the State of Santa Catarina materialized the teaching of Nursing Care in Mental Health between 2009 and 2010? To answer this question, it was established as a general objective of the research: Analyze the teaching of nursing care in mental health through the expressed contents in Educational Projects and Teaching Plans of Undergraduate Nursing Course of Santa Catarina, in the period 2009 and 2010.

METHODS

It is a qualitative, with exploratory and descriptive design, which used the technique of document analysis. The use of this technique is justified by the assumption that the materiality of mediation, as one of the philosophical aspects of Psychosocial Paradigm concerns documents that express the thinking of the group of teachers of each course. Data collection occurred between November/2009 and January/2010. The precepts of dialectical hermeneutics were employed to analyze the documents and this was done in the light of NCGs and the Psychosocial Care Paradigm. The study included all 26 Nursing Graduate Courses in the State of Santa Catarina by the time when the research was conducted. All Courses Coordinators received a copy, via e-mail, of the synthesis of the thesis project, as well as the protocol number and/or certification of the Ethics Committee. The access form of the documents was created by local query, sending the material via e-mail and document presented on the internet. The searches were conducted and analyzed descriptively in the Dimensions of Education Course Project and Teaching Plans of Subjects. The instrument used for data collection of ECPs contained the following dimensions: public or private bond, method/system to enter the course, number of students in the course, by modality, theoretical work load, type of components of the curriculum/program, established theoretical-referential-conceptual, teaching methodology, graduate profile, mandatory subjects, elective subjects, not offered.
For Teaching Plans, the following data were described: Name of subject, theoretical work load, practice work load, number of theoretical teachers, number of practice teachers, number of students, period/semester in which it is offered, subject objectives, NCMH – General Contents, NCMH – General Skill, NCMH – General Competence, NCMH – Specific Content, NCMH – Specific Skills, NCMH – Specific Competence, teaching strategy, intern place for the development of theoretical/practical activities, references, prerequisite. The ethical aspects were safeguarded in the use of information, according to Resolution 196/96 (30). The research project was approved by the Ethics Committee on Human Research of the Federal University of Santa Catarina No. 478, cover 302,344.

RESULTS

A summary of the data collected from the Educational Projects and Teaching Plans of the 26 Nursing Undergraduate Courses of Santa Catarina State are presented in the form of the data in Tables 1 and 2. This presentation aims to show a “picture” about what is planned in these courses for the teaching of nursing care in mental health. Besides showing who is in charge, the work load and the locations where the activities for theoretical and practical are developed. Following the data in Table 1, it characterizes the dimensions researched in Educational Projects of Nursing Undergraduate Courses of Santa Catarina.

It is observed, as shown in Table 1 that the qualification of nurses in Santa Catarina is held mainly in private institutions. The method/system to be enrolled into the course is mostly by semester. The total course work load is a reflection of the flexibility that the courses have from NCGs. The predominant type of curriculum is Disciplinary, the Integrated type of curriculum is just a possibility in a minority of courses. Regarding the methodology adopted by the courses, it is worth to remember that the documentation of six courses did not clarify the type of methodology used. With regard to the theoretical framework, it was found that 11 courses did not have referred; however, there was an approximation from critical theory to the theory of complexity, as theoretical framework of the courses which describes them as theoretical-philosophical.

In the Teaching Plans investigated, as seen in Table 2, the context follows how the nursing care of mental health is taught.

The data in Table 2 reflect the context in which the teaching of nursing care in mental health is developed. It is noteworthy that although all courses minister subjects of Nursing Psychiatric and/or Mental Health, the teaching of care is not present in all of these. It is seen that the skills and competences related to the nursing care of mental health are taught in a minority of courses. The description of both skills and competences in Teaching Plans is strictly related to NCGs.

### Table 1 – Characterization of Educational Projects of Nursing Undergraduate Courses in Santa Catarina – 2009 and 2010

<table>
<thead>
<tr>
<th>Dimensions of ECP</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Institutional Bond</td>
<td>Total of 26 courses – 24 are private and 2 public.</td>
</tr>
<tr>
<td>Method/system for enter the course</td>
<td>10 courses presented the annual method while 16 are per term.</td>
</tr>
<tr>
<td>Total Course Hours</td>
<td>16 courses have total hours between 3,500 to 3,990 hour-class; 10 courses have a total of above 4,000 hour-class.</td>
</tr>
<tr>
<td>Types of Curriculum</td>
<td>19 disciplinary courses and 7 Integrated courses.</td>
</tr>
<tr>
<td>Teaching Methodologies</td>
<td>14 courses uses problem based learning; 4 active methodologies and 2 for competences; 6 courses did not clarify.</td>
</tr>
<tr>
<td>Graduate Profile</td>
<td>All ECP presented the graduates profile.</td>
</tr>
<tr>
<td>Theoretical Framework</td>
<td>15 courses presented Theoretical/Conceptual, Filosofic, Structered, Problematic, Educacional and Guiding assumptions. 11 courses did not clarify.</td>
</tr>
</tbody>
</table>

DISCUSSION

Regarding the type of institutional bond, data from the National Institute of Educational Studies and Research Anísio Teixeira (11) shows that in 1999 there were 153 Undergraduate Nursing Courses in Brazil, 77 public and 76 private. In 2008, there were 679 courses, indicating a growth of 443.79% being 199 public – 19.45% and 547 private – 80.55%. In Santa Catarina in 1999 (6), there were four Undergraduate Nursing Courses, two public and two private, and in 2009, 26 courses, showing a growth of 650%, being two publics, 7.69%, and 24 private 92.31%. This fact is called commercialization of the educational system, in which, based on neoliberal conceptions, an imposition of society model in which education is reduced to a commodity (12).

The definitions of care registered in the ECPs, based on the elements that constitute them, are compared in its general form, with the concept of Health Care (13). By approaching the understanding of this author, as well as the principles of the NHS and NCGs, especially regarding the citation of completeness and interdisciplinarity, as key components of definitions, the concepts of care found in ECPs are shown in a nurse generalist qualification perspective. Health care is seen as a dimension of health and completeness permeates health practices. It consists of the elements, as hosting, bond and responsibility. The care involves an intersubjective relationship that is developed in a continuous time, surrounded by professional knowledge and technologies, with spaces for knowledge inclusion and negotiation, needs and desires of others (13).

Table 2 – Nursing care for mental health in Teaching Plans of Undergraduate Nursing Courses Santa Catarina – 2009 e 2010

<table>
<thead>
<tr>
<th>Dimensions of Teaching Plan</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Subject/module</td>
<td>All 26 courses offer subjects and/or modules of psychiatric nursing and/or mental health or other denominations.</td>
</tr>
<tr>
<td>Theoretical work load</td>
<td>Minimum of 15 hours-class and a maximum of 120 hours-class.</td>
</tr>
<tr>
<td>Practical work load</td>
<td>Minimum of 15 hours-class and a maximum of 72 hours-class.</td>
</tr>
<tr>
<td>N of Subject/Module</td>
<td>19 courses offered the subjects psychiatric nursing and/or mental health and/or other denomination and 7 courses presented modules of mental health and/or psychiatry.</td>
</tr>
<tr>
<td>N of theoretical professor</td>
<td>From the 45 Plans, 28 Teaching Plans allocated 1 professor; 7, 2 professors; 4, 3 to 5 professors and 6 didn’t inform us.</td>
</tr>
<tr>
<td>N of practice professor</td>
<td>9 Teaching Plans allocated 1 professor; 4 Plans, 2 professors and 1 Plan, 5 professors.</td>
</tr>
<tr>
<td>N of students</td>
<td>30 to 50 students</td>
</tr>
<tr>
<td>Period/Semester in which subject/module is administered</td>
<td>Variation between the 2nd and 8th semesters.</td>
</tr>
<tr>
<td>Nursing Care in Mental Health in the objectives of subjects/module</td>
<td>In 24 plans, care is part of the objectives of the subjects/modules.</td>
</tr>
<tr>
<td>NCGs – General Content</td>
<td>Showed in 21 plans, equivalent to 20 courses.</td>
</tr>
<tr>
<td>CESM – General Competence</td>
<td>From the 45 plans, 6 presented them, From the 26 courses, 4 indicated them.</td>
</tr>
<tr>
<td>CESM – General Skill</td>
<td>3 teaching plans</td>
</tr>
<tr>
<td>Learning Strategies</td>
<td>With the exception of a plan, all the others specify.</td>
</tr>
<tr>
<td>Place of development of theoretical-practice activities</td>
<td>11 plans did not identify the place.</td>
</tr>
<tr>
<td>References</td>
<td>The most cited are textbooks of psychiatry; books of semiology of mental disorders; psychiatric nursing books.</td>
</tr>
<tr>
<td>Prerequisites</td>
<td>Most (80%) plans presents.</td>
</tr>
</tbody>
</table>

As written in ECPs, it is interfered that nursing care is consistent with both the NCGs and with the Laws Regulating the Practice of Nursing, as there is exposure of care in ECPs and guided discussions in these settings may contribute to the reflection for each work in respect to a certain level of attention, there is an equivalent complexity of care.

According to data collected in Teaching Plans for Psychiatric Nursing and/or Mental Health, all courses have subjects and/or mental health modules as this is mandatory. It was observed consistency with the recommendations by NCGs, which offers a wide freedom in the composition of curricular structures. Consequently, the universe presented is wide. There are courses which have two/ or four subjects/modules. It is seen that there are courses that name the subject, others include their own modules of mental health in the curriculum or are inserted into matrix subject, which extends the range of denomination of nursing in mental health and psychiatric, prevail in the curricula, which are originated in nursing education as a whole.

Although there are changes in nomenclature, in work load and in periods of the course, nursing courses are still giving emphasis to health and mental disorder, in relation to theoretical/practical activities. A study in Latin America pointed out that schools use, mostly, psychiatric nursing, mental health or both classifications. Compared with another study, it is observed that, on one hand, names approached when they were identified as psychiatric nursing, psychiatry and neuropsychiatry in the past decade. Moreover, with curriculum changes, in which the subjects in the integrated curriculum became modules, also suffered changes in names. Another factor that seems to have influenced the changes was due to Psychiatric Reform, the changes in social and institutional contexts, while also contributing to the variation in the denomination of subjects/modules.

The theoretical maximum work load of 120 h/c and 72 h/c of practice were found in the plans studied, in a course with 4,000 hours, 4.8% are available on mental health for the entire course in Santa Catarina. In Latin America, there are studies presenting a prevalence of 5% of the courses total work load for teaching psychiatric nursing and mental health, corresponding to 177 total hours-class in courses, between theory and practice. Regarding Brazil, the author mentions that the mental health nursing in Santa Catarina, most- ly, relies on other references for caring, other than non-traditional Peplau and Travelbee. Moreover, the theoretical framework of interpersonal relationships in the NCMH is presented in six of the 26 courses, as cited in the references represented by Travelbee, psychiatric nursing theorist, whose theory highlights the Relation Person to Person.

It is noteworthy that care is guided by the Psychiatric Reform and by Psychosocial and Psychiatric Paradigms, which evokes, in one hand, a moment of paradigm shift and, on the other hand, a contradiction which shows the attrition and opposites. About the paradigmatic transition, the mental health context reveals a time of transformation, because there is an organized social
response to meet the mental health and psychological suffering, which shows psychiatric traditions and simultaneously, new trends of changing [16].

The way NCMH can be performed in practice was: preliminary interviews, clinical case construction, use of the therapeutic relationship, nursing consultation, prescription and record of care required in organic/psychiatric clinical complications, prescription and medication administration established in health programs and routines approved by healthcare institutions, home visit. These actions, which put NCMH in practice, include the provisions of article 8 of Law No. 7.498/86, from the Federal Nursing Board [21], on the private activities of the nurse as a member of the health team.

The content of nursing care, present in competences and skills of the subject/module of psychiatric nursing and mental health, in general, are incipient. Thus, the need to deepen the theme is indisputable, taking into account the NCGs refer in their guidelines a teaching based on knowledge, competence and skill. Even so, there are plans that have the same content of care and for competence and skill, as if these two areas were the same, indicating contradiction. More than that, professors need to recognize the skills and competences from the critical-historical point of view, so that; students and practice nurses can develop these domains in a manner consistent with the reality of care in teaching and learning process.

The lack of content, specific competence and skills related to the NCMH, reports that, perhaps, the courses do not consider these domains required for knowledge construction in mental health and therefore do not identify them.

Overall teaching strategies and learning in the plans were as follows: dialogued exposed lecture; seminars; dynamics and group work, reading and discussion of texts, use of films to develop a theme of mental health; search in databases in order to find articles on mental health; construction of problem-solving situations in the community; discussion groups and plenary sessions; creation of artistic and educational material; theoretical and practical activities in health services and mental health/psychosocial care; workshops, individual production and collective texts; discussion of clinical cases and directed study. Generally, nursing education in mental health/psychiatry in Santa Catarina is within a mix of traditional and interactive teaching strategies [22].

Places for exercising theoretical and practical activities are consistent with the recommendations by NCGs. From the data collected, as to the place of theoretical and practical activity, it is seen that these are carried out in Primary Care Services at Psychosocial and psychiatric hospitals, which, in theory, allow the student to achieve the integration between theory and practice.

The most pointed places for performing theoretical practical activities in this research were psychiatric hospitals, general hospitals and community health services [16]. Ambulatory, schools, among others were less mentioned. In a study on Latin America [16], the data citing Brazil indicated psychiatric hospital and general hospital, mentioned that the practical activities included a wide range of options, however, they aimed at the implementation of the nursing process, subject clinical methods, suppose assessment and intervention of care in different services, analysis and presentation of clinical cases.

The places for practice of teaching should focus on comprehensive care, in terms of increasing complexity, with active integration between subjects involved in care [22]. When it comes to places to articulate theory and practice, it is assumed that students have contact with services, consisted of spaces of healthcare delivery, interpersonal relationships and hosting, among others [9]. This contact also contributes to changes in the output of services of mental health care.

As for the references, the book Psychiatric Nursing, from the American authors Stuart & Laraia, as basic bibliography; Fundamentals of Psychiatric Nursing from Merenes da Taylor, and Mental Nursing Health from Ruth Rocha, are the most prominent. With regard to the term “care”, as part of the titles in the references, it was found a dissertation, which is: The construction of the framework for the mental health care provided by the staff of a psychiatric hospital; and four books: Psychiatric Nursing Handbook: Care and Management; Psychiatric Nursing: concepts of care; Mental disorder and the family care and Psychiatry and nursing care. The references developed in psychiatric nursing care are arising from studies in psychiatric hospitals. On the field of psychosocial care the highlights are: Archives of mental health and psychosocial care in three plans; and the book that addresses the issue of psychosocial rehabilitation, present in four plans: Psychosocial Rehabilitation in Brazil. It was not observed in this present documentary research, references on Teaching Plans that disseminates on promoting mental health, while the profile of graduates of the National Curriculum Guidelines [10] points to health promotion.

As for the references, it can be said that there is a contrast in teaching which is based on specialized literature, based exclusively on psychiatric hospital, focusing on mental disorders and outside of the Brazilian context, because it displaces UHS from public policies. This may induce nurses to identify, as the first track, the mental disorder in a subject who seeks health care/mental health and refers to a specialist without welcoming the subject in all its complexity.
On the other hand, the gap seen on the use of scientific articles may compromise the teaching of NCMH, since this production presents what is more recent. The lack of use of journal articles was also a result of the study performed which justified the possibility of libraries not being able to search and insertion of related references to journal articles. Currently, this data is already overcome in order to access facilitation by technology, informatics and availability of data produced scientifically.

The connections between the prerequisites in the subjects/modules to connect with the NCMH were: Mental Health Nursing, Nursing Semiology and Semiotics, Nursing Theories and Process, Nursing in Public Health, Comprehensive Health Care of the Adult and Elderly, Assistance Care in Comprehensive Health Care of Adults and the Elderly and all previous subjects. It seems that the need for such requirements are consistent with the fundamentals of what will be the nursing care in the field of mental health and its relationship to public health.

The interdisciplinary proposes integration between different fields of knowledge, in which curricular arrangements can be made to work the content and subjects in different ways to achieve the unity of knowledge. However, the Law No. 5.540/68, which established standards for the organization and functioning of higher education and its articulation with the middle school determined other measures establishing prerequisites for the development of subjects for higher education. With its repeal by Law No. 9.394/96, the prerequisites are no longer required. Apparently, the NCGs also indicate no prerequisites for the courses, those who persist in keeping them, and integrated curricula cannot be based on the idea of prerequisites.

The analysis of the objectives of subjects/modules in mental health reveals a contradiction on the paradigm which effectively rules teaching in these courses. Developing the plan for teaching care, based on epidemiological aspects, requires a relationship between teaching and learning with a model of nursing care in mental health based on paradigms which are assessed and consistent with local realities of UHS. This could enable a more effective teaching in proposing and monitoring the Project Therapeutic Singular of each subject’s suffering by nurses and staff.

On the other hand, although the general education that includes the field of mental health in the curriculum continues to be complex, it can be planned, beyond content, theories and paradigms that integrate the service-learning, based on knowledge of health problems/mental health (Planning) in the territory and its promotion, protection, treatment, recovery and rehabilitation in the field of mental health, supported by the principles and guidelines of the National Health System.

Given the documental analysis performed, it is recommended that institutions, if they wish, better explicit the information presentation of Educational Course Projects and Teaching Plans, so that professors, students and researchers may assess a more objective perspective of intentionality of the course in relation to the theoretical-methodological concepts and of mental health subject/module. Moreover, they would be showing, more clearly, as the content of nursing care in mental health is integrated into the teaching and learning process.

CONCLUSION

The analysis of how Undergraduate Nursing Courses in the state of Santa Catarina materialize teaching Nursing Care in Mental Health, by the content expressed in Educational Projects and Teaching Plans between 2009 and 2010, points out that the basis of theoretical activities of teaching is in the paradigmatic transition and the practical activities are diverse.

It was found that the teaching of NCMH depends on the conceptualization and theoretical-philosophical framework, in this study, has been shown to be guided by the Psychiatric Reform and driven by the transition of psychosocial paradigms and mental institutionalization. The conceptualization of NCMH requires the paradigm choice for distinguishing psychiatric nursing from nursing mental health, because the option to use one or the other depends on the object of intervention, as well as the plans to achieve that goal. The psychiatric nursing, involving mental disorders and behavioral seeking protection, rehabilitation and treatment in health, is within an institutionalized model. Mental health in nursing has as its object the suffering subject and aims to the promotion, prevention, and health intervention in the individual/collective, within a psychosocial model.

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REFERENCES


