



Nursing and humanized care offered to psychiatric patients: An integrative literature review

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Abstract

Introduction: Changing the model of care in psychiatric care has been a major goal of mental health teams in many countries, as well as in Brazil, despite some resistance. Humanization is today a major theme that has been highlighted in all health services, especially for nursing.

Objective: To identify, through a literature review, the main nursing actions that favor humanized care in the treatment of psychiatric patients.

Method: the study was conducted through an integrative literature review, using the databases BDENF, LILACS, MEDLINE and Scielo, where three descriptors were defined: Nursing Care, Humanization of Assistance, Psychiatry, associating the term boolean and. The historical cut was from 2014 to 2019.

Results: A total of 1,782 articles were found and selected, according to the inclusion criteria, 12 of them. In the study, three main nursing actions on humanized care were identified: the inclusion of family members in care, effective reception and qualified listening, other actions were cited in smaller volume.

Final considerations: The humanization of psychiatric patient care is an extremely important issue that needs to be seen by nurses as a particularity to improve the quality of care.

Keywords: nursing care, humanization of assistance, psychiatry

Introduction

The process of Psychiatric Reform that takes place in Brazil is critical of the hospital-centric model that lasted for centuries in the world and extended in the country until the 1970s. However, the focus of treatment on people with mental disorders was essentially centered on hospitalization. In large hospitals specialized in psychiatry, located far from city centers ^[1].

Seeking to restructure psychiatric care, the Mental Health Policy originated, which aims to ensure care for patients with mental disorders in substitutive services to psychiatric hospitals, thus overcoming the logic of long-term hospitalizations that treat patients by isolating them. of living with family and society as a whole ^[2].

Psychiatric nursing care within this old model was marked by the controller and repressor model, having its functions performed by individuals without skills to care for the mentally ill. However, through the Psychiatric Reform movement, nursing care began to direct new ways of caring for mental health, implying attitudes of respect and dignity and actions focused on each being, in their "I", having / including their participation. In treatment, as well as its insertion in society. From this context, the psychiatric nurse has become essential and indispensable, acting as a therapeutic agent capable of modifying his work process and promoting a higher quality and more humane nursing care ^[3].

The humanization of the services provided to people with mental disorders is a face of the realization of the conception of

these subjects as persons of rights, citizens who enjoy the status of humanity that should guide social relations between human beings. This paradigm is opposed and aims to overcome the archaic and resistant models, which excluded people with mental disorders, as well as reducing them to the disorder, disregarding humanity and, as a result, personal, family and community needs, as well as potentials ^[4].

According to the World Health Organization (WHO) 2012, mental disorders affect more than 450 million people and account for 12.3% of the causes of illness and disability. It underestimates that this number could reach 562 million by 2020. This will lead to pent-up demand for psychiatric services ^[5].

Given these data, professionals who seek the psychiatric area to act should follow a line of humanized care, looking at the individual as a whole, respecting him / her in their specificities and betting provisionally on seeing them enjoying a social life ^[6].

Linked to the issue of humanization, there was concern about the need to collect information on this approach to nursing care and its actions within the context of the mental health carrier.

Objective

To identify, through a literature review, the main nursing actions that favor humanized care in the treatment of psychiatric patients.

Method

This is an integrative literature review research. For the bibliographic survey we used the scientific electronic databases: Nursing Database (BDENF), Latin American and Caribbean Health Sciences Literature (LILACS), Medical Literature Analysis and Retrieval System Online (MEDLINE) and virtual health library Scientific Electronic Library On Line (SciELO). Three descriptors were defined: Nursing Care, Humanization of Assistance, Psychiatry, associated with Boolean operator "AND". The research took place in the second semester of 2019, according to the inclusion criteria: articles published in Portuguese between 2014 and 2019; available in consulted

databases and in full text. The exclusion criteria adopted were: bibliographic review articles, editorials, abstracts, articles published in a language other than Brazilian Portuguese, articles that are not available in full, and outside the 2014 and 2019 period.

Results

Table 1 will present the descriptors used, databases, number of articles found and selected articles, according to the integrative literature review. Table 1 presents the articles in relation to the base, year, author, theme and conclusion.

Table 1: List of the association of descriptors used, databases, number of articles found and selected articles.

Descriptors	Base	Articles Found	Selected Articles
Nursing Care and Humanization of Assistance	Lilacs	1144	0
Nursing Care and Humanization of Assistance	Bdenf	216	0
Nursing Care and Humanization of Assistance	Medline	332	02
Nursing Care and Humanization of Assistance	SciELO	40	0
Nursing Care and Psychiatry	Lilacs	24	03
Nursing Care and Psychiatry	Bdenf	13	01
Nursing Care and Psychiatry	Medline	01	01
Nursing Care and Psychiatry	SciELO	02	01
Humanization of Assistance and Psychiatry	Lilacs	0	01
Humanization of Assistance and Psychiatry	Bdenf	07	01
Humanization of Assistance and Psychiatry	Medline	01	01
Humanization of Assistance and Psychiatry	SciELO	02	01
Total		1782	12

Table 2: List of articles found according to database, year, author, theme and conclusions.

Base	Year / Author	Theme	Conclusion
BDENF	2015 / Oliveira LC, Silva RAR, Medeiros MN Queiroz JC, Guimarães J.	Humanized care: discovering the possibilities in the practice of mental health nursing.	The study points to the need to include the family in care, as well as the availability of nurses to listen, welcome, give attention and to relate with attention.
LILACS	2015 / Souto VT, Mostardeiro SCTS, Terra MG, Socol KLS, Xavier MS, Teixeira JKL.	Care of the Nursing Team in the Perception of Family Members of Psychiatric Patients.	Understanding the needs and expectations of family members becomes relevant to the definition of responsibilities and strategies to be incorporated into humanized care.
SCIELO	2014 / Tavares CMM, Cortez EA, Muniz MP.	Care in the psychiatric hospital from the perspective of the nursing staff.	Nursing care in psychiatry requires qualified listening, seeking complicity and reciprocity with the patient.
LILACS	2019 / Medeiros AD, <i>et al.</i>	Resilient characteristic of families living with psychological distress.	By family members, changes in attitude and significant personalities were reflected in the evolution of better coexistence and way of acting with their relative with psychological distress, allowing the identification of resilient characteristics.
LILACS	2019 / Cassiano APC, Marcolan JF, Silva DA.	Primary health care: stigma to individuals with mental disorders.	Disruption of stigmas in psychiatric patient care and establishment of an effective care plan.
MEDLINE	2017 / Carvalho R, Rocha D.	Humanization of care: What do nursing students think?	Present an ethical posture in the care of psychiatric patients.
BDENF	2015 / Penia MNM, Oselame GB.	Humanization of hospital care: integrative review.	Humanization involves the entire health institution and should be part of the way of thinking and acting, the planning process, management and even the work processes of the health team.
BDENF	2014 / Silva TLS, Kalinke LP, Mantovani MF, Mathias AF, Capistrano FC.	Profile of hospitalizations in a psychiatric unit From a general hospital.	Advocate for closer family ties to help promote the individual's rehabilitation.
MEDLINE	2016 / Moll MF, Mendes AC, Ventura CAA, Mendes IAC.	Nursing care and the exercise of human rights: An analysis from reality in Portugal.	The family approach, a care assistance plan and the creation of social inclusion strategies are indispensable for humanized care.
LILACS	2019 / Pimenta FJNA, Barros MMA.	Nursing actions and practices regarding psychiatric patients treated at an emergency hospital in Porto Velho-RO.	The welcoming along with a qualified listening favors the construction of the bond between nurse and patient for humanized care.

MED LINE	2016 / Souza ABS, Oliveira LKP, Schneid JL.	Welcoming in primary care by the nursing staff to patients with mental disorders: a theoretical review.	The embracement is presented as a technology of great impact in the health promotion of the psychiatric patient, in which it tightens the bond and promotes a reflexive action with the ethical development to listen and dialogue.
LILACS	2015 / Carrara GLR, Moreira GMD, Facundes GM, Pereira RS, Boldo PL.	Humanized nursing care in mental health.	When family members believe in the improvement of the psychiatric patient and begin to understand that for this they need to take responsibility for treatment, we must not forget that these family members also need support, guidance from nursing professionals.

After analyzing the 12 studies selected to be part of this study, the most important nursing care that favors the humanization of the psychiatric patient was raised, as shown in Table 3.

Table 3: List of the main actions of nurses that favor humanized care for psychiatric patients.

Nursing actions	Number of citations	%
Family inclusion in care	6	24
Affectionate Welcoming	5	20
Qualified Listening	4	16
Establishment of effective therapeutic plan	3	12
Team Preparation and Qualification	2	8
Interaction with the patient	1	4
Creating social inclusion strategies	1	4
Relationship with attention	1	4
Behave ethically	1	4
Demonstrate complicity and solidarity	1	4
Total	25	100

Discussion

According to the results, the nursing action that most favors the humanized care of psychiatric patients is the inclusion of family members in care, with 24%.

Family members have an optimistic and hopeful stance in overcoming adversity and try to maintain a positive family bond based on love, respect, faith, solidarity and companionship when accompanied by the nursing staff. They make the ability to cope with change and adaptation fundamental to better family reorganization and that exchanging experiences with staff has provided a differentiated look at changes in behavior [7].

In addition, the influences of the team's interaction with the family legitimize the perception that when family members do not feel welcomed or have their needs met, the relationship with the team is another negative aspect. From this point of view, it is understood that in nursing practice interaction is a primary element of care, because it is through it that establishes a relationship with the care subject and his family, making it possible to realize their needs and assist them in a humane way [8].

Regarding the issue of reception, the second most cited in the results, it presents itself as a technology of great impact on health promotion, which tightens the bond, mobilizes nurses' sensitivity and promotes a reflexive action with ethical and supportive development. to listen and dialogue. Reception contributes significantly to the construction and consolidation of the humanization of care [9].

The third in action, listening, Tavares, the interviewed nurses who provide care to psychiatric patients, that care in psychiatric nursing always requires qualified listening. They considered that sensitive listening should be a conduct to be performed in their practice by every nurse. In addition, the study proves to be very important what the sufferer says, as his speech can signal

something serious, from an intensification of the symptom or anguish, to suicide. Pay close attention to what they say.

"Sometimes there in his [patient's] speech he even brings something very serious. Even on the question of suicide. Sometimes it is already signaling something and we do not always understand or do not pay attention to it. What also happens is that we do not have so much time to pay this attention, to be there, to be paying close attention to what they are signaling " [6].

For the elaboration of a therapeutic project, when nurses individually recommend it to each user according to their pathology, they are demonstrating their commitment and interest in establishing in the practice of services what was recommended by the Psychiatric Reform and endorsed. by the deliberations of the third National Conference on Mental Health. Its commitment to the practice of humanized nursing is clear, as well as the welcoming and affective therapeutic relationships as instruments to achieve this humanization [10].

For the preparation of the team, the deficiency in the qualification of professionals in the performance of their duties can become a driving force for violent and non-therapeutic actions, making it impossible to establish a bond and thus hindering the care of the psychiatric patient. Failure to address the issue is seen as one of the deficiencies in the training of nurses and nursing technicians that has repercussions on their professional life, leading to a difficulty in providing care to patients in psychotic crises. It is understood that continuing education contributes to the process of consolidation of psychiatric reform so that professionals have greater knowledge about the forms of care, planning and interventions in patients with psychiatric patients [11].

To practice the humanization of nursing care to psychiatric patients requires, at a minimum, the availability of nurses to interact with the patient, in order to better understand the investigated [10].

The strategies of social inclusion developed by nurses, as they enable the most effective exercise of human rights, especially civil rights, which relate directly to the family context. The nursing care plan should contemplate social inclusion, prioritize strategies that highlight the training of social skills. The periodicity of care is according to the needs of each patient and this defines a therapeutic plan that is variable and depends on the evolution of each one, as well as their insertion and maintenance in social activities, work, family, among others [12]. Regarding the relationship with care to the psychiatric patient, a person with mental illness or his family when looking for a hospital or health professional has the desire to alleviate his symptoms and relieve him of his suffering. He wants to be careful with care and especially attention. The person brings his

symptoms, his socioeconomic circumstances, his forms of expression, his existential experiences that make him a unique being. Thus, humanized care is an indispensable condition for the success of treatment, but it needs to be adopted by all with due attention ^[10].

Based on the ethical precepts, it is emphasized that to humanize care, it is essential to adopt a new ethics based on the philosophical bases that encompass nursing care, through a posture of understanding and action different from that undertaken only in the technical aspects. This requires that nurses associate human rights knowledge with technical skills in their daily care. By incorporating this perspective of care into their work, nurses should value autonomy, co-responsibility, protagonism of the subjects involved, solidarity between established bonds, respect for users' rights and collective participation in the management process. In this way, instrumental reason makes room for sensitive and cordial reason, founded on ethical, human values and complementarity in the relationship ^[12].

Finally, the human side of the professional, because without this, it is not possible to take care of this carrier. Nursing should work with mentally suffering patients using devices that seek mutual complicity and solidarity ^[8].

Conclusion

The humanization of the care of psychiatric patients is an extremely important issue and needs to be seen by nurses as a particularity for their work. It was clear in this study that the insertion of the family in the context of care, effective reception and qualified listening. Among others, it portrays a small portion of the actions necessary to achieve the fullness of humanized care that can be offered to psychiatric patients. Given this, there is a need for further studies to make professionals and family members aware of psychiatric humanization.

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