

PROMOTING EMPOWERMENT THROUGH NURSING ACTIONS IN UNIVERSITY

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ABSTRACT

The objective of this research is to describe the nursing actions which promote empowerment of the participants in the university extension. This is a retrospective quantitative study, developed from the documentary data research technique that emerged from the extension project "Health care of people with mental distress and their relatives". The data refer to the period from June 2005 to December 2011, collected from records of 480 minutes of the weekly meetings of the extension project in the period from January to March 2012. The project participants were identified, as well as the modalities of the accomplished meetings and the activities to be developed by the students. It is possible to conclude, then, that the activities which were developed in this extension project contributed to the education of professionals with capabilities in mental health care, strengthening the social support network for people with mental disorders and promoted the development of empowerment of all participants.

Keywords: Nursing. Nursing students. Mental Health. Health Education.

INTRODUCTION

The health/disease process is permeated by factors that influence the people's quality of life. Therefore, it is possible to affirm that, in this process, health education is essential for the construction of knowledge: for both individual and collective care. Thus, the concepts of health and education are priorities and convenient to the actions of empowerment of people and the community⁽¹⁾.

It is assumed that the health education promotes opportunities for changes to foster the dialogue between empirical knowledge of individuals and scientific one of professionals⁽¹⁻²⁾. Therefore, educational activities can be considered opportunities for the production and application of knowledge, whose aim is to promote people's reflection as well as action for

the society⁽²⁻³⁾.

However, educational practices in health need to be articulated to the needs of the people and their experiences in health, as well as strengthen the activities of individuals and groups. This individual and/or group strengthening is understood by some authors^(2;4-5) as empowerment because it allows the individual to create strategies for building knowledge which makes it able to live life in different stages and to deal with the limitations imposed by any health impairment⁽⁴⁻⁵⁾.

Empowerment is historically associated to the alternative ways of dealing with the social realities, as, for example: the recovery of health, self-care, mutual support, the struggle for one's rights within the community, impartiality and social participation. In the field of mental health, this strategy aims at the implementation of the social rights of the person with a mental illness

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and their relatives which are needed as to enable that they can then act actively in different functions of a society⁽³⁾.

Thus, new social areas need to be conquered and enlarged as to give voice to citizens in distress as an alternative to the pursuit of autonomy and recognition of those members of the society, diminishing the stigmatized and derogatory image of dependency and disability⁽⁶⁾.

However, to act under these circumstances, health professionals need to ponder over their theoretical and practical contribution. This requires the development of studies that seek to investigate the manner of mental health care and develop technologies that may be effective in light of the complexity and the challenge that evolve the interaction between users, relatives, professionals and society⁽⁷⁾.

In this context, the university extension comes in – an educational, cultural and scientific process – which articulates teaching and research through the interaction between theory and practice. This articulation allows for the exchange of knowledge by means of a dialogical and transformative relation between university and society and also approaches the teaching of the students' social reality in order to promote the acquisitions⁽⁸⁻⁹⁾.

The actions of the university extension allow for thinking and doing that people "become critical and participatory constructors of the possible modes in terms of organization and citizenship", advancing beyond the receipt of information/knowledge transmitted by the university^(9,10). Therefore, the university extension strategies promote the exchange of experiences between formal and informal knowledge and even encourage those involved in extension activities to act as active people in the construction of a critical and reflective learning, with ethical commitment and social responsibility⁽⁹⁾.

It is expected that the health actions developed in the university extension superimpose the universal biological parameters and specific health needs, but they must also encompass the dynamics of social relations in order to expand the critical consciousness of the participants. To this end, it is imperative that such practices are linked to an educational proposal of social transformation⁽¹⁰⁾. Such

complexity requires the planning of interventions of promotion or health education which have as one of their goals to promote the emancipation of the individual.

Mental health policies focused on the creation of community-based devices are new, a result of efforts of professional groups and segments of society who are interested in the humanization of assistance for the carrier of a mental disorder and the materialization of their ideals in the current legislation. The psychiatric reform, which has been developing in Brazil, is based on the logic of deinstitutionalization in the perspective of psychosocial rehabilitation. In this perspective, different places for attention in mental health have been established, with therapeutic elements and promoters of social reintegration⁽¹¹⁾.

Facing this reality, the University Extension Project – developed by lecturers of nursing in partnership with the Association for Support to Patients with Mental Disorders (AADOM) – aims at promoting the empowerment of the person with a mental illness, their respective relatives as well as their own nursing students: through the construction of an environment for the application of citizenship, solidarity, acceptance and understanding of the difficulties in interpersonal relationship within the family dynamics.

Considering education a deliverance for humans and society, by which all are encouraged to promote changes of consciousness, social structure or the everyday reality⁽¹⁰⁾, the university extension provides the application of citizenship, autonomy, health education for the community and the integration of students into this same community⁽¹²⁾.

Therefore, in this context, it is understood that studies that approach the actions of nursing through the university extension may be useful for the development of strategies that foster mental health care in line with the psychosocial model, in addition to promote pondering about practices that can foster the autonomy and citizenship of the bearer of a mental disorder. Thus, this study aimed to: describe the nursing actions that promote the empowerment of participants of the university extension.

METHODOLOGY

This is a documentary retrospective quantitative study, with data regarding the period from June 2005 to December 2011, collected from records of 480 minutes of the weekly meetings of the extension project "Health care of people with mental distress and their relatives", registered with the Dean for Extension and Culture of the Federal University Paraná (PROEC/UFPR), under number 378/05. This project was developed in partnership with AADOM in order to develop the nursing care. This project is characterized by a social support network and led to sustained interaction by the theoretical framework of therapeutic communication between students, community, relatives and people with mental disorders in the extramural environment.

Data collection occurred in the period from January to March 2012 by means of a structured form, prepared on the basis of the information contained in the minutes, with the following variables: participants in the project; meetings held, considering the thematic procedures, open space, rounds of pedagogical and administrative talks; and activities undertaken. To identify possible difficulties in completing the forms were conducted three pilot tests.

The data that emerged from the collection were coded numerically and fed into a database spreadsheet within the program *Microsoft Excel for Windows®* 2010. Subsequently, the data were

analyzed descriptively and presented in whole numbers and percentages distributed in charts and graphs.

For being a documentary research, the application of informed consent and was not necessary and the identification of the project participants was not made. AADOM provided written permission of the consent for the elaboration of the research based on the actions developed in the extension project, which was approved by the Committee for Ethics in Research in Health Sciences (UFPR), under the inscription CEP/SD: 788.123.09.09; CAAE 0063.0.091.000-09.

RESULTS AND DISCUSSION

Table 1 illustrates the amount of participants, distributed annually, corresponding to the six years of the extension project (2005-2011). There was obtained a total of 12.3% (n=100) of people who had mental disorders; 14.8% (n=121) of relatives of the people with mental disorders; 53.4% (n=434) of undergraduate nursing students; and 1.8% (n=15) of nursing postgraduate students. As for professionals, in this research participated nurses, social workers, psychologists and other students of Occupational Therapy, Psychology and Law.

Table 1. Distribution of the number of participants in the extension project per year – Curitiba, 2012

People with mental disorders		Relatives		*Community		Professionals		Scholarship Students		Students of the nursing undergraduate course		Stricto Sensu postgraduate students		Total	
n	%	n	%	n	%	n	%	n	%	n	%	N	%	n	%
14	22.2	10	15.9	-	-	4	6.3	2	3.2	31	49.2	2	3.2	63	100
11	8.6	31	24.2	2	1.6	9	7	9	7	64	50	2	1.6	128	100
33	13.4	50	20.3	6	2.4	21	8.5	6	7	123	50	3	1.2	246	100
15	17.6	3	3.5	7	8.3	6	7	9	10.6	44	51.2	1	1.2	85	100
7	6.4	9	8.2	11	10	10	9	7	6.4	63	57.3	3	2.7	110	100
10	11.4	9	10.2	2	2.3	9	10.2	7	8	49	55.6	2	2.3	88	100
10	10.4	9	9.5	1	1.1	7	7.4	6	6.3	60	63.2	2	2.1	95	100
100	12.3	121	14.8	29	13.5	66	8.1	50	6.1	434	53.4	15	1.8	815	100

* Community refers to participants that do not fall under any of the items listed in the table, such as, for example, sympathizers with the theme and students from other degree courses.

The large number of participants in the extension project (n=815) and the different approach methods enabled the exchange of experiences among relatives, people with mental disorders, professionals and students in nursing and other areas. Through the notes in the records

it was possible to observe that the relatives and people with mental disorders participated effectively in definitions and development of actions with their experiences, related mainly to the mental disorder, once living so intimately with this problem.

With regard to graduate students, the majority of these students are from nursing ($n=434$), since participation in the project encompasses activity in the mental health area, a subject taught in the seventh semester of the UFPR Nursing course. Therefore, interaction between relatives and patients with mental disorder outside the institution of hospitalization is provided, assisting in demystification involving this clientele, contributing to the expansion of respect, understanding and empathy, essential features for the formation of the nurse.

It is believed that for taking care of the family, it is necessary to know how to appreciate it. So, the nurse needs to promote strategies to bolster the members when necessary, take them, know how to listen to them, let them express their feelings, so as to think along with them about ways and attitudes to mitigate the difficulties faced daily⁽¹³⁾.

Besides, it is understandable that the narratives of the person with mental disorder and/or the relatives, recorded in the minutes, allowed students the understanding of the mental disorder from the carrier's own point of view, expanding and consolidating scientific knowledge, making the redefinition of erroneous concepts and ideas possible that the student perhaps had.

Nursing care experienced by the undergraduate students of the course - through activities such as: greeting of participants, nursing consultation, research and preparation of educational practices related to mental health, development of leisure activities and realization of group dynamics - contributed to their academic formation through both the deconstruction of prejudices as well as the transformation of their way of understanding the mental disorder. Contact with this issue enabled experiencing it and developing a nursing care that considers the human being in its entirety, respecting biological, psychological, social, cultural and spiritual aspects. In this way it is possible to understand the importance of the extension in contributing to the construction of a transforming knowledge and conduct for the society⁽¹⁴⁾.

The Federal Mental Health Law nº 10,216, of 06 April 2001, supports the creation of new intervention forms on mental illness and

stimulates a new relationship of professionals and society with the person with mental disorder. In this new perspective of attendance, the nurse must be prepared to act in external treatment services and in another scope of social support, like the university extension with focus on hospitality and psychosocial rehabilitation⁽¹¹⁾.

For the nurse, this implies the development of actions that promote the autonomy and growth of the one who is being taken care of, so that this individual can establish and renew former affective and social links that enable improvements in quality of life⁽¹⁵⁾.

However, this construction cannot be sustained for only one single strategy; all in all it should be facilitated by means of contact with reality, creatively and responsibly, where the survey of health problems and their resolution happen within a participatory process, aiming at the promotion and the protection of citizenship^(12;15).

The actions of the extension project were developed through meetings in the following forms: "round of talk", 54.2% ($n=260$); "open space", 21.9% ($n=105$); "thematic", 10.8% ($n=52$); "administrative", 8.1% ($n=39$); "pedagogic", 3.7% ($n=18$); and "get togethers", 1.3% ($n=6$), as to be seen in Figure 1.

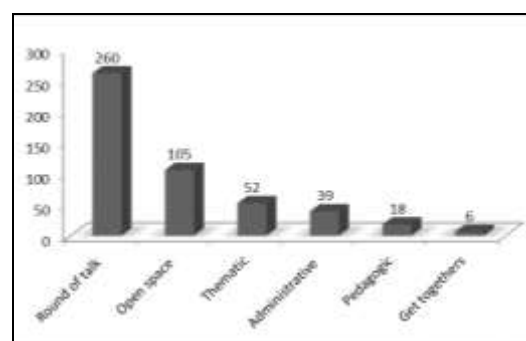


Figure 1: Number of the extension project meetings in accordance with the different modalities.

These meetings constituted for the student opportunities to socialize the knowledge acquired at the academy with the community. In this way, the theoretical knowledge brought by the students was enlarged and the experiments and experiences of other participants enriched and consolidated the approached topics⁽¹²⁾.

In the modality "round of talk", the activities were carried out in accordance with the request and agreement of the participants: however, at the beginning of each meeting it was agreed upon the

form and topics that would be discussed beyond the free speech, when someone wanted to introduce interlocking themes. Thus, the project is formed in a sphere in which the participants were able to address questions about the treatment, mental disorders and other clinical diseases; civic rights, access to health services and other issues of common interest listed in the meetings.

This strategy supports the promotion of empowerment espoused by Vasconcelos⁽³⁾ as it implies the creation of alternatives that maximize the strength and autonomy of people with mental disorders and the involved relatives in community functions, promoting ways to handle the difference and build new relations between insanity and society. During the "rounds of talk", the exchange of experiences allowed the participants to discover ways to overcome their difficulties without disrespecting their singularities.

In the thematic meetings were discussed themes that, in their majority, were chosen during the "rounds of talk". And, for which the necessity of theoretical study in order to give continuity to the questions raised was identified. In this modality were sometimes professionals from various categories invited for the explanation of topics, such as: role of the family in the treatment of mental disorder, unified health system (SUS), psychiatric reform, development of personality, mental defense mechanisms, mental disorders, occupational therapy as an aid in the treatment, autism, use and abuse of drugs.

The meetings of the "open space" fostered not only the practice of interaction, but also the creation of bonds of trust between subject and professional through spontaneous demand of the participants. In these meetings, recreational and leisure activities were accomplished, including: games, theatre plays and paintings; as well as digital inclusion and cognitive stimulation activities, through which there was learning of the academics about the importance of leisure activities and awareness of skills.

Regarding the care of the bearer of a mental disorder, the activities developed in the "open space" are aspects to be observed and encouraged. After all, they contribute greatly to the reinsertion of this clientele into the society: because these activities, beyond representing a

possibility to generate income for their production, strengthen the self-esteem and self-confidence of the participants, as well as enable the projection of conflicts by means of subjective expression. In addition, they also allow the bearer of a mental disorder to feel welcomed, thus contributing to the advancement of rehabilitation of this subject⁽¹⁶⁾.

Finally, in the "administrative meetings" - a moment of exchange of ideas among the participants about the reorganization, programming and distribution of the tasks as well as the preparation of project renewal proposals⁽¹²⁾ - there was participation of all members of the project, especially of the relatives, people with mental disorder and the community, since these people were the focus of all the developed actions. This type of meeting allowed that the developed activities were planned with the common goal of meeting the needs of the participants in the project, as well as its members and coordinators.

Table 2 presents the annual number of nursing consultations carried out during the period of the extension project. This activity was conducted by undergraduate students under supervision of a nurse, with the goal of exercising nursing care individually. Thus, it was possible to identify health problems and also promote focused health education.

Table 2. Distribution of nursing consultations accomplished with individuals with mental disorders and their relatives per year - Curitiba, 2012

Year	Number of accomplished nursing consultations	%
Jun/2005 – May/2006	-	-
Jun/2006 – May/2007	7	6.4
Jun/2007 – May/2008	14	12.8
Jun/2008 – May/2009	31	28.5
Jun/2009 – May/2010	32	29.4
Jun/2010 – May/2011	25	22.9
Total	109	100

It is to highlight that the nursing consultation is an instrument that allows the nurse to build the care relationship that is transmitted through the behavior of taking care with empathy, hospitality, listening, among others; besides, within a participatory process, establish links

between both, aiming at the promotion and protection of health⁽¹⁷⁻¹⁸⁾.

The results achieved through the nursing consultation meet the precepts of the psychiatric reform with regard to the integration between health professionals and the community, with a view to health education. Therefore, it is to be strived for reducing the prejudice and discrimination that stigmatize the bearer of a mental disorder and the respective family.

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FINAL CONSIDERATIONS

By reading the minutes of the extension project "Health care of people with mental distress and their relatives", it was possible to observe that the discussions promoted in the different types of meetings have allowed relatives and people with mental illness to get to know their civic rights, strengthening them to seek improvements in care

for their health needs. This strengthening was being developed through self-care, mutual support, the fight for their rights within the community, breaking down prejudice and social participation.

For the bearers of a mental disorder, in the current context of attention in mental health care, the actions developed in the project establish themselves as a space for social inclusion, which foster, under various aspects, the retrieval of the citizenship of these individuals, contributing to their psychosocial rehabilitation by the interaction with the academic community and other attendees.

The rapprochement between undergraduate and *stricto sensu* postgraduate students in the activities expanded the knowledge and perception of the possibilities regarding the operation of these future professionals in the process of restructuring the assistance in the area of mental health, empowering them to work in differing scenarios. Therefore, the activities developed and presented in this text contributed to the students' technical and scientific training, empowering them to provide quality care in mental health. Finally, the interaction between different players in an integration environment of the academy and the community, acting as a social network of support for people with mental disorders, has promoted the development of empowerment of all participants.

PROMOVENDO O EMPODERAMENTO ATRAVÉS DE AÇÕES DE ENFERMAGEM NA EXTENSÃO UNIVERSITÁRIA

RESUMO

O objetivo desta pesquisa é descrever as ações de enfermagem promotoras de empoderamento aos participantes da extensão universitária. Trata-se de estudo quantitativo retrospectivo, desenvolvido a partir da técnica de pesquisa documental de dados que emergiram do Projeto de Extensão "O cuidado à saúde de pessoas com sofrimento mental e familiares". Os dados referem-se ao período de junho de 2005 a dezembro de 2011, coletados em registros de 480 atas das reuniões semanais do Projeto de Extensão, no período de janeiro a março de 2012. Assim, foram identificados os participantes do projeto, as modalidades das reuniões realizadas, bem como as atividades desenvolvidas pelos estudantes. É possível concluir, então, que as atividades desenvolvidas neste Projeto de Extensão contribuíram na formação de profissionais capacitados para o cuidado em saúde mental, fortaleceram a rede social de apoio às pessoas com transtornos mentais e promoveram o desenvolvimento do empoderamento de todos os participantes.

Palavras-chave: Enfermagem. Estudantes de Enfermagem. Saúde Mental. Educação em Saúde.

PROMOVIENDO EL EMPODERAMIENTO A TRAVÉS DE ACCIONES DE ENFERMERÍA EN LA EXTENSIÓN UNIVERSITARIA

RESUMEN

El objetivo de esta investigación es describir las acciones de enfermería promotoras de empoderamiento a los participantes de la extensión universitaria. Se trata de un estudio cuantitativo retrospectivo, desarrollado a partir de la técnica de investigación documental de datos que surgieron del Proyecto de Extensión "El cuidado a la salud de personas con sufrimiento mental y familiares". Los datos se refieren al período de junio de 2005 a diciembre de 2011, recogidos en registros de 480 actas de las reuniones semanales del Proyecto de Extensión, en el período de enero a marzo de 2012. Así, fueron identificados los participantes del proyecto, las modalidades de las reuniones realizadas,

así como las actividades desarrolladas por los estudiantes. Es posible concluir que las actividades desarrolladas en este Proyecto de Extensión contribuyeron en la formación de profesionales capacitados para el cuidado en salud mental, fortalecieron la red social de apoyo a las personas con trastornos mentales y promovieron el desarrollo del empoderamiento de todos los participantes.

Palabras clave: Enfermería. Estudiantes de Enfermería. Salud Mental. Educación en Salud..

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Submitted: 30/05/2015

Accepted: 14/08/2016