ABSTRACT
The purpose of this study was to describe the contribution of the University Extension in Mental Health Developed at the Federal University of Paraná for the training of nurses. This is a qualitative research of the exploratory-descriptive type, which was developed in the city of Curitiba, Paraná State. 16 nurses were the participants of this study, who were selected through the snowball technique. The data were collected by means of semi-structured interviews and categorized by the thematic analysis technique. The categories that emerged from the data were: Care in mental health outside the hospital environment; Interaction and communication as strategies for nursing care; Change in the way of perceiving and understanding the person with mental disorder; Contribution to the professional and personal training of the nurse. We have concluded that, for nurses, university extension contributes to their academic training and to the construction of knowledge for the professional practice in mental health. Such contribution took place in learning about welcoming, care and support to patients and families and in recognizing possibilities for the nursing professional to act as a stakeholder in the network of social support in mental health care.

Keywords: Mental Health. Nursing. Teaching. Professional Practice.

INTRODUCTION
The University Extension (UE) is characterized by the accomplishment of continuous procedural action of educational, social, cultural, scientific and technological nature, with the specific aim at providing impact and transformation, dialogical interaction, interdisciplinarity and inextricable connection among teaching-research-extension, with systematized actions. Therefore, it contributes to the construction of knowledge, through an equalitarian professional training, by legitimizing the promotion of overcoming existing social inequalities. (1)

UE allows students to be involved in teaching strategies, activities and training practices with different itineraries, thereby converging to a significant learning from its reality and according to its needs. (1)

Teaching and research strategies, coupled with the University Extension, positively influence in the teaching-learning process and in professional training, since the essential character of the extension of occurring together with the community offers students opportunities to develop critical judgment and reflection on social reality. (1,2). For this study, the contribution in nursing training took place in the experience that involved the complexity of the health-mental disease process alongside people with mental disorders and their families.

In the psychosocial paradigm, it is important to establish a partnership between family and society in promoting health, recovery and rehabilitation of the patient with mental disorder and in care procedures within the family and social context of the affected subject. Accordingly, one should seek to keep the family informed, guided and included in the therapeutic plan, so that it can act as co-therapeutic agent...
and thereby further contributes to the alleviation of the suffering mental\(^3\).

According to the National Curriculum Guidelines of Graduation Nursing Courses, one should ensure the linkage among teaching, research and extension/care, through the warranty of a critical, reflective and creative teaching and encouragement of socialization of produced knowledge, as well as pursuing to enable students to develop attitudes and values targeted citizenship and solidarity\(^4\).

Seen in these terms, an experience report between students and nursing staff from the Center of Studies on Alcohol and other Drugs, at the Federal University of Espírito Santo, corroborates with the presented, where, through University Extension, it was created a space for the development of teaching and practice related to psychoactive substances. The experience resulted in increased knowledge of professors and students on the topic, as well as allowed students to learn through the practice, by encouraging them to develop “constructive attitudes to cope with the issue of psychoactive substances in personal level (as citizens), in professional level (as students and educators) and, lastly, in collective level (as university community)\(^5,11\).

In this perspective, UE is an element that contributes in the construction of practical knowledge supported by scientific knowledge, since it allows the student to develop skills and competencies inherent to the training of a qualified and committed professional in relation its practice. It is an educational process that, in addition to articulating teaching and research in an inseparably way, is specially aimed at letting university closer to society. It should be linked to the generation of knowledge and training of professionals, being that it has the student as the protagonist of its technical and scientific development, in order to obtain skills necessary for its professional performance and civic education. Thus, it enables students to develop a differentiated gaze and establish new relationships with the social context in which the subjects are inserted\(^1,2\).

Starting from these conditions, it was created the Extension Project called “The health care for families and people with mental suffering”, through a partnership between Federal University of Paraná (UFPR), represented by a nursing professor, and Association for Supporting People with Mental Disorders (known as AADOM). The activities of this extension project are developed in the premises of the Department of Health Sciences from the UFPR since July 2005. Among the main activities, one should highlight the meetings in form of conversation circle involving people with mental disorders, family members and nursing graduation students and, eventually, people from other courses or other areas of study, including health professionals and people of the community.

The major focus of this extension project is to propitiate the exercise of citizenship to people with mental disorders and their family members, through integration with health professionals and students. In relation to nursing students, it serves as the scenario for teaching and learning, since participation in meetings is part of the theoretical and practical content of the discipline of the Nursing Graduation from the UFPR that focuses on mental health.

The proposed objective for this study was to describe the contribution of the University Extension in mental health developed at the Federal University of Paraná for the training of nurses.

**METHODOLOGY**

This is a qualitative research of the exploratory-descriptive type, which was developed in the city of Curitiba, Paraná State.

16 nurses participated in this survey, who met the following inclusion criteria: being enrolled in the Graduation Nursing Course from the UFPR; having attended at least one meeting of the Extension Project during the discipline “Nursing Care II – Focus on Mental Health”, which is offered in the seventh period of the course at stake.

The data were collected in the period from August to November 2010 through the technique of semi-structured interview and recorded on magnetic tape, with an average duration of sixty minutes.

The first interviewee was a nurse, a student of the Master’s Degree in Nursing from the UFPR who attended meetings of the Extension Project.
in order to collect data for his dissertation. For the selection of the remaining participants, it was used the snowball strategy\(^{6}\). Thus, each subject indicated someone who was in line with the inclusion criteria. This process was repeated until data saturation take place. Firstly, we made an informal contact to check the availability of the subject to participate in the study; subsequently, the interviews were scheduled in places, dates and schedules chosen by the subjects.

The data analysis was performed based on the proposal of thematic categories\(^{7}\), which consists of ordination, classification and final analysis of data. In the first phase, the interviews were transcribed and organized, which allowed an overview of what was said by the subjects. In the second phase, we performed repeated and thorough readings of the collected information. The data were organized by themes so that the categories could be elaborated. Finally, the categories were discussed and substantiated with literatures on the topic.

**RESULTS AND DISCUSSION**

The 16 nurses informants in the study were mostly female (14), they had between 24 and 30 years and from one to three years of completion of their graduation courses. Regarding occupation, nine were research scholarship students (including master’s students), four worked in health care practice, one in teaching, another was nursing resident and the last one did not work. Table 1 shows the characteristics of subjects.

<table>
<thead>
<tr>
<th>Subject</th>
<th>Gender</th>
<th>Age</th>
<th>Years of Completion</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>S1</td>
<td>F</td>
<td>24</td>
<td>01</td>
<td>None</td>
</tr>
<tr>
<td>S2</td>
<td>F</td>
<td>25</td>
<td>02</td>
<td>Research Scholarship Student</td>
</tr>
<tr>
<td>S3</td>
<td>F</td>
<td>24</td>
<td>01</td>
<td>Health Care Nurse</td>
</tr>
<tr>
<td>S4</td>
<td>F</td>
<td>27</td>
<td>03</td>
<td>Master’s Student in Nursing</td>
</tr>
<tr>
<td>S5</td>
<td>F</td>
<td>27</td>
<td>03</td>
<td>Master’s Student in Nursing</td>
</tr>
<tr>
<td>S6</td>
<td>F</td>
<td>31</td>
<td>03</td>
<td>Resident in Oncological Nursing, Master’s Student in Nursing</td>
</tr>
<tr>
<td>S7</td>
<td>F</td>
<td>23</td>
<td>01</td>
<td>Master’s Student in Nursing</td>
</tr>
<tr>
<td>S8</td>
<td>F</td>
<td>24</td>
<td>03</td>
<td>Specialized in Family Health, Master’s Student in Nursing</td>
</tr>
<tr>
<td>S9</td>
<td>F</td>
<td>27</td>
<td>02</td>
<td>Master’s Student in Nursing</td>
</tr>
<tr>
<td>S10</td>
<td>F</td>
<td>27</td>
<td>01</td>
<td>Master’s Student in Nursing</td>
</tr>
<tr>
<td>S11</td>
<td>F</td>
<td>26</td>
<td>03</td>
<td>Master’s Student in Nursing</td>
</tr>
<tr>
<td>S12</td>
<td>F</td>
<td>25</td>
<td>02</td>
<td>Health Care Nurse</td>
</tr>
<tr>
<td>S13</td>
<td>M</td>
<td>28</td>
<td>02</td>
<td>Resident in Nursing in Urgency and Emergence</td>
</tr>
<tr>
<td>S14</td>
<td>M</td>
<td>27</td>
<td>02</td>
<td>Professor</td>
</tr>
<tr>
<td>S15</td>
<td>F</td>
<td>30</td>
<td>03</td>
<td>Health Care Nurse</td>
</tr>
<tr>
<td>S16</td>
<td>F</td>
<td>26</td>
<td>01</td>
<td>Health Care Nurse</td>
</tr>
</tbody>
</table>

The data obtained from the interviews resulted in four thematic categories: Care in mental health outside the hospital environment; Interaction and communication as strategies for nursing care; Change in the way of perceiving and understanding the person with mental disorder; Contribution to the professional and personal training of the nurse. The aforementioned categories will be described below.

**Care in mental health outside the hospital environment**

The experience provided by the Extension Project, when they were graduation students, has contributed in building their knowledge of
nursing in mental health and allowed to foresee possibilities of offering mental health care and out-of-hospital treatment. For participants, it was important to see and hear the person with mental disorder and realize that it can live together in society and talk about itself in a place that is not the psychiatric hospital.

I had already passed by the psychiatric hospital and was always wondering what these patients did when they left that place [...]. Then, it showed me how to keep up treatment outside the hospital, as well as the adaptation back into society (S1).

[...] I could see people talking to each other, see that patients can take medication and make treatment outside a hospital institution and be alongside the conviviality of society, they can even work (S2).

[...] We see chronic and even acute patients in the hospital environment [...] when we go for the Project, we expect something like the hospital and we got the shock because of this difference [...], I saw that deinstitutionalization may be concrete, tangible and effective [...] there is the need for hospital admission, but it really can bring these people back to society (S14).

The health field is governed by the biomedical model strongly represented in the figure of the hospital as the main therapeutic resource of the modern world. The hospital-centered and asylum-based model for treatment of mental illness is still rooted in the conception of society, which makes that a large part of the population does not recognize the importance of a network of mental health care outside the hospital environment(8). Accordingly, the Extension Project is a tool for a process of deconstruction and reconstruction of concepts formulated by students until the first contacts with people with mental disorders and their family members.

Thus, the issue related by the subjects is a stimulus for the maintenance of the treatment outside the hospital environment, where the person with mental disorder and their family members can share expertise and experiences and coexist with the other participants, which is supported by one of the premises of the Psychiatric Reform. Therefore, the understanding of the mental disorder and the treatment given should involve family members

and society in seeking partnerships for a kind of health care as close as possible the means of conviviality of people with mental disorders(9).

The participants highlighted the variety of topics covered in the meetings and the interest on the part of people with mental disorders and their family members in knowing their rights and how to legitimize them. Thus, among other aspects, it provides opportunities to know these rights and actively participate in discussions, by exchanging experiences, discussing and dispelling any doubts. For the student, the Extension Project allowed it to acquire scientific knowledge and recognize that it is possible to see the active participation of users.

I knew a place in which they seek to know their rights, understand about the disease and also the legislation. Until to participate in this meeting, I did not know what the Psychiatric Reform was, so I once saw they were discussing about this there (S2).

I realized that they are very interested, because, in my viewpoint, those who go to such a group are really very concerned with themselves or with their families, since they go to an environment in which it discusses the disease, exposes the difficulties they are facing, discusses this topic. This is a way of growing for them, and I think it’s quite important (S4).

I understood that, for them, it is not only going to the meeting of the Project and say anything, they exchange experiences, talk about doubts and about the topics [...] they make open discussion, each one can speak. I realized that some were in a very chronic state of the disease and did not talk much, then their family members interacted more with people there, [...] it was really a discussion group (S5).

In this regard, the university extension plays a fundamental role in establishing the relationship between university and society, by enabling positive interaction through the welcoming, in addition to serving as a distinctive space for new experiences aimed at humanization of care, thereby promoting the empowerment of health care(1).

Currently, the mental health field is in the process of transformation in pursuit of reducing "pre-conceptions" or misconceptions in relation to people with mental disorders. Thus, the nursing teaching in mental health should also
take place in a different way, in order to deconstruct the stigma that has been following for years the history of the treatment to the person with mental illness and the relationship that the society establishes with it. To that end, it is imperative that the learning process takes into account the different learning environments, and, therefore, is not restricted to the classroom\(^9\).

Nowadays, in Brazil, there are several out-of-hospital services that integrate the Mental Health Program, such as the Psychosocial Care Center (CAPS), Day Hospital (HD), Outpatient Unit, Units in General Hospitals, Rehabilitation Clinics, Psychiatric Hospital of Integral Hospitalization and Therapeutic Residences. These services can increase the effectiveness of assistance and care to people with mental disorders with the support of associations, mutual-aid groups, initiatives of social groups of neighborhood associations and religious communities, which represent the network of social support in mental health and other possibilities that are added up in the search for providing better quality of life for these people\(^10-11\).

The Extension Project, as mentioned by S4, is a propitious environment for that the patient is presented as an engaged individual who seeks to know the circumstances inherent to its condition and discuss the situations related to it. The reports of the subjects have shown the importance that the paradigm shift and the broadening of expertise meant for them in this area, since they reported having acquired information to better understand people with mental disorders.

Interaction and communication as strategies for nursing care

The participants realized that the professional practice of the nurse in mental health requires patience, flexibility, observation, knowledge, communication, organization, mediation, empathy, which are specific skills to interact with this audience. Such assignments were considered a manner of nursing care.

[...] There is interaction, they always interact, talk about what they think if they are anxious [...] and, furthermore, it is also time for the professional to check whether the patient is getting more agitated, more anxious, the way in which he walks [...] as you're talking to him, he comes to you, so you can see signs of change in clinical picture (S2).

Nursing in mental health can develop several roles in prevention or direct intervention in care [...] I think, for everything, there must be a direct interaction with the patient [...]. From the moment that the nurse is there in the project, encouraging the acceptance of people with mental disorders, it is a positive practice for nursing and is essential the presence of some nurse so that we can also be highlighted, not only by puncturing a vein or making a dressing, but also upon making the dressing of the soul [...] through dialogue. (S3)

The participants raised the specificity of mental health practice related to nursing actions, because, for them, this professional should be grounded in skills that foster the interaction with this audience. Under this perspective, it is a task of the professional to develop skills, whereas, to perform nursing actions in group, one should be able to communicate, exercise listening and have respect for differences and flexibility related to changes\(^11-15\).

The participants reported that the experience in the Extension Project led them to a reflective and differentiated approach about the different forms of treatment and how they, as professionals, can develop the care for people with mental disorders. In this regard, S3 said that mental health interventions should not be limited to procedures such as those involving drug treatments, but one could develop nursing care covering the social and psychological dimensions of patients and their family members. Furthermore, S3 added that the understanding of group works is extremely relevant to its training and professional performance.

Change in the way of perceiving and understanding the person with mental disorder

The participants talked about the suffering that the prejudice imposes on people with mental disorders, however, realized the Extension Project as a place where these people feel effectively welcomed. Some subjects mentioned that, before participating in this project, were afraid and frightened, and that, in this sense, the project helped them to change the concept on the
person with mental illness and reduce the prejudice and the stigmas that they brought with themselves:

It was the first time I had contact with a person who I knew that had a mental disorder, it was interesting, I had not started the classes yet and was afraid, frightened [...] because, until then, I believed that a mental patient, people call it crazy, was a person who was strolling about the streets, who could not live with the family and with other people. This was the thought, the stigma that I had about a person of which I wasn't going to get very close, having a contact, interact or talk with it (S2).

Seeing that, during meetings, mentally ill people laughed, talked, were treated as normal subjects, without hierarchies [...] was very striking in my life, that is why I started to stop stigmatizing these people (S3).

The experience allowed participants to perceive the person with mental illness as a human being who has needs to perform various daily activities and how it experiences its clinical manifestations in everyday life. They reported that have acquired knowledge about the characteristics of some mental disorders.

[...] I could see that the person with mental illness is a human being like all of us, who can go to college or drive. I could also see that it is a space that allows both they and the students to learn about the disease [...] it has helped me to realize that patients can, in fact, live together with others (S2).

It was interesting to talk to, in order to know what they do, as well as how really the pathologies and the daily lives of these people are (S4).

With the approval of the Law of Directives and Bases of National Education (LDB), Law 9394/96, the pedagogical projects of nursing courses have enabled the curriculum to have a greater flexibility, by anchoring creative and innovative proposals and experiences. Under this perspective, in this scenario of creative experiences, the Extension Project in mental health contributes in training students, with sights to enable them to develop their practical actions together with society members, thereby providing change in the way of thinking and acting (1-2,9).

The prejudice and stigma in relation to mental patients are still rooted in society. From the reports of the participants, it was possible to understand that the stereotyped viewpoint with regard to these patients remained deep-seated. A study involving nursing students in Brazil, Peru and Chile demonstrated that participants tend to maintain stereotypes and prejudices in relation to the person who has mental disorders and that such characteristics can be compared to the prejudices of the general population, which makes use of ordinary sense when describes a person with a mental disorder as an aggressive, strange and dangerous individual, who do not present improvement and still causes problems for its family (16).

**Contribution to the professional and personal training of the nurse**

The subjects reported that participation in Extension Project has enabled them to acquire professional and personal learn and opportunity to achieve other environment with different forms of mental health care.

[...] It was important to expand my view, by seeing a work of social integration, i.e., with possibilities of treatments [...] it has added a lot in my training (S1).

The environment of the project has allowed knowing how other environment deals with people, as well as how to behave [...], for example, if in the future I work in a service that is not located in a hospital, I will have this notion, this learning. It was important, because it was another environment that came well to meet the new conception [...]. Then, for me, it was a beginning to awake a desire to act in this area (S2).

[...]There was a personal and professional learning for me – as a professional – also pay attention to other social, psychological aspects of mentally ill patients [...]. The project really helps to show that, in practice, this type of care is effective, and it is good for the patient and for the health professional (S3).

Some participants said it was an opportunity to face the reality experienced by these people, because they had the possibility to relate theory with practice through reports and statements of patients and of their relatives. They expressed that the Project is a space for teaching and learning that has provoked changes in the way of perceiving the person with mental illness and
was an experiment with reflections on their personal and professional lives.

[...] That has touched me for this situation. Knowing that there are institutions that provide this support to the patient, with right guidance, this is a differentiated view [...]. Mental health is not only in psychiatric hospitals, it's in all hospitals and even within our homes [...] mental health is in all working environments (S4).

You imagine yourself in that situation, and it all makes correlation to perform your job, from now, with the experience you had [...]. Besides learning, we can evolve as a human being [...] because we have a very different perspective of everything [...]. Working with the issue of mental illness is quite different [...] they are a very much excluded part of the society [...] entering this world and try to understand the other, I think it makes you a better human being too [...] I think the evolution is not only professional, but professional too (S8).

It is noteworthy to highlight that the teaching-learning strategies used in the teaching of mental health should aim at the development of skills in students so that, in the future, they are nurses with comprehension and knowledge to act in the field of psychiatric nursing and mental health and/or other fields in a satisfactory way. To that end, it is necessary to mobilize knowledge and skills related to the citizenship and social inclusion of people with mental disorders (15).

In the speeches of the participants, one can perceive the reference to the Extension Project as a space that fosters a transformative action for all those who participate in it, but, especially for the graduation student who finds a reality that makes him/her aware to review concepts and perceive the person with mental illness under the perspective of socialization. Thus, a transformative practice is established in the joint relation, in the thoughts and actions of individuals, thereby enabling an emancipatory process to social actors and, in this case, the students have shown that they are able to reflect on the reality of the mentally ill patients (2,9).

The UE strategy is a way, a space in which the nursing student can act as an assistant of the network of social support in mental health care, thereby showing that the university can and has the role of participating and creating proposals for letting the academic community closer to society (1-2). Thus, the nursing professional, committed to its practice, needs to acquire specific knowledge, by considering the changes occurred in the paradigm of mental health care and assistance. Therefore, he/she needs to be aware of interferences that hinder the humanization of this care practice (9-12, 14).

Some participants stated that it is necessary that the professional has a specific profile and that is dedicated. Thus, it is expected that the future nurse establishes new relationships with the social context, by recognizing the structure and forms of organization; understands that its transformations and expressions can promote healthy lifestyles, by reconciling the needs of patients with the requirements of its community; strives to act as an agent of social transformation and that develops nursing care shares consistent with the different community groups (9, 13).

**FINAL CONSIDERATIONS**

Through this research, it was observed that the changes promoted by the Psychiatric Reform Movement establish relations with the construction of knowledge of nursing in mental health, by considering the university scope as the locus in which this knowledge is developed.

UE provides a space for construction of knowledge in which the social practice takes place through the developed actions. It offers the academic community an exchange process among social actors, in this case, patients with mental disorders and their relatives, community members, graduation nursing students, academic from other courses and university professors.

The Extension Project “The health care for families and people with mental suffering” gives opportunity for nursing students to become aware of the reality experienced by these individuals, which is one of the reasons for the existence of such a project. Thus, we believe that it is essential that the student to have the opportunity, during its academic trajectory, to meet people with mental disorders in their different scenarios of social life, since the knowledge acquired through other sources contributes to his/her professional training and performance. Accordingly, university extension enables the construction of knowledge in different community spaces.
The achieved results were consistent with the purpose of this research, given that they were pointed out by the experience of the student and by the accrued towards its training, thereby confirming the importance of this project as a support in the construction of knowledge in mental health. Thus, we understand the Extension Project as a space that allows welcoming and support to patients and families through actions of nursing care and as an environment in which there is opportunity to change concepts and break the paradigms that students bring with them. We hope that this research can encourage other reflective processes towards these proposals and that the educational institutions maintain their social commitment in training committed citizens, who are aware of their role and based on that they propose to conduct.

REFERENCES


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