RESEARCH

NURSING AND EMPLOYEE HEALTH IN A PSYCHIATRIC INSTITUTION*

ENFERMAGEM E SAÚDE DO TRABALHADOR EM INSTITUIÇÃO PSIQUIÁTRICA ENFERMERÍA Y SALUD DEL TRABAJADOR EN LA INSTITUCIÓN PSIQUIÁTRICA

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ABSTRACT

Nursing is the profession that presents the highest risk of tension and illness due to the burden and stress occurring in daily life, making it possible to generate psychological suffering at the moment when one is unable to adapt the psychic-mental state to the physical relationship. This study was conducted with the objective of identifying what motivated the nursing professionals to work within mental health, and to acknowledge the possible problems that this activity provoked in their health. To perform this research, ten nursing staff professionals who worked in mental health for more than one year in a substitutive psychiatric institution in the south of Minas Gerais were interviewed, by means of a semi-structured interview with guiding questions about the performance of the nursing team. The content analysis method of Bardin was used as the methodological reference, and as the theoretical reference, the theory of Margaret Newman was used. By means of the results achieved, it was perceived that entry into mental health was due to the lack of options for work in other areas or due to unemployment. The work in mental health did not interfere in the physical or psychological health of the staff, who were able to achieve satisfaction and a change in behavior. It was concluded that studies of this nature can contribute to reflection on the practice of the nursing staff, with a view to the improvement of the care given to the individual with mental illness, starting from the comprehension that it is necessary to rethink the prejudices that still exist in relation to mental health.

Keywords: Occupational Health; Mental Health; Nursing.

RESUMO

A Enfermagem é a profissão que apresenta o mais alto risco de tensão e adoecimento pelo desgaste e estresse decorrentes do cotidiano, podendo haver sofrimento psicológico no momento em que não se é capaz de adequar o estado psíquico-mental à relação física. Conduziu-se este estudo com o objetivo de identificar o que motivou os profissionais de enfermagem a atuarem em saúde mental e a conhecer os possíveis problemas que essa atividade provoca em sua saúde. Para a realização da pesquisa, foram entrevistados 10 profissionais da equipe de enfermagem que trabalham em saúde mental há mais de um ano em uma instituição psiquiátrica substitutiva do sul de Minas Gerais, mediante entrevista semiestruturada com questões norteadoras sobre a atuação da equipe de enfermagem. Foi utilizada a análise de conteúdo de Bardin como referencial metodológico e como referencial teórico utilizou-se a teoria de Margareth Newman. Por meio dos resultados obtidos percebeu-se que o ingresso na saúde mental se deu em razão da falta de opção para trabalhar em outras áreas ou pelo desemprego. O trabalho em saúde mental não interfere na saúde física e psíquica do trabalhador, sendo passível de satisfação e mudança de atitude. Concluiu-se que estudos dessa natureza podem contribuir para a reflexão da prática da equipe de enfermagem, com vistas à melhoria da assistência prestada ao indivíduo com transtorno mental, a partir da compreensão de que é necessário repensar os preconceitos que ainda existem em relação à saúde mental.

Palavras-chave: Saúde do Trabalhador; Saúde Mental; Enfermagem.

RESUMEN

Enfermería es la profesión con mayor riesgo de tensión y enfermedades debido al desgaste y estrés del día a día. Puede llevar al sufrimiento psicológico si no se es capaz de adecuar el estado psíquico-mental a la relación física. El objetivo del presente estudio fue identificar el motivo por el cual los profesionales de enfermería eligieron trabajar con salud mental y conocer los posibles problemas que esta actividad provoca en su salud. Para realizar la investigación se llevaron a cabo entrevistas con 10 profesionales de enfermería de un hospital psiquiátrico sustitutivo del sur de Minas Gerais que trabajaban desde hacía más de un año en salud mental. Se realizaron entrevistas semi-estructuradas con preguntas sobre la actuación del equipo de enfermería. Se utilizó el Análisis de Contenido de Bardin como referente metodológico y, como referente teórico, la teoría de Margareth Newman. Los resultados indicaron que la elección de trabajar con salud mental se debía a la falta de opciones en otras áreas o al desempleo. El trabajo en salud mental no interfiere con la salud física o psíquica del trabajador y es susceptible de satisfacción y de llevar a cambios de postura. La conclusión de esta investigación es que estudios como éste pueden contribuir a la reflexión de la práctica del equipo de

enfermería, con miras a mejorar la atención al individuo con trastorno mental, desde que se entienda que hay que repensar en los prejuicios que todavía se tienen contra la salud mental.

Palabras clave: Salud del Trabajador; Salud Mental; Enfermeriá.

INTRODUCTION

Psychiatric nursing is still perceived by undergraduate students with some suspicion, perhaps because they are unfamiliar with this specialty. As this discipline gains more space and importance in the curriculum of nursing programs, the undergraduates begin to take an interest in the area. However, the lack of knowledge of nursing professionals is still noticeable for entry into psychiatric institutions. For this reason, we feel the need to seek broader knowledge about this process, given that we also experienced the same difficulty in finding internships in mental health during undergraduate studies.

It is believed that the lack of preparation and knowledge of the nursing professional, which in the case of mental health is only acquired when he is hired into the area, could cause negative effects on his mental and/or physical health, including pressure in the work place, conflicts between staff or family, emotional overload, in addition to ignoring his role in the health team, since, for the requirements of his patient, he must be clear about his duties pertaining to the position he held.

A mental health professional must be qualified to develop his activities with patients having mental disorders, because the demands of these patients are variable based on their mental state. The professional must be prepared to know how to deal with the complications that can occur, because the nursing staff may become more vulnerable to negative effects of the work, due to the proximity they need to have, both with the patient, his family and the work staff.

Nursing is seen as having the highest risk of tension and illness, due to the burden and stress resulting from daily life. There can be some psychological distress at the time when there is an inability to adapt the psychic-mental state to the physical relationship.¹

Given this situation, the following question arose: can working in this area lead to excessive stress and emotional distress among professionals, complicating their personal life and performance at work?

Therefore, this study was conducted with the objective of identifying what motivated nursing professionals to work in mental health and to understand the potential problems that this activity caused in their health.

Throughout the history of nursing, it is noted that its action is based on a therapeutic environment, therefore, the investigation of the patient happens through a central focus on medical interventions. This explains why the admission of nurs-

ing professionals does not fulfill the minimum qualifications needed for psychiatric patient care and these professionals still have doubts about the meaning of their professional role, using only a little clinical judgment to perform activities of nursing. This impairment can influence the quality of care provided by the staff and, consequently, affects professional nursing.²

Mental health practice has been adapted such that the multidisciplinary team is inserted into the nursing care, proposing to patients with mental disorders a collective work based on social practices, that is, the intervention tools already used for decades by the nurses are effectively used when constructed based on a multidisciplinary therapeutic process. In reality, nursing acts in mental health with the same purpose as what was taught during the training process, without inserting any technical-scientific knowledge or even expertise for acting with these patients.³

Based on this context, this study is justified by the importance of providing a broader knowledge about occupational health within mental health nursing, so that future professionals who wish to enter into this area are able to seek more knowledge and skills.

One of the guidelines of the current mental health policy in the country, is to stimulate the practice of teaching, research and extension, making new positions possible for the future professionals in the health-illness process in psychiatric patients. With the functionality of this guideline it is possible to believe that the change and quality of care are likely to bring the professionals more autonomy, enhancing their ability to be healthy.⁴

METHODOLOGY

A qualitative method was used, which refers to the quality and to the approach to complex issues that are unable to be quantified, due to the fact that it is about lived reports, experiences, specific contexts and phenomena that have ocurred in individuals.⁵

Qualitative studies should provide the exact description of the phenomena and the facts to be studied and the delimitation of techniques, models and theories that guide data collection and help in the interpretation of the results.⁶

A semi-structured interview was conducted, that is a method used in the research field, in which the researcher seeks responses in the words of those being interviewed by means of a previously established script. It is a means of collecting data about events experienced by the participants.⁶

Data collection was completed in the period of August to November of 2011, with the nursing staff that worked in mental health for more than one year, in a psychiatric institution in the south of Minas Gerais, totaling ten professionals. The interview was performed in the institution in which they worked. Each professional could use the time required and without predetermination to answer the questions, however, without compromising their work, and could leave during the interview when confronted by an unexpected event.

The content of the interview was recorded with a mp4 and transcribed in its entirety, ensuring complete confidentiality of the information. The anonymity of the participants was maintained, as well as the right to withdraw from this study at any time, even after signing the term of free and informed consent, without moral prejudice or penalties.

Interviews were collected until saturation of the responses was achieved, that is, the moment in which the statements began to repeat, and when they had, then this step was concluded.

The respondents were identified with names of nursing theorists, in order to guarantee privacy in relation to their identity, and the material was used only by the researchers and advisor, with the intention of guiding research and scientific publications.

The study included nurses, technicians and nursing assistants who worked in a psychiatric institution in the south of Minas Gerais for at least one year, who agreed to participate and were in agreement with the study. We excluded those who declined to participate, were on vacation, away from their office, or who worked for less than one year at the institution.

The presentation of data was based on the content analysis of Bardin, which is used as a diagnostic tool in that the message that the interviewer transmits is subjected to specific interferences or interpretations about the behavior of the speaker. The content analysis can be a concept of significance or of the signifiers.⁷

As a theoretical framework, we opted for the work of the nursing theorist, Margaret Newman, who selected health as its focus. She considers disease as a significant aspect of health and believes that health necessitates a better definition.⁸

Newman recommends that, even though circumstances often lead to different experiences from those that one would have liked to have lived, they must be accepted as a source of new knowledge.⁸ These experiences lead to having the ability to react to stressful situations and they help to identify how much this stress can be incapacitating, because the greater the power that a person has to confront the difficulties, the lower the effects that the stress can cause.

RESULTS AND DISCUSSION

After data collection occurred through the interviews, reading and interpretation of these interviews was conducted.

In order to have a synthesis of the profile of the participants in this study, it is important to highlight some data relating to the practice, age, sex and time working in mental health.

Ten professionals of the nursing staffi were interviewed, of whom two were nurses, three were nursing technicians, and five were nursing assistants. Regarding age, it ranged from 29 to 49 years, while seven were female and three were male. Regarding the time they had worked, the shortest was established at one year and the longest time was eight years. Respondents were identified with names of nursing theorists, in order to guarantee their privacy when identifying them.

HIRING AND QUALIFICATION OF THE NURSING STAFF IN MENTAL HEALTH

The entrance of the nursing professional into mental health generally occurred only with the knowledge acquired during the educational process, although the ideal would have been to have some of the preparation and formal training that this specialty needs.⁹

It was also possible to infer, based on the same study, that what led these professionals to enter mental health was the lack of options in the labor market, submitting them to undefined roles, degrading conditions and extensive working hours. Thus, consequently, they were subjected to low incomes, being forced to seek a second work option and a double workload.⁹

The research showed that the respondents entered mental health due to a lack of options.

I did not make a choice, I did not choose, ah! I want to work in mental health [...] I was looking for a job in the city and what was available for me was mental health [...] I was in the dark [...] (Henderson).

Only two respondents reported interest in working in mental health:

A willingness to work, a curiosity, because I have always worked in clinical areas, in the hospital, but not in mental health [...] (Lydia).

When I graduated my internship was in Paulo Meniccuci, since I arrived at Paulo Meniccuci I thought the patients were very needy, suffering much, I had a love for them, afterwards I came here [...] (Newman).

As previously discussed, some professionals who currently work in the mental health field entered it without specific interest in the area. However, we still find professionals who like this area, even before knowing it through clinical practice. According to

these two respondents, the willingness to work in mental health arose even before starting professional life or after years of working in other areas, culminating with entry into the mental health field.

However, the theoretical and practical content of the undergraduate program¹⁰ is not enough for practice in mental health, nor does it serve as a stimulus for improvement, with the necessity of searching for specialization and a compliment to the education. Perhaps this explains the lack of interest by most professionals for the mental health area.

The definition of nursing, according to Margaret Newman, is care in the experience of human health. She believes that the process of care is a moral duty for nursing, that is, it is something that can be transformed by everyone in a clear and vulnerable manner, however, due to this vulnerability there is a risk of being affected.⁸

Therefore, the nursing professional needs to know his role and that of his staff in relation to the assistance of those who are mentally ill.¹¹ The nurse should advise the patients about the type of assistance that will be provided, including to: administer prescribed medications, observe the clinical outcome of the patient, coordinate the team regarding assistance provided, periodically conduct continuing education with the multidisciplinary team, control the psychotropic medications, perform nursing consults, monitor client hospitalizations and discharges and, mainly, to participate in the activities of integration of the patient with the community.

Regarding the work of the nursing technician and assistant, these professional have the function to: receive people who are seeking the service and schedule for the professionals; administer medications in accordance with prescriptions, when requested; assist in internal services, when needed; expose the work performed by groups, sell them and receive orders; help orient the family; and, to verify records and enter data into the daily record, whenever necessary.¹¹

It is possible to perceive in the following quote that professionals did not have experience related to mental health.

I was invited to come here, right? To work here [...] I never had experience with mental health (Callista).

However, one should be aware that the institution of higher and technical education represents only the initial pathway in the educational process and that one cannot only accuse the institutions for this lack of preparation, it is necessary to use strategies and resources available to pursue the relevant knowledge to confront a new situation.¹²

It was observed that professionals came from other areas of nursing care to work in mental health.

For me it was a new experience because I worked in a health center [...] at the time that the institution

was opened, I told the coordinator that I would like to change [...] (Orem).

This report shows that in the insitution there were people who were not in the health care area, however, through their experience with the patients, found there was a necessity to improve and acquire knowledge through a technical course. It emphasizes, also, that the acquired knowledge brought more security related to the work that they actually performed.

So, I received an offer for work, when I started working, I did not start to work as a nursing technician, then you see each situation here, right? [...] I decided to do technical nursing to more strongly establish myself (Martha).

After entering into mental health, it becomes essential that professionals should include qualification in their work, because we live in a society where capitalism prevails and there is more demand for qualification, or that is, to have the ability to show the best for competing in the labor market, one should not leave to the side the human being who exists in every worker. A health care institution¹³ needs employees with a good level of education, professional training, and increasingly better qualifications, seeking innovations and quality in health care.

Continuing education is important not only for the skill of a person for occasional required changes by the institution, but also to issues related to society. This training is directly linked with the professional, that is, it is a process disconnected from the institution, periodically conducted, as improvement of scientific knowledge, especially in the area of nursing, because it is through this acquired knowledge that the contribution to elevate professional standards in daily practice is acquired, directly related to the care of the institutional requirements.

In this study it was observed that professionals sought qualification in their own institution, with continuing education conducted through weekly meetings. The answer below demonstrates this fact:

[...] after I entered, then we do, a type of classes for knowledge of the diseases, their own crises, the behavior and how to deal with, right? [...] to know whether it is a real crisis of the disease or whether it is some hysteria, if it is depression. And we have learned it all here (Peplau).

The education or qualification in mental health should be focused on the social rehabilitation of the patients with mental disorders with noninstitutionalized concepts that should be sought by managers, educational institutions and the health professionals themselves.¹⁵

Despite the importance for the nursing staff to have prior knowledge about mental health work, it was observed that only two respondents had gone through this process of qualification before working in the psychiatric institution.

Yes, we had a meeting in Belo Horizonte, you know? [...] We had a preparation of about two months there before we started here [...] (Orem).

[...] I had the privilege of living with the mental health service in Barbacena in which, well, I think it was very useful for those who have the opportunity to go and to know, because their situation there is very detailed, with very positive points, the evolution of patients with mental illness to reintegrate into society is very large (Ida).

When a generalist nurse works in a psychiatric institution, he is surprised by the lack of specific knowledge, which hinders his immediate adjustment in the area, yet even given this limited knowledge, these professionals strive to become integrated into the team.¹⁶

The search for improvement must be based on the real necessities of monitoring the evolution of knowledge.¹⁷ The nurse's responsibility for the process of constant updating must be stimulated and valued. The ideal would be the development of a shared responsibility between the nurse and the institution.

The reports show that some professionals had no knowledge before working in mental health and learned through the on-the-job routine.

[...] thus, the preparation comes from the day-to-day, every day you see some different thing (Martha).

[...] I did not have any experience and I came here and I am here until today (Orem).

The theoretical and practical enhancement provides to the nursing professional a more profound approach together with the patients with mental disorders, the multidisciplinary and nursing staff and, of a higher priority, the involvement of the client and society, providing personal wellness of the professional. With this, one can rule out the possibility of problems in his mental health ¹⁸

EVALUATING OF THEIR HEALTH

We have seen an increase in the number of registered occupational diseases, which leads researchers to have an interest about this subject. Institutions require more productivity from workers, revealing an extremely competitive work environment, requiring professional attention to changes and adaptations in accordance with what is mandated by the institutions. In this context, mental and behavioral disorders related to work are becoming more real every year.¹⁹

The development of a new model of health and the introduction of the health-disease process as a unique relationship is of extreme importance to nursing, according to Margaret Newman, because it shows that there is no need to change what in fact actually exists, but rather to understand what it means in the personal relationship as it is discovered.⁸

However, the mental and behavioral disorder is only present from the moment that the employee becomes demotivated for his work, does not do what he likes and, consequently, has no pleasure at work.¹⁹

It is possible to demonstrate in the performed research that professionals consider themselves healthy to perform their functions. It was reported, also, that the health to which they refer is both physical and psychological.

In terms, in reference to my psychological health, I'm great, nothing disturbs me in working with them, on the contrary, sometimes, they motivates me (lda).

The stress that the nursing professional can acquire in his daily work is understandable, because it is a profession that requires much emotional control, for the relationship existing between patient and nurse.²⁰ The report emphasizes this issue:

Today I can say I'm well [...] I have had crises because I am a person, I am hypertensive [...] I do not know if it was also the beginning of my work here that affected me in this part, that I had been very preoccupied, I did not know the work [...], but today all is well, everything is under control, I think that today it is all good (Orem).

The work in health has as a main objective the promotion of health of individuals, their families and community, enabling this process to be directly linked to the mental health of the employee. So, the work is not, in itself, a factor of illness, but certain working conditions and their scopes can cause pleasure or distress for the employee, and, depending on how the job is done, it can be a source of personal and professional satisfaction.²¹

EVALUATING THE WORK AND FINDING SATISFACTION IN WORKING IN MENTAL HEALTH

Psychiatric nursing was already defined as an interpersonal process in which the nursing professional assists the individual, family and community in the promotion of mental health and the

prevention of disease, helping them to confront the experiences of the mental disorder and, if necessary, to find a meaning for it.²²

Margaret Newman describes that in order to have a good interpersonal relationship a person needs to be in balance with himself. The more we know about ourselves, the more clearly we will express our feelings for others and we come to better understand the other.⁸

According to the answers in the research, a relationship of exchange between nurse and patient was verified, making it possible to actualize the care provided and professional satisfaction.

I think that what I do here I do well, we have our patients that I like and they like me, accept me, today I consider myself well actualized. So it's not something I chose to do, but I would not change [...] today I choose to work in mental health (Peplau).

Work satisfaction is derived from the evaluation of employees in relation to the environment in which they work. The interaction between employees in the same area, the content of the work, the skills that the employee displays, the organization by the coordinators, the needs of individuals and the culture are relevant. In addition, personal causes outside of work can, through perceptions and experiences, influence health, performance and employee satisfaction.¹³

The responses that follow show the satisfaction that the nursing staff in the research had in their mental health work.

[...] I like to be able to help people, so that is what helped me to want to get into this area, I like mental health (Martha).

[...] I have come, checked out and fallen in love with mental health [...] I had never worked in psychiatry [...] (Ida).

The words below show that it is possible that the mental health work can be increasingly present in the life of a professional, to the point of encountering, beyond pleasurable work, satisfaction.

[...] I feel pleasure about what I do here [...] because I found myself, so, I found a profile for my profession within here (Ida).

The experience that I had, that I have, that I acquire here is incredible, very good, very satisfactory (Orem).

When the nursing professional works with mental health, he must banish his own prejudices, because people relate pa-

tients with mental disorder to possible aggression, fear, and also to the asylum. It is necessary that a detachment of that image occurs for performance of satisfactory work, for the benefit of patients and their families.²⁰

Through the performed study, these attitudes are in the process of changing, as can be noticed in the following responses:

[...] I think they are very sincere, I really like them, just the way they are, it's not what what people use to say, that they are aggressive, they are like that, that they do not have any recognition, that they do not know where they are, it is not how they are (Ida).

In order for work in mental health to be conducted as a team, it is necessary to think of care not only for the patient, but for the professional who provides the care. One factor that may contribute to improving the quality of life of employees is to provide satisfaction, recognition and, consequently, a repercussion of positive results from the activities performed. In contrast, when in distress, this professional will not have competence to understand the suffering of others, impacting negatively on health care, which may result in tension.²¹

PERCEIVING THE LIVED EXPERIENCE OF THE MENTAL HEALTH PROFESSIONAL

Leisure is essential in the life of a human being, regardless of the profession in which he works, and it has three main functions, which are: rest, diversion, and to develop the personality.^{23,24}

Resting helps to improve physical and mental distress that can be caused by obligations that are part of the day-to-day work. Diversion is related to leisure choices that a professional makes when he is away from the work environment and, finally, the development of personality is realized when the professional can think and act according to his will, and without interference from others.²⁴

When talking about work, the same author states that leisure helps in the level of mental health of nursing professionals, for alleviation of tension, fatigue and excessive stressors at work.

In the following response, various forms of leisure that the professionals used as a means of helping to perform their function were obtained.

I use, it is good to use, right? Reading, reading is very good [...] with that even I learned how to escape from the routine of here, making scarves on a loom, I have a house there that I earned, so I'm right there, I forget the problems, the things of the work, work is only in the other day (Dorothy).

The respondents demonstrated that they enjoyed their work, although they assumed it was a stressful service in the

beginning and they started to use leisure methods or even physical activity to relieve the stresses that the work provoked.

Did not use it, so much so that when I started working here I was very nervous, very stressed, I did not know what was going on with me, because it messed with my head [...] then I started doing physical activity and today I do boxing, so I'm giving a few punches there and I destress (Peplau).

In Brazil, the quality of work life has already been discussed the last few years linked to motivation, satisfaction, health and safety,²⁵ it should engage new forms of working together with technology.

Work should not be seen only as a professional activity, because it is contact with other people, both through internal and external modes, which directly interferes with one's personal life, because it interferes in the social and domestic environment, establishing the quality of one's individual relationships. This daily contact is that which can express, in a clear way, what brings the employee satisfying moments and also the elements that cause suffering that the work expresses.²⁶

The next statement demonstrates that the work in mental health changes the perception that professionals had about the mentally ill person.

Ah, I felt, felt, ah, for me it was a very big change, you know? I was not aware that we had so many cases of mental illness [...] after I came to work here I've realized how many people really need this treatment (Orem).

With regard to the nursing professionals, the lack of ability or the ignorance about that area can provoke very strong, persistent and unexpected tension, which can lead to inadequate care. The professional may feel unmotivated in the performance of his tasks and in his own interpersonal relationships. The excessive increase of stress in a person's life can hinder the ability to perform. This was well explained in the response below.

[...] At the very beginning, I was very nervous, it messed with me, I was very stressed, my sleep was restless, so, at first it was very difficult, I wanted to leave, even, I could not stand it there, but today, no more (Peplau).

Every passing day, the work becomes increasingly more significant in people's lives, a kind of identity which can be defined as both a source of pleasure and well-being, as well as being a trigger for stress and/or health problems. This work process requires discipline and responsibility of the individual for the success of purpose, being conducted in a pleasant way

according to the way it is developed, to prevent any negative changes in his life.²¹

FINAL CONSIDERATIONS

Health institutions are rarely concerned about conducting a survey of the areas of interest of their employees before they are placed within a specific sector. For this reason, the professional ends up going through a process of adaptation in a natural way, because he needs to adapt to the service. If there is a lack of adequate adaptation, the professional becomes conflicted with his work, which can cause suffering.

According to the objective of this study, it was possible to identify the manner of entry of professional nursing staff into mental health. The interviews showed that the lack of options for working in other areas, and unemployment, comprised the rationale.

Given the above, it was possible to detect in the professionals interviewed that, despite not having had this process of identifying the areas of interest, they had adapted to their work and remained satisfied with their roles, but this situation could be different if the survey was conducted in other psychiatric institutions and not just in this particular one in this region. They also mentioned that psychological support was not necessary, because according to the interviews, most subjects did not feel affected by the work in mental health.

It is important to note that, through studies conducted previously, results confirm that an employee who is satisfied with the location and type of work will have a better performance. That is, the more harmonious the relationship is between the individual and his work, the better his mental health will be. And the findings revealed that the effect of this activity on mental health did not interfere with employee health.

This study showed a population that was predominantly female, with the reasonable time of at least one year of service in the area and a workload of 30 hours per week, for nursing staff working in the institution. It also indicated that, after completion of the undergraduate nursing course, most of the participants in this study did not procure specialized courses and updating. That said, they acquired knowledge about the area in their actual working environment, that is, in their daily lives, through continuing education held weekly with the nursing staff and the multidisciplinary team.

It is emphasized that few specialized courses exist in psychiatric nursing and mental health currently in the region in which we performed this study. The different services that provide assistance to individuals with mental disorders in Brazil need professionals with knowledge that can be translated into productivity.

Furthermore, it should be noted that there is difficulty in finding scientific work in the area of nursing employee health, because of the lack of published articles relating to health of the nurse employee who works in mental health.

Despite the literature citing that working in this area is exhausting, that it can cause adverse health effects and that the workload is excessive, this was not the result found in our research, as all subjects reported satisfaction with the work.

It is concluded that research of this nature can contribute to the reflection of the practice of the nursing staff, aiming to improve the care provided to individuals with mental disorders, based on the understanding that it is necessary to rethink the prejudices that still exist in mental health.

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