

Integrative Community Therapy and its Meaning for Student Life: a Meeting of Experiences

ORIGINAL

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Abstract

Objective: Understanding the meaning of ICT (*Integrative Community Therapy*) in the life of students participating in the Extension Project "O desabrochar de si: a TCI no Centro de Atenção Psicossocial".

Method: It is an exploratory and descriptive study of qualitative approach that sought to understand the phenomenon in question using an instrument of semi-structured interview applied to students of the Education and Health Center at the Campina Grande Federal University (UFCG), Cuite *campus*, in the state of Paraíba.

Results: The results found enabled the construction of the following categories: *Knowing the (un)known: the meeting with and approach to ICT; ICT and its mobilizing potential;* and the following subcategories: *Revealing a cycle of discoveries; Unveiling experiences for life.* This study revealed that ICT has a relevant impact, bringing forth positive changes in the life of students in question.

Conclusion: It can be said that the participants expressed satisfaction and personal changes, since ICT availed at rescuing essential values for their lives, favoring the discovery and the finding of strengths to face the adversities of daily life. The students found in the Extension Project and in ICT a source of support for personal improvement, besides giving the opportunity for the creation and strengthening of bonds between the team, community and professors.

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Introduction

According to the World Health Organization (WHO), health is defined as the complete state of physical, mental and social well-being, and not simply the absence of infirmity. Such concept creates a relationship between people life quality and health, so that the subjects suffer influence of the environment in which they live, besides the conditions of goods and services available. On account of this, it results of a process in which an individual must be seen in holistic way, observing its social, spiritual and cultural context. [1]

In this context, according to the concept mentioned above, health in general and psychiatric assistance occupy a scenario of extreme importance in Brazil. These sectors went through various transformations up to the current model of attention, particularly in the sphere of mental health. Based on these assertions, there have been a variety of happenings of historic importance for the conjuncture that is presented today.

In its earliest history in this country, there is the Psychiatric Reform (RP) that began by the end of the 70's, bringing many changes and comprehending in its core the fight for reformulation in the psychiatric molds, since the methods and techniques employed came to be regarded as ineffective and responsible for intense violation of the human rights. [2]

RP also proposed the creation of new services that could transcend the fields of medicalization, providing better assistance and treatment for the individual affected by mental illness, as well as the production of new social interventions and new conceptions on insanity, such measures representing a milestone in this movement in Brazil. [2]

Having as a base the older model of attention to mental health condemned by RP, Sá et al (2012) affirm the existence of a constant shortage of spaces in health services to care and understand the individual in his social, spiritual and cultural context. Besides the few strategies available, it is also pointed out that the intra-structure doesn't favor the health

teams in the promotion of an integral treatment of its users. [1]

Therefore, understanding that mental illness is an event that assaults the individual by many causes, consideration is given to the need for creation and implementation of new strategies and technologies to help in facing daily suffering. Based on this, Integrative Community Therapy (ICT) emerges as technology for the care in the field of mental health, bringing in its proposal the importance of working for the promotion of health and prevention of illness. [1]

ICT was idealized by the psychiatrist and anthropologist, professor and doctor Adalberto de Paula Barreto, at the slums of Pirambu, located in Fortaleza, capital of the state of Ceara, in 1987. It emerged as an alternative that aimed at working with diverse groups of people, with different characteristics, in a dynamic, participatory and reflexive way, favoring an open space for its participants to speak about problems and concerns that are afflicting them at that time. Such resort favors also the creation and strengthening of bonds, besides stimulating the recovery of autonomy, since this tool facilitates the transformation of deficiencies into proficiencies, enabling them to face hardships such as pain, loss, personal and/or family conflicts. [3]

According to Ferreira Filha; Lazarte and Dias (2013), ICT may be considered as a space of refuge from suffering, so that in its meetings people sit side by side, forming a circle, allowing the creation of bonds, sharing of concerns, problems or hardships in their daily life, besides the sharing of positive experiences such as joys, victories or overcoming stories. ICP aims at learning through listening experiences from the other participants, thus appreciating self-knowledge, so that each one is responsible for seeking one's own solutions and for the overcoming of daily challenges. [4]

According to the National Health Council (CNS), in 2008 ICT was incorporated in the Ministry of Health (MS) as a health promoting and illness prevention

strategy in the sphere of primary attention, especially in Family Health Strategy (ESF). ICT can take place in many spaces beyond FHS, such as Psychosocial Attention Centers (PACS), hospitals, schools, churches, prisons and other community spaces. [5]

It can also be performed in diversified groups both in a general context and in their specificities (the aged, women, teenagers, children, among others) and with similar problems (PACS users and their relatives), people going through the treatment of an illness of major hindrance and that may develop mental suffering, such as cancer, hemodialysis, women facing violence situations, visual deficiencies, among others. [6]

Several studies prove the positive effect on people participating in ICT regarding the solving of daily problems that may generate anxiety and insomnia, contributing to harms in physical and mental health in many life moments. [7]

In this perspective the interest for the present research emerged from the experience of the researching in the Extension Project "*O desabrochar de si: a TCI no Centro de Atenção Psicossocial*" involving professors (who are also community therapists) and students of the baccalaureate degree in Nursing, representing an initiative of the Campina Grande Federal University (UFCG) with the Psychosocial Attention Center (PACS). As a requisite for participating in the Project, the students should have concluded the discipline of Mental Health, since knowledge in this field was necessary for the activities to be developed.

Given the above, the accomplishment of this work is justified by necessity of investigating the impact of the aforesaid Extension Project, as well as the influence and contribution for the life of the participant students. Then it is expected that this investigation should contribute to the development of future researches, expanding the body of knowledge on this subject. This work also aims at contributing and enlarging the discussions on this practice in the area of Health and Education.

Furthermore, this study brings as its general object: comprehending the meaning of ICT in the life on students participating in the Extension Project "*O desabrochar de si: a TCI no Centro de Atenção Psicossocial*".

Methods

It is an exploratory-descriptive study with a qualitative approach, which allows observing the kind of language (spoken, written, symbolic) expressed through human behavior, as well as the analysis of the meanings of experiences and human relationships. [8]

Such research was performed at the Education and Health Center of the Campina Grande Federal University (UFCG), Cuite *campus*, in the state of Paraíba. The subjects of the study were represented by six students of the baccalaureate degree in Nursing that also were participants in the Extension Project "*O desabrochar de si: a TCI no Centro de Atenção Psicossocial*". Thus this study includes: students over 18 years old, students regularly enrolled in the baccalaureate degree in Nursing at UFCG – Cuite *campus*, volunteer extensionists and collaborators in the already mentioned Extension Project. The subjects who weren't linked to the activities of this Extension Project were excluded.

The collection of empirical data was done through the use of a semi-structured interview questionnaire, containing questions referent to the participants' socio-demographic data and questions relative to the apprehension of the contents pertinent to the surveyed objectives. These ones approached mainly questions related to the repercussion of the Project in the life of the extensionists.

After the authorization from the Research Ethics Committee, the activities of collection began in the month of July 2016. The collection of empirical data occurred by means of individually scheduled meetings at the university campus. All interviews were recorded and transcribed shortly thereafter,

and an MP3 type voice recorder was used for the apprehension of speech. It must be highlighted that the approach for the development of the interview occurred individually, respecting the individuality of each participant.

The evaluation of the empirical data proceeded through the interviews was made through the technique of content analysis proposed by Bardin (2011). [9] The same is indicated for researches with qualitative approach, since it aims at investigating the kind of speech and interpretation that is intended as objective. That is, it puts the investigator in an effort of interpretation of the message transmitted, in order to see and to know how to interpret what was not said.

Such research respected the ethical precepts, for according to what the Resolution 466/2012 of the National Health Council advocates [10], researches involving human beings must assure and guarantee the ethical and scientific requirements that are fundamental for its development, being indispensable respecting the autonomy and the human dignity, allowing the participant to decide in a free and enlightened way his permanence or withdraw from the research. The research was done after the approval of all formalities at the Research Ethics Committee, mainly through the presentation of the TCLE and the permission of the participants after signing it.

Results and Discussion

The research had as a general objective understanding the meaning and the impact of Integrative Community Therapy (ICT) in the life of students participating in the Extension Project "*O desabrochar de si: a TCI no Centro de Atenção Psicossocial*". It was developed through recorded semi-structured interviews, aided by a questionnaire of semi-structured interview, in which questions about the subject were directed to the extension students of that Project. Hence, answering these questions, positive points and feelings were verbalized by participants.

The results found enabled the building of the following categories: *Knowing the (un)known: the meeting with and approach to ICT; ICT and its mobilizing potential*; and the following subcategories: *Revealing a cycle of discoveries; Unveiling experiences for life*.

Knowing the (un)known: the meeting with and approach to ICT

ICT emerged as a proposal of Permanent Education in Health (PEH) and is characterized as a care tool used as psychosocial intervention in a variety of services in the field of health and education, mainly in the sphere of Basic Attention (AB). [10]

ICT is considered to be a therapeutic strategy that may involve distinct groups of people, evidencing the potentialities of these individuals, providing through its circles a harmonization between mental, physical and spiritual balance, through its systemic approach, evoking the beliefs and cultural values of these participants. This care technology coheres with both popular and scientific knowledge, defending the idea that these two kinds of knowledge may very well inhabit the human being without blurring one another. [7]

Thus through the diffusion of ICT through national territory and in health services, the importance of working this matter yet in the sphere of universities was observed, mainly in health courses, given the importance of bringing this tool for the field, since many studies attest its efficacy as psychosocial intervention.

ICT may be implemented as a health practice able to being developed in the disciples of Mental Health, Psychiatry among others and also in Extension Projects, so that through this contact those students who would identify themselves with the proposal may seek more knowledge on this matter and even become community therapists, using this strategy in their future profession. ICT may also be presented as a therapeutic object able to help students in overcoming the demands of academic

nature, furnishing a contribution for the emotions that outcrop from these individuals.

In this perspective, the participants in the survey brought significant contents when the following question was cast:

“How did you know of ICT and how was your first contact with these tools?”

I met Community Therapy in a lecture on mental health, in which the professor talked about alternative and complementary practices in healthcare.

S1.

I met it when I attended the course on Complementary Therapies in the fifth term, in which the professor introduced some therapies and Community Therapy among them. And my first contact was through a circle done in classroom with the class.

S3.

The answers imply that the first contact with ICT happened yet in the academic environment. The study of Buzeli; Costa e Ribeiro (2012) ascertain the importance of implementing ICT within the academic curriculum with the intention of encouraging and propagating about it, as well as bringing better life quality to the students, since they tend to go through stressful situations, preoccupations with the academic demands, besides being a device helping to face situations of suffering, such as homesickness. [7]

According to the answer of S1, ICT was presented as an alternative practice in healthcare. It must be emphasized that ICT is inserted in the National Policies on Integrative and Complementary Practices (PNPIC). Moraes (2014) affirms that this policy takes on an important role in the sphere of healthcare, since it offers therapeutic resources that involve approaches able to stimulate natural mechanisms of harm prevention, which use listening as a tool to evoke the potentialities and promote the develop-

ment of a harmonious bond between group and therapists, through the interaction between them. [11]

Thus it was seen in the answers above that the contact with ICT in the university was not limited to one discipline, but is also worked out in other curricular components, reinforcing the importance of propagating this practice in a variety of moments and academic opportunities. Thereby the answers below point to the satisfaction with this first encounter with ICT:

My first contact with ICT occurred through the course on Mental Health, in which the professor ministering it organized a circle and brought a guest. In this circle, we could talk a little more on our problems and get to know the finality of ICT.

S3.

My first contact with ICT occurred through the Extension Project “O desabrochar de si: a TCI no Centro de Atenção Psicossocial”, in which at first the circle was done with the project participants, and it was a unique and outstanding experience in my life.

S6.

In both cases above, the accounts report the pleasure in getting to know ICT. Thus when they got to know the proposals of this methodology, be it in class as for S4 or through the Extension Project, mentioned by S6, the interviewees expressed identification with ICT. The study of Ferreira Filha, Lazarte and Dias (2013) indicates that ICT stimulates in its practice an approach to the individual for itself, recovering self-esteem, strengthening resilient capability and empowerment, through the potentiation of the individual and collective resources as it favors the overcoming of daily adversities, reinforcing the relevance of disseminating it in the academic environment. [4]

When questioned on *“What awakened in you the desire of knowing ICT better?”*, the extensio-

nists pointed out relevant aspects, as the following extracts show:

I liked the way ICT is done. It awakened a certain amount of curiosity to know more deeply how it would be developed.

S2.

Since we had participated in only one ICT circle during the course, I noticed that the students got very involved in it. Seeing that circle did awaken internal feelings, desire of self-expression, outbursting and thrilling, I wanted to go deeper and know ICT better.

S3.

What awakened in me the curiosity to know ICT better was the first circle, where I could expose my problems and I saw it was nothing. My problem was nothing in comparison with the others' ones.

S4.

The answers related to the addressed subject glimpse the way ICT is done, which served as motivation for the interviewees knowing better this soft care technology. Ferreira Filha, Lazarte and Dias (2013) highlight in their investigation that in ICT people sit side by side, thus forming a circle, proportioning better approximation between them, since this disposition facilitates vision and the sharing of problems, concerns and other hardships. It also favors the sharing of life experiences, be it of victory, overcoming or joys that may serve as a stimulus for those people going through a difficult moment. [4]

Confirming the answers above, the above mentioned authors report also that while participating in the circles, the individual learns through listening to the life stories of the other participants how to develop his competence capability both in personal and group contexts, given that all are responsible for searching solutions and fighting

to overcome the daily adversities. Respecting the speech of the other person, giving no hint, making no judgment, but listening, are important details, since everyone has a personal problem, and that it is necessary to respect the life story of the other person.

When I participated in my first circle, I felt very well and I was in the mood of participating more, of knowing more of it. Then when the Extension Project selection came, I got fascinated.

S5.

What awakened the interest in me for ICT was that, during the Project meetings, the discussions got deeper and deeper, the ICT circles at PAC were taking place and I felt motivated, since we could understand a little more and participate more actively in the circles.

S6.

The interest in knowing ICT better reported by S5 occurred through the satisfaction in participating in the circle, which in turn motivated her to participate in the Extension Project. On the other hand, the S6 interviewee reports her interest through participating in the Extension Project, being encouraged to read on the subject, and also being able to putting into practice what was discussed in the meetings, in the ICT circles in PACS, providing a sense of experience exchange amid the academic community that brings its knowledge and the community per se that offers popular knowledge, filling the goals of university extension, as affirmed by Nunes and Silva (2011) in his study. [12]

The sense of welfare is a commonplace among the participants that know ICT, since they're stimulated to participate more and more, for in the circles not only problems are discussed, but everyone's victories and conquests are appreciated, and also the celebration of good things that happen to the life of a dear person or even of the participant himself. Thus ICT induces the capability of the human

person to seek inner happiness in the simplicity of things. [11]

ICT and its mobilizing potential

This category addresses the reports from the extension students on the influences the Project brought to the life of each one, what they learned, as well as the contribution the Extension brought to the life of the undergraduates.

ICT possesses mobilizing potential, for it provides conditions for people to deal better with their own emotions, insecurities and daily adversities, making them know their own limitations, being this conception responsible for nurturing personal appreciation. ICT contributes also to potentiate the self-esteem of its participants by awakening one's resilient power. [13]

The students that participated in the Project as extensionists could benefit from everything ICT could give them. Araruna et al (2012) affirm that this care technology brings personal transformation that makes people benefiting from it more sensible to community problems, for after listening to the suffering of the other person, a process of reactive action begins, through the care for the neighbor, given that the human being starts seeing life in a different perspective, giving more importance to moral values and to the respect for the neighbor. [13]

In face of these assertions on the contributions of ICT as a work object of an Extension Project, it is verified that it brings a life-changing potential, be it for the community therapist or any other member of the circle.

Revealing a cycle of discoveries

ICT has been showing its importance in the field of healthcare. In face of the necessity of knowing it better as a care tool, it became a study object in many universities in Brazil, especially in university Extension projects and scientific surveys, given its capability of transformation in the life of those who participate on it. Divino et al (2013) affirm

that through its approaches this activity possesses a capacity of subsidizing social transformations, as well as interfering and influencing the life of the individual and of society itself. [14]

This subcategory deals with the discoveries brought by the participation of the students in the aforementioned Extension Project. Through the accounts below the repercussions of ICT in the life of the extensionists may be observed, as follows:

I found that the Project brought many contributions for myself, for the professors always opened space for us to contribute in the form we think it's best.

51.

It was a unique experience in my life, both personal and academic, because we could experience a diversity of moments there at PAC with the users, the relatives and between us from the Project. These moments will be remembered forever

53.

My participation in this Extension Project was of extreme importance, because we all perceived that people need to learn to put oneself in else's shoes, to exchange experiences, to self-expose, to speak, because what we often need is simply putting what bothers us out.

54.

Nunes and Silva (2011) state that university extension works as a bridge between university and society, making an exchange of knowledges between these two realities, seeing the necessity of socializing and sharing learning experiences, bringing to those who need this kind of support experiences of social transformation, both to the involved students and to the community that benefits from this contact. In this sense, being ICT an instrument of social inclusion and sharing, it shows itself to be useful as a potentiator of reflections and practices of change. [12]

Thus the accounts of the interviewees dialogue with the principles brought by the conceptual core of university extension, as they consider the importance of knowledge sharing and collective interaction.

The importance of ICT in people's lives is verified as we identify in these accounts the personal transformation in the life of every student and knowing that they also relied on the contributions of the Project.

Oliveira et al (2015) state that many transformations evoked by ICT occurred through active participation of the participants during the meetings, through a word of support, a song, poetry, listening or moments of sharing and welcoming. [15]

Araruna et al (2012) report that when one tries to understand the pain of the other in ICT, the feeling of respect, care and personal appreciation emerge accordingly. The accounts below are related to these characteristics:

I liked that throughout the Project many experiences were realized and I know that it helped other people to see things better, to empower themselves. And I also learned much with it, with our conversations, with cherishing relationships, with the importance of caring of one another.

S5.

I learned that sometimes we think we got a big problem, and when we go to ICT we discover our problem is small in comparison to what we see, to what is reported, the suffering of everyone. When they relate it, I think it's a great learning for us.

S2.

"From the circles of ICT I could realize the importance of listening to the other, so that we can see our own problems, the situations that emerge in our lives and that often have no explanation, and get strengthened from that moment on.

S4.

According to Cordeiro et al (2011), on the overcoming of difficulties, needs, sufferings, there is a restoration of the competence capacity and of a sensibility that is inherent to the interior of the subject. Thus it's evidenced that more than identifying distresses and adversities, it's important to find through it forces and to evoke people's capacity to overcome these problems. [16]

The study by Buzeli, Costa and Ribeiro (2012) corroborate with some aspects verbalized by the interviewees, reinforcing that when one listens to the problems of the participants in the circle, they can evaluate and identify the dimension of their dilemmas, developing their capacity of resilience, learning and maturation. The accounts below are also related to these ideas:

I had a huge personal growth. I learn to listen to people without judgement and without giving opinions, to see people in a different perspective, as they really are, without prejudices. I learned to work within a team for the welfare of the neighbor and learn specially that just like me people also have their problems and nonetheless they don't let themselves down. I learned that each one is a therapist of himself.

S6.

"I learned to be stronger, to be more resilient, to face my problems. Because before it I felt weak and now I discovered that I'm not so much a victim person, that I'm not a weak person, that I'm a strong person, I'm discovering myself!

S5.

Through its dynamics and integrative method, ICT values popular practices and accumulated knowledge of their participants throughout their life story. Moraes (2014) affirms in his study that one of the basic principles of this care tool is the possibility of self-working in so far as we know and listen to the other's pain, recovering the self-

esteem of each one. Thus people start reflecting on their decisions that have to be made and respect the shared emotions. The same author also emphasizes that through the experience of the ICT circles each person develops his resilient capacity, and each one becomes a therapist of himself, bringing to himself the responsibility of solving their problems, seeing them as they really are. [11]

In the accounts of S5 and S6 one may observe the feeling of personal appreciation, of knowing how to channel for themselves what really matters, besides seeing the other person as their neighbor, without judgements. Araruna et al (2012) state that another contribution brought by ICT, which was observed in the project, is the importance of team-working, for from the moment one has a better relationship with one's own "I" onwards, we may observe better relationship with colleagues and relatives. [13]

Revealing experiences for life

Knowing ICT means knowing that this soft care technology represents a world to be explored, for it brings in itself approaches that stimulate autonomy based on Paulo Freire's pedagogy, as it defends the idea that every person has the capacity to empowerment and also the potential and the responsibility to transform their own lives. [3] The accounts analyzed below reveal that the participants found their spirit of harmony and personal fulfillment through ICT:

In face of the self-knowledge that ICT offers to us, we can reflect on feelings that are deeply stored and that are difficult to expose to someone. But since the ICT circles give us this openness, I learned that I must never desperate, but sit, observe everything I lived, for everything generates some learning for life.

S6.

Before knowing ICT I was a person who put problems above everything else. And from the moment I began participating in the circles, I saw that problems exist, but that everyone can overcome them within one's own individuality. I also learned and liked a lot from ICT because people listen to your problems, your anxieties, your hardships without any prejudice.

S4.

Ferreira Filha, Lazarte and Dias (2013) indicate that the space where the circles of ICT happen is a space freed from prejudices, so that each one may express their problems without judgement. A welcoming environment is promoted, adequate for people to talk on their daily anguish, and from there on they see themselves within a process of self-knowledge, stimulated by the moment of awareness of that situation. [4]

The interviewees report that as they listen to the life stories of the ICT circles participants, they were led to reflect and to know themselves better, in the measure that they identified with the discussions evoked in that environment. Another exposed feeling was of patience to daily events, as it's necessary to understand that one's own social context contributes to the development of negative feelings and sentiments from the daily adversities, be it because of university demands, homesickness, necessity of having a more active social life or other reasons.

In the beginning of the Project, I had other thoughts and along the ICT circles we participated in, we could experience a lot of exchange and sharing of living, experiences... and I made me mature even more.

S1.

ICT taught me to listen and to say what you feel. During this time I participated in the Extension Project I learned a lot, because I want to study more on ICT, I want to do a training course, I want to be a community therapist, because it already part of my life and I want to bring it to the lives of other people, I want ICT to gain the world!

S5.

"I got more friendships, I learn to appreciate my family more, to understand the other, to put myself on else's shoes, to be more resilient. ICT arose in the moment I most needed it, because it helped to overcome my problems, my fears, and now I try to face them.

S4.

The S1 interviewee states that ICT gained more and more space in her life, since as she got to know this care technology more and specially when entering the scenario where the circles were performed, she became sensitized and progressively identified with the shared experiences.

In general, from the accounts of the students, one may verify the enthusiasm and the interest in keeping contact with ICT, such pretension being shown in the discourse of S5, who affirmed she wants to join a training course in ICT and become a community therapist. The participant also states her will to bring ICT to many people, diffusing even more the knowledge of health promoting and illness preventing strategy.

Making reference to all accounts, it may be said that the participants expressed satisfaction and personal change, since ICT contributed to restore essential factors for their lives, favoring the discovery and the disclosure of forces to face the daily adversities. In this conjuncture, confirming the findings in this study, Carvalho et al (2013) state that ICT develops in their participants the capacity of reflecting on the reality in which they're inserted, so that as

a consequence they might deconstruct conceptions on their own life, directing coping strategies in face of daily clashes. Furthermore, it is identified that the students found in the Extension Project and in ICT a source of support for personal improvement, besides giving opportunity to the creation and strengthening of the bonds between group, community and teachers.

Conclusions

The National Policies on Integrative and Complementary Practices (PNPIC) appeared as a proposal to incorporate to SUS strategies that might offer therapeutic resources involving approaches that stimulate natural mechanisms of harm prevention and health recovery through care tools such as ICT.

This technology emerged as a therapeutic proposal directed to soften human suffering through approaches that stimulate encourage empowerment, as well as potentiate discoveries, making the one elaborate solutions to personal adversities.

It's ascertained that ICT offers various contributions, since it understands the individual as responsible for solving his own problems, through his beliefs and social, moral and cultural values. This care tool brings the capacity of personal transformation in a space where one can hear and experience the listening to someone else's suffering, for when one identifies with or puts oneself in else's shoes, possible solutions for that problem arise, and also feeling of self-esteem, thankfulness and personal appreciation, promoting better life quality.

Moreover when one deals with ICT as a therapeutic approach, its relevance is emphasized as a study object that may be offered through an Extension Project, making a bridge between scientific and popular knowledges as it involves both academia and society. Thus this vehicle brought a diversity of benefits, given that both realities get benefited.

In face of that it was verified that the present research succeeded in meeting its main objective: understanding the meaning and impact of Integra-

tive Community Therapy (ICT) in the life of students participating in the Extension Project "O desabrochar de si: a TCI no Centro de Atenção Psicossocial". It was seen that ICT brought improvement for the life of its participants, since they found in it support to face their own daily adversities, both in personal and academic spheres.

On the participation of the students in this Project, they could benefit from ICT in terms of personal transformation, increase of self-esteem and personal appreciation, in so far as human values were recovered. Another point to be observed as a contribution was the fact that they got to know ICT wholly, through studies realized during the duration of the Project's length. It was primordial for the comprehension of this study object, thus evoking the need for surveying it and bringing it closer to people.

Thus during the construction of this study some difficulties were found with respect to the scarcity of literature on this matter. Hence the necessity of having more investigations referring to the exposed subject is emphasized, since it may subsidize and work as an aid for the construction of other researches, so that ICT may be more and more diffused and appreciated as a tool of investigation and care for health, in face of the contributions listed in this research.

Contributors

Maria De Lourdes Matos: contributed substantially with the collection, analysis of the empirical data and general construction of the research;

Mariana Albernaz Pinheiro de Carvalho: contributed substantially to the correction and planning or for data analysis and interpretation;

Francilene Figueirêdo da Silva Pascoal: contributed significantly to the elaboration of the draft or critical review of the content;

Edlene Regis Silva: contributed significantly to the elaboration of the draft or critical review of the content;

Maria de Oliveira Ferreira Filha: participated in the approval of the final version of the manuscript.

Gabrielle Porfirio Souza: contributed significantly to the elaboration of the draft or critical review of the content;

Narjara Luiza Fernandes Dantas Muniz: contributed significantly to the elaboration of the draft or critical review of the content;

Antônio Herculano de Araújo Neto: contributed significantly to the elaboration of the draft or critical review of the content.

References

1. Sá ANP, Rocha IA, Moraes MN, Braga LAV, Ferreira Filha MO, Dias MD. Conflitos familiares abordados na terapia comunitária integrativa. *Rev. Eletr. Enf.* 2012[cited 2016 mar 03]; 14(4): 786-93. Available from: <https://www.revistas.ufg.br/index.php?journal=fen&page=article&op=view&path%5B%5D=15695&path%5B%5D=13342>.
2. Souza GML, Silva PMC, Azevedo EB, Ferreira Filha MO, Silva VCL, Espinola LL. A contribuição da terapia comunitária no processo saúde-doença, *Cogitare Enfermagem.* 2011[cited 2016 Feb 24];16(4):682-8. Available from: <http://ojs.c3sl.ufpr.br/ojs/index.php/cogitare/article/view/23030/17059>.
3. Carvalho MAP, Dias MD, Miranda FAN, Ferreira Filha MO. Contribuições da terapia comunitária integrativa para usuários dos Centros de Atenção Psicossocial (CAPS): do isolamento à sociabilidade libertadora. Rio de Janeiro: *Cad. Saúde Pública.* 2013 [cited 2016 Feb 22]; 29(10): 2028-38. Available from: http://www.scielo.org/scielo.php?script=sci_arttext&pid=S0102311X2013001400019.
4. Ferreira Filha MO, Lazarte R, Dias MD. Terapia comunitária integrativa: uma construção coletiva do conhecimento. Editora Universitária da UFPB. 2013 [cited 2016 Feb 23]: 17. Available from: <https://drive.google.com/file/d/0B4KS2GvQoLgHQXM1VS1tIpfSWc/view?ts=5644450d&pref=2&pli=1>.
5. Conselho Nacional de Saúde, Ministério da Saúde. Relatório Final da IV Conferência Nacional de Saúde Mental. Brasília: Ministério da Saúde; 2010.

6. Ferreira Filha, MO; Lazarte, R; Barreto, AP, Impacto e tendências do uso da Terapia Comunitária Integrativa na produção de cuidados em saúde mental, *Rev. Eletr. Enf.* 2015[cited 2016 Mar 17]; 17(2):172-3. Available from: <http://dx.doi.org/10.5216/ree.v17i2.37270>.
7. Buzeli CP, Costa ALRC, Ribeiro RLR. Promoção da Saúde de Estudantes Universitários: contribuições da Terapia Comunitária. *Revista Eletrônica Gestão & Saúde.* 2012 [cited 2016 Mar 17]; 03(01): 608-19. Available from: <http://gestaoesaude.unb.br/index.php/gestaoesaude/article/viewFile/151/pdf>.
8. Minayo, MCS. O Desafio do conhecimento: pesquisa qualitativa em saúde. 12ª. ed. São Paulo: Hucitec/Abrasco. 407; 2010.
9. Bardin L. Análise de conteúdo. São Paulo: Edições 70; 2011.
10. Brasil. Conselho Nacional de Saúde. Resolução nº 466 de 12 dezembro de 2012. Dispõe sobre as diretrizes e normas regulamentadoras de pesquisas envolvendo seres humanos. Brasília, DF. 2013 [cited 2016 abril 06]; 59. Available from: <http://conselho.saude.gov.br/resolucoes/2012/Reso466.pdf>.
11. Moraes, NM. Terapia comunitária integrativa no sertão paraibano: avanços e desafios no contexto do sus. 2014. [cited 2016 Sep 01] 112f. Dissertação (Pós-graduação em Enfermagem) – Universidade Federal da Paraíba, João Pessoa-PB, 2014. Available from: <http://tede.biblioteca.ufpb.br/handle/tede/5154>.
12. Nunes, ALPF; Silva, MBC. A extensão universitária no ensino superior e a sociedade, *Mal-Estar e Sociedade - Ano IV*, Barbacena. 2011 [cited 2016 Aug 26]; 7:119-133. Available from: <http://www.uemg.br/openjournal/index.php/malestar/article/view/60/89>.
13. Araruna, MHM, Ferreira Filha MO, Dias MD, Braga LAV, Moraes MN, Rocha, IA. Formação de terapeutas comunitários na Paraíba: impacto na Estratégia Saúde da Família, *Rev. Eletr. Enf.* [Internet]. 2012 [cited 2016 sep 02]; 14(01): 33-41. Available from: https://www.fen.ufg.br/fen_revista/v14/n1/pdf/v14n1a04.pdf.
14. Divino AEA, et al. A extensão universitária quebrando barreiras. Aracaju: Cadernos de Graduação - Ciências Humanas e Sociais. 2013 [cited 2016 Aug 26];1(16):135-40. Available from: <https://periodicos.set.edu.br/index.php/cadernohumanas/article/view/491/253>.
15. Oliveira RNS, Jardim JTP, Oliveira EN, Alves RD, Moraes TTM. A Terapia Comunitária e preceptoria em pet-redes/ psicossocial: reflexões a partir de uma perspectiva do cuidado. *Sanar e Suplemento.* 2015 [cited 2016 sep 02]; 14(2): 17-0. Available from: <https://sanare.emnuvens.com.br/sanare/article/view/857/517>.
16. Cordeiro RC, Azevedo EB, Silva MSS, Ferreira FILHA, MO, Silva PMC, Moraes, MN. Terapia comunitária integrativa na estratégia saúde da família: análise acerca dos depoimentos dos seus participantes. *Revista da Universidade Vale do Rio Verde, Três Corações.* 2011[cited 2016 sep 01]; 9(2):192-201. Available from: <http://revistas.unincor.br/index.php/revistaunincor/article/view/150/pdf>.

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