

ORIGINAL ARTICLE

# EMBROIDERING HEALTH: PERCEPTION OF WOMEN WITH PSYCHOLOGICAL DISTRESS ABOUT THEIR EXPERIENCES IN A THERAPEUTIC WORKSHOP

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### **ABSTRACT**

Objective: to know the perception of women with psychological distress about participation in a therapeutic workshop. Method: Qualitative, descriptive study based on the narrative approach. Data was collected from April to June 2019, through open and individual interviews with six women, over 45 years old, in psychological distress, who participated in therapeutic workshop that uses embroidery as an inducer of dialogue, in Mato Grosso do Sul, Brazil. Data was analyzed by Thematic Content Analysis. Results: The workshop enabled the participants to experience changes in their lives through the exchange of affections and mental health promotion. It is also a space for rebuilding and strengthening bonds, expressing feelings, developing communication and managing daily difficulties. Conclusion: The therapeutic workshop can provide new ways for nurses to implement assistance in the context of mental health, favoring dialogue, care and production for health.

**DESCRIPTORS:** Mental health; Art therapy; Psychiatric nursing; Health promotion; Qualitative research.

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### INTRODUCTION

The Brazilian Psychiatric Reform Movement boosted transformations in the scope of mental health care, with an emphasis on social reintegration practices, aimed to develop autonomy and the creation of bonds between professionals and users of mental health services. In this sense, it is necessary to reflect on the therapeutic practices in the different psychosocial care devices to promote reception and meet users' demands (1).

Thus, actions anchored in the Psychiatric Reform movement contribute to the inclusion of subjects and discuss the stigma experienced by people with psychological distress and mental illness, particularly because this experience causes social exclusion for those who experience it (2).

Among the care resources developed in mental health services, therapeutic workshops are an approach that favors welcoming, coexistence and dialogue. These workshops are perceived as spaces that promote production, development of social relationships and strengthening of bonds between people who share the experience of psychological distress, and can be considered therapeutic as they provide a space for expression and welcoming of participants. Moreover, they are characterized by collective work, promote coexistence, the exchange of experiences and affections, the uniqueness of the individual and their creative potential (3-5).

Art supplies are commonly used in therapeutic workshops, due to their potential for the development of motor, visual and spatial skills, the stimulation of creativity and human communication, the expression of feelings and thoughts, relaxation, leisure and recreation, and for the promotion of self-esteem. Thus, activities such as painting, drawing, clay, dance, theater, dramatization, films, photography, poetry, literature and music are therapeutic resources that allow the production of subjectivity, the construction of life projects and the reconstruction of the citizenship of users of mental health services<sup>(6)</sup>.

Likewise, manual work such as embroidery can be used therapeutically as it transcends functionality and improves the subject's daily life. In other words, the process of construction of embroidery, with a therapeutic purpose, for example, results from choices, observation, dedication, construction and persistence. Thus, the product is not only the embroidery design, but the result of the individual's active production throughout the process. It should be noted that the individual is no longer an object of intervention and becomes the subject and agent of his/her own treatment (7-8).

With the higher prevalence of psychological distress and mental illness, especially in the female population, studies have investigated the intersection between mental health and women's health. Hence, some factors associated with this phenomenon have been highlighted, e.g. low income and educational level, history of violence, absence of support networks, as well as different feelings such as impotence and low self-esteem (9-11).

In Brazil, a country with well-defined gender inequalities, women use mental health services more and are more vulnerable to anxious and depressive symptoms than men. In this scenario, we emphasize the importance of developing actions, such as therapeutic workshops, in order to provide psychosocial support for women in facing life experiences<sup>(9-11)</sup>.

Based on the aforementioned, the present study aimed to gain insight on the perception of women in psychological distress about participation in a therapeutic workshop.

**METHOD** 

Qualitative descriptive study based on the methodology of narrative analysis (12).

The study was carried out with women participating in the Therapeutic Workshop "Stitching Lives into Embroideries". This workshop is the product of a university extension project, started in 2017, aimed to strengthen relationships and affection through manual work, especially embroidery, as well as promoting guidance on issues related to self-care, climacteric, menopause, sexuality, family, relationships and work.

During the study, the workshop meetings were held weekly, on Fridays, with an average duration of two hours and 30 minutes. The workshop consisted of 17 active participants, with an average of 12 women at each meeting. Participants were over 45 years of age, suffered from psychological distress (with or without a medical diagnosis of mental disorder), and were referred by the Psychosocial Care Center (CAPS) or accessed the workshop at the clinic.

Women who have participated in the workshop for at least six months were included in the present study. Women who did not have cognitive or emotional capacity to participate in the interviews at the time of data collection were excluded. This cognitive ability was evaluated by a psychiatric nurse specialist, who was involved in the project team, through a mental status examination.

Data was collected from April to June 2019, in a private office at the school clinic, after the end of the workshops or at another time previously scheduled with the participant, which did not interfere with their participation in the therapeutic activity.

Data collection was carried out through single individual interviews guided by a semistructured script, consisting of close-ended questions regarding sociodemographic data and open-ended questions. One guiding question was "How did the therapeutic workshop contribute to your social relationship?", and there were three support questions "What was your relationship like with friends, relatives, family (...) before you started participating in the workshop, and what is it like today?", "What was your life like before participating in the workshop and how is it now?", "Do you notice differences between before and after participating in the workshop?". A field diary was also used, containing important information and observations during the interview.

The interviews, which lasted approximately 20 to 30 minutes, were conducted by two trained researchers and recorded on digital media. The participants had previously provided written consent for their interviews to be recorded. Subsequently, the interviews were transcribed in full and, in order to preserve participants' anonymity, their names were replaced by an identification code: letter "I", followed by the interview order number of the participant (I1, I2...)

All interviews were read in full and analyzed based on thematic content analysis <sup>(13)</sup>, through the identification and extraction of codes and thematic cores, which were grouped into subcategories and, later, into categories.

The following nuclei of meanings emerged from the analysis process: change in behavior, emotions and feelings; improvement of family bond; improved communication with other people; willingness to bring others to the workshop; resumption of activities such as studying; sharing of experiences, feelings and affection; self-knowledge; feeling of well-being; promotion of affection, affection, union and friendship. The nuclei were grouped according to similarities, and generated two categories, namely: "The therapeutic workshop as a space for affection and transformation in women's lives", and "The therapeutic workshop as a refuge and space for valuing healthy aspects of the participants".

The study was approved by the Ethics Committee in Research with Human Beings of Universidade Federal of Mato Grosso do Sul under Protocol No. 3,178,547/2019.

### RESULTS

The study participants were six women who integrated the therapeutic workshop and were aged 54-69 years old. Only one of them had completed high school, and the others had completed elementary school. All participants were retired, four reported receiving two minimum wages and two received one minimum wage. Regarding housing, three women lived near the place where the workshop was held; four lived in their own houses and one lived with her children. All had participated in the workshop for at least one year, and five have been joining the workshop for more than two years.

As for the social relationships that according to the participants provided a support network for them, all participants mentioned the church; five mentioned the therapeutic workshop and CAPS, and three mentioned the family.

Analysis of the reports made it possible to know the perception of these women regarding participation in the therapeutic workshop and their social relationships, presented in two categories: The therapeutic workshop as a space for affection and transformation in women's lives, and The therapeutic workshop as a refuge and space for valuing healthy aspects of the participants.

### The therapeutic workshop as a space for affection and transformation in women's lives

The first category presents the perceptions of the study participants about the potential of the therapeutic workshop as a space that drives transformations, personal growth, development of mature interpersonal relationships and resumption of life projects. The relationships established between the women in this space allowed the expression and elaboration of individual experiences, which sometimes made them feel less lonely and isolated. They also provided opportunities for welcoming, mutual support, creating bonds and exchanging affections.

According to the participants, the experience in the therapeutic workshop changed communication patterns, contributed to the creation and strengthening of social and affective bonds, and brought greater pleasure in interacting with other people.

Before joining this workshop, I found it more difficult to trust a friendship like this. And when I began to participate in the workshop, I began to trust people more. (I1)

The participants' narratives also indicated that the changes experienced in communication, relationships and feelings went beyond the walls of the health service, also involving their families.

Now I feel fine. If I could, I wouldn't leave, I would keep her (family member) company, we talk. We didn't talk before, now we talk maybe too much. (I5)

Some participants said that the experience in the workshop boosted changes in the performance of daily activities and the rediscovery of life goals, leading to new challenges and perspectives.

I was (not very active), but this has changed. I don't stay at home, I come here, I do water aerobics three times a week, I go to CAPS once a week. Now I have classes at school every afternoon, Monday through Friday. (I4)

In short, the experience of participating in the therapeutic workshop was more than doing manual work; it meant a space for the exchange of affection, an opportunity for each woman to experience changes and to take more prominent roles in their lives.

## The therapeutic workshop as a refuge and space for valuing healthy aspects of the participants

In this category, the therapeutic workshop emerged as a refuge in which it was possible to create. Because of the insertion in this scenario, which did not focus on suffering and/or illness, the healthy aspects of the participants were valued, and these women could develop self-care practices.

The narratives exposed the understanding that the therapeutic workshop represented a space for the exercise of creativity, elaboration and sharing of individual experiences, expression of feelings and thoughts. Allusions to the meetings as moments of welcome, dialogue, listening, identification and support among the participants were common. The women also described the workshop as a non-judgmental environment.

Here we focus on dialogue, on understanding. We talk to understand each other. We can vent, we can cry. Sometimes when I get here, I'm not feeling well... but then I see other people and hear what they say, and I start laughing. So, I feel motivated not to give up, to go on, and to participate in the workshop. We go to the CAPS, but we are not as comfortable talking there as we are here. (I2)

Excerpts such as those from participant I1 showed the relevance of manual work as an instrument that induces the expression of subjectivity. Thus, manual work promoted the relief of tensions and anxieties, favoring the confrontation of daily difficulties.

When we work on the embroidery, we feel relaxed and start talking about our problems. Sometimes we come here worried about something and don't feel comfortable to talk about it. So, embroidering, doing stitches, every little stitch we do makes us feel more comfortable. And when we realize, we're talking about our problems and feeling well. (11)

The narratives suggested that the meetings were permeated by trust, exchange of affections and a sense of well-being, pleasure and peace. These perceptions of the participants regarding the experience in the workshop seemed to facilitate communication and sharing of individual experiences. The workshop also represented a refuge, in which it was possible to get away from the daily routine and daily pain, to get involved in productive activities, as shown in the following excerpt.

When we are working on the embroidery, and I love this work, I momentarily forget the pain I am feeling! When I leave here, it's as if that evil has returned, I feel lonely again. But the time I spend here is very pleasurable, I think. And even when sometimes I don't feel like talking, smiling, I like being here. I focus on the activity and do my work. Here's what I think: 'oh, I'm embroidering this flower here and when it's finished, it's going to be beautiful'. (I3)

According to the statements, the therapeutic workshop can be a strategy to promote the participants' health, given its contribution to the expression, communication and exchanges between them. Participation in the workshop was not the solution to all the demands of these women, but it made it possible to live in a welcoming, supportive and apparently judgment-free space.

### DISCUSSION

The findings of the present study suggest that the therapeutic workshop was a fertile space for transformations in the participants' lives, with the possibility of individual growth. From the women's narratives, it can be inferred that the experience in the therapeutic workshop contributed, for example, to emotional and behavioral changes. In the reports, many women perceived themselves, prior to the participation in the workshop, as irritated,

nervous, impatient, agitated and tearful people. On the other hand, after the meetings during the therapeutic workshop, the women said they experienced a greater sense of well-being, calm and patience.

These reports reflect the potential of the group approach to prepare their members to face vital processes and provide opportunities for the maturation of interpersonal relationships, the elaboration of individual experiences and the discovery of new goals in life. These individuals are now capable of playing a key role in their lives, and no longer experience social isolation, which is very common in processes of psychological distress (14).

Furthermore, through manual work and artistic expression, therapeutic workshops can provide positive results such as socialization, interaction, reconstruction and social reintegration. Also, aspects such as emotional and experience exchanges, the strengthening of dialogue and the formation of bonds highlight the relevance of these workshops with artistic activities in the context of mental health care (15).

During the participation in the therapeutic workshop, the women got closer to each other, creating stronger bonds. This occurs when group members feel free to share their experiences, and the workshop becomes a space for listening that promotes coexistence, acceptance, expression, dialogue and emotional exchanges. The emphasis on active participation, in a process of rebuilding oneself as a subject and in the development of collective integration, provides greater autonomy, understanding of personal experiences and creation of bonds (16).

It should be noted that a space for listening is not just about listening to what someone says, but above all, welcoming that person's feelings and anxieties, in order to help them understand their difficulties and suffering. Through this dialogic process, a connection emerges, manifested in the formation of emotional bonds between health professionals and users/family members, in the establishment of welcoming and in the clarity of communication between these actors (16-17).

In the context of therapeutic workshops, the process of listening is essential for carrying out the proposed activities and for creating a space for relaxation, in which members feel free to express themselves, verbally or not, on any subject. As a result, they distance themselves from the central focus on illness and look at themselves and at the development of self-care practices (16,18). Thus, the need to create spaces for the construction of dialogue and strengthening of the bond with people with psychological distress is reiterated, at different points in the health care network, to favor the planning and implementation of actions to stimulate care, which should be permanent.

Another important finding of this study is that the experience in the therapeutic workshop favored mutual support, emotional exchanges and the welcoming of people in suffering. The groups strengthen the human being's ability to deal better with suffering and share experiences, information and coping strategies. These environments legitimize experiences by sharing a collective and safe space, in which people can develop as agents who transform their own lives, and the lives of other members of the group (14).

The workshops were also considered a refuge and safe place, where the participants engaged in activities and interacted with each other without suffering discrimination. In these environments, the women did not temporarily experience thoughts that caused pain, sadness or suffering. These thoughts would eventually come back with different meanings, enhanced by the exercise of creativity (18).

Another important factor regarding therapeutic workshops and the production of mental health is the movement towards the construction of subjectivity and autonomy of the subjects promoted by them <sup>(19)</sup>. The therapies proposed in these spaces involve artistic expression and stimulate motor skills, cognition, self-esteem and group interaction, which provides a better quality of life and use of collective spaces in society. The workshops also stimulate the creative act, productivity and the demonstration of capabilities, perceived as

healthy aspects of the subject.

Furthermore, the reactions and feelings shared in the workshops go beyond the walls of health institutions, involving families, public spaces, the city and the world. Thus, the workshops enable the process of deinstitutionalization and psychosocial reintegration of individuals experiencing mental suffering, also allowing the construction of social bonds (14,19-20).

Finally, therapeutic workshops collaborate with nursing practice, as they are based on evidence inserted in mental health services, ensuring more humane and effective care. Nursing in mental health is characterized by the need for the establishment of strong bonds between users of mental health services and professionals, understanding human suffering, building creative and solidary practices, artistic development and promotion of health education (15).

Despite its valuable findings, the present study has some limitations, such as the small sample size due to the selected method, and the fact that each participant was interviewed only once. Such limitations do not allow generalizations of the findings.

Future studies on this topic may include interviews before and after the application of the therapeutic workshop. Other suggestions involve the development of therapeutic workshops in different environments, such as Basic Health Units and Psychosocial Care Centers.

### FINAL CONSIDERATIONS

The experience in the therapeutic workshop through manual work (embroidery) was a refuge for the participants, which allowed them to experience changes in their lives, exchanging affections and valuing healthy aspects. The women's narratives showed that this space is important in the reconstruction and strengthening of bonds of friendship, expression of feelings, development of communication and management of daily difficulties.

Given the therapeutic potential, the low cost and the possibility of development of these activities in different settings, the importance of therapeutic workshops in the implementation of Nursing care in the context of mental health is highlighted, to promote bonds, dialogue, welcoming and autonomy of individuals with psychological distress.

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Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work - Marcheti PM, Teston EF; Drafting the work or revising it critically for important intellectual content - Marcheti PM, Teston EF, Veivenberg CG, Lima H de P; Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved - Silva MAP da, Giacon-Arruda BCC. All authors approved the final version of the text.

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