

Interpersonal relationships in a psychosocial care center: Articulating education, design and health

Relacionamento interpessoal em um centro de atenção psicossocial: articulando educação, design e saúde

Relaciones interpersonales en un centro de atención psicossocial: articulación de educación, diseño y salud

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Resumo: **Objetivo:** descrever a prática de intervenção educativa desenvolvida junto a uma equipe multiprofissional em um Centro de Atenção Psicossocial sobre relacionamento interpessoal, inserindo técnicas da área do design *thinking* para estimular o processo de reflexão. **Método:** relato de experiência de atividade educativa, em que foram realizados três encontros sequenciais, nos meses de outubro e novembro de 2018, junto a oito profissionais. **Resultados:** a equipe estava com dificuldade de relacionamento, prejudicando e dificultando o atendimento multiprofissional ao usuário do serviço de atenção psicossocial. As técnicas estimularam a reflexão do grupo a respeito de sua realidade, possibilitando melhorar o relacionamento interpessoal e refletindo positivamente no cuidado prestado ao usuário. **Considerações finais:** com essa prática foi possível perceber a importância de se articular conhecimentos de outras áreas, como a do design, reforçando os benefícios da busca pela interdisciplinaridade.

Descritores: Relações interpessoais; Saúde mental; Educação em saúde; Enfermagem

Abstract: **Objective:** To describe the practice of an educational intervention developed with a multiprofessional team in a Psychosocial Care Center about interpersonal relationships, including design thinking techniques to stimulate the reflection process. **Method:** An experience report on educational activity, where three sequential meetings were held with eight professionals in the months October and November 2018. **Results:** The team was having relationship difficulties, impairing and hindering multiprofessional care to users of psychosocial care services. The techniques stimulated the group's reflection about its reality, enabling to improve the interpersonal

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relationships and reflecting positively on the care provided to the user. **Final considerations:** With this practice it was possible to realize the importance of articulating knowledge from other areas, such as design, reinforcing the benefits of the search for interdisciplinarity.

Keywords: Interpersonal relationships; Mental health; Health education; Nursing

Resumen: **Objetivo:** describir la práctica de la intervención educativa desarrollada con un equipo multiprofesional en un centro de atención psicosocial sobre las relaciones interpersonales, incluidas las técnicas de pensamiento de diseño para estimular el proceso de reflexión. **Método:** informe de experiencia de la actividad educativa, en el que se realizaron tres reuniones secuenciales con ocho profesionales en los meses de octubre y noviembre de 2018. **Resultados:** el equipo estaba teniendo dificultades de relación, perjudicando y obstaculizando la atención multiprofesional a los usuarios de los servicios de atención psicosocial. Las técnicas estimularon la reflexión del grupo sobre su realidad, permitiendo mejorar las relaciones interpersonales y reflexionando positivamente sobre la atención brindada al usuario. **Consideraciones finales:** con esta práctica fue posible darse cuenta de la importancia de articular el conocimiento de otras áreas, como el diseño, reforzando así los beneficios de la búsqueda de la interdisciplinaria.

Descriptor: Relaciones interpersonales; Salud mental; Educación en salud; Enfermería

Introduction

Interpersonal relationships is a participatory management system variable that represents the human behavior that generates teamwork, trust, and stakeholder participation.¹ “People do not act in isolation, but through interactions with others to achieve their goals”.^{1:115}

Health professionals often use interpersonal relationships as a work tool to foster communication and interaction with users and among teammates. The needs arising from professional daily life make them develop social skills as a way to support interaction processes. Social skills can be defined as the set of behavioral skills that are learned and presented by the individual in an interpersonal situation, including communication skills, problem solving, cooperation, empathy, and assertiveness.²

Among the health services thought from the perspective of a multidisciplinary and interdisciplinary work perspective is the Psychosocial Care Center (*Centro de Atenção Psicossocial*, CAPS), which is a point of attention of the Specialized Psychosocial Care component that integrates the Psychosocial Care Network (*Rede de Atenção*

Psicossocial, RAPS). Its purpose is to provide care to people with severe and persistent psychological distress, as well as those with drug-related needs.³

From the conception of the CAPS, serving this clientele becomes a challenge not only from the point of view of care but also from the work relations themselves, since it generates strain on workers, indicating the need for specific health actions for those working in this area.⁴ In this scenario, it is imperative to consider that health professionals are interdependent beings who interrelate and relate to people in various circumstances, as well as depend on social relationships, living with friends, family, co-workers and with others. unknown people.⁵ Interpersonal relationships are a determining factor in the development of patient care.⁶

Based on these concepts and based on the survey of a problem of practice that identified the existence of conflicting situations among the health team, arising from a reality of a CAPS and, considering the importance of creating strategies that articulate education, design and health as a strategy for minimizing interpersonal conflicts, is that this educational practice was developed and applied. Therefore, the question is: Which education and design strategies can be used as a tool to improve the interpersonal relationship of a multiprofessional team of a CAPS I?

In this sense, this report articulates the use of thinking design tools as driving springs for reflection of the daily work in the CAPS. Thus, this report aims to describe the practice of an educational intervention developed with a multiprofessional team in a CAPS on interpersonal relationships, inserting techniques in the area of thinking design to stimulate the reflection process.

Method

This is an experience report on the practice of educational intervention, developed with the multiprofessional team of a CAPS I, located in a small municipality in the south of the state of Santa Catarina, Brazil.

The proposal reported here was developed from the discipline of Care Projects and Technological Innovations, from the Graduate Nursing Care Management Program, professional modality, of the Federal University of Santa Catarina, whose proposal was to highlight a problem of practice, aiming at its resolution. From then on, the fragility of the interpersonal relationships among the members of the work team was identified, which had been impairing and hindering the multiprofessional care provided to the users of the psychosocial care service.

From this diagnosis, meetings were held to reflect on interpersonal relationships, with the participation of eight professionals from the institution, namely: psychologist, social worker, pharmacist, administrative technician, nursing technician, artisan, general service assistant, and cook.

Firstly, the participants were formally invited, receiving an invitation with the programming of three meetings, which took place in the CAPS I meeting room. The scheduled actions were developed in October and November 2018.

The meetings were based on the Magueres Arch problematization methodology, which consists of five stages: Reality Observation; Key points; Theorization; Reality Solution and Application Assumptions,⁷ where the following topics are addressed: interpersonal relationships, ethics, teamwork and empathy. To assist the key points and theorization stages during the application of the problematization methodology, thinking design techniques were introduced to stimulate discussion and seek solutions, such as the Mind Map and the Six Hat Technique, respectively. These techniques seek, through a systematic process of innovation, to prioritize end-user wants, needs, and challenges to understand a problem, in order to develop more comprehensive and effective solutions, taking into account the context in which that problem develops.⁸⁻⁹ Specifically, about the mind map technique, it is widespread in design and is considered a branched visual record of information. Such a strategy is “essentially

a hierarchical diagram of information, in which we can easily identify the relationships and links between information”.^{10:4}

Another technique used at the second meeting was the six hat technique, which aims to encourage people to use various reasoning in a systematic and disciplined manner. Hats are provided as physical artifacts that can be used in the creative practice by the participants. Each should suggest a type of reasoning the participant should have when using them. The author of this technique associates each color with a type of reasoning: the white hat should aim to be objective and neutral; the yellow hat must seek truth and logic in an optimistic way; the green hat should be based on creativity and innovation; the red hat should refer to emotions, feelings and intuitions; the black hat must seek truth through logic and reasoning; and the blue hat must assume the function of control and evaluation of thought itself.¹¹

The following table displays the Magueres Arch stages, developed in the meetings and the techniques used to stimulate the reflection process.

Table I. Activities developed in the respective meetings.

Order of the meetings	Month	Activity developed
1 st meeting	October	1 st Stage: Reality observation 2 nd Stage: Survey of key points. Using the mind map technique.
2 nd meeting	November	3 rd Stage: Theorization At this stage, the literature was discussed and compared with the reality of the team; motivational messages and videos 4 th Stage: Hypothesis for solutions, where the six hats technique was used with the objective of the team suggesting changes to improve interpersonal relationships
3 rd meeting	November	5 th Stage: Application to reality: there was a discussion of the suggested proposals through the six hats technique

Source: Prepared by the authors.

As this is a care practice, the project was not submitted to the Research Ethics Committee (*Comitê de Ética e Pesquisa*, CEP), since it was an educational and

reflective activity of daily work. The meetings were not recorded, so in this text, the participants' statements are not expressed, but the intervention process is reported. However, to ensure the participants' manifestation and awareness, a minutes was signed, stating that they agreed to participate in the activity, as well as that they received information about the proposal. The professionals were asked, by means of a verbal contract, confidentiality of the problems raised in the meetings, in order to guarantee the free expression of the participants.

Problematizing the work context and seeking solutions: Articulating the Maguerez Arch and Thinking Design

Seeking innovative solutions in a not always favorable work environment requires a method that enables the active participation of those involved. In this sense, the problematization methodology was used and, in the first meeting, in the “Reality Observation” stage, the professionals argued about how they observed the interpersonal relationships of the multiprofessional team, identifying how much this was impaired, pointing as factors the existence of some professionals who had difficulties in relationships, manifested by lack of empathy, fragile communication, lack of respect, trust, ethics and competitiveness.

In the method stage that is defining the key points, questions were used to stimulate reflection: What kind of professional am I? What kind of professional would I like to be? What kind of professionals am I working with? What kind of professionals would I like to work with? These questions were printed in the center of an A4 sheet, allowing everyone to view them when submitted to the group.

The professionals received colored post-it where each color was used to answer a particular question. All the professionals responded, according to the sequence of the questions made, highlighting them in the form of important keywords that were later discussed in a team and hierarchized, generating a visual map, that is, a mind map.

In a second meeting, the stages of the “Theorization and Solution Hypothesis” method took place. The theorizing stage was presented in *PowerPoint*, consisting on presenting the theoretical aspects of the CAPS, with a brief history about its creation, concepts of interpersonal relationships and ways of teamwork. Images and videos with motivational phrases were also showed to the participants.

Following this, the stage of solution hypothesis began. To stimulate the creativity of the professionals, another technique was used in the design, called the six hat technique, which organizes the creative process. At the time of practice, each practitioner was given a hat and instructions on how to wear it, and then made the best possible observations and contributions to the team to work in harmony.

In the application of the technique which allows to be adaptable to different situations according to the interest of the one who uses it, the white hat was used to identify the current situation of the CAPS-I Multiprofessional team. It was found that it was fragile, and pointed to the existence of professionals who assumed disharmonious postures, such as manifestations of disrespect to professionals who did not have higher education, instigating discussions based on such confrontations.

The green hat, in turn, allowed the practice of respect to be suggested daily as an important aspect to be developed by all, regardless of the situation. This hat indicated communication as an aspect to be improved.

In the red hat, dynamics for team interaction were suggested from the biweekly meetings. However, the yellow hat kept the suggestions of the red hat, reinforcing the strategies pointed out.

The black hat was used so that, given the strategies suggested by the other hats, the team's difficulties to promote changes were indicated, allowing for harmonious and respectful

relationships, allowing the team's union due to the unsatisfactory behavior of professionals who have difficulty interacting, which even do not recognize their limitations.

Finally, the blue hat was used to identify the potentialities of the team, as well as the weaknesses that need to be addressed, starting with respect among the multiprofessional team. The dynamics ended with everyone's agreement on the placement of each hat used.

In the last meeting of the team, the third, the hypotheses of solution were discussed, and the discussions of the proposals raised in the second meeting were deepened. The team was committed to the change, with the professionals, aiming for this transformation and recognizing that better relationships imply a positive treatment for the patient.

After the practical intervention, a professional daily life already with small changes in the behaviors of the multidisciplinary team is perceived. Signs of respect and recognition for each other are visible in the workplace. These confirm the importance of intervention projects with the use of methodologies that promote reflection.

It is also noteworthy that the application of an intervention project on interpersonal relationships in the multiprofessional team was very challenging and stimulating, as it was possible to realize the hope of the professionals to improve relationships through the project, motivating them to face the difficulties experienced in daily work. As for the professional aspect, it is gratifying to perform an action and to have a positive return, further stimulating the promotion of changes in the workplace, offering a quiet, respectful, harmonious and competent dynamics.

Discussion

Interpersonal relationships in the workplace are complex because they relate several peculiarities such as self-knowledge, empathy, self-esteem, warmth, ethics and, especially,

dialog. Considering this interaction between people with different characteristics in a competitive environment, it is necessary to know and understand human behavior within organizations and to understand the importance of socialization within work.¹⁰ Such relationships may also be affected due to professional daily situations and aggravated by the work environment in which they find themselves, bringing conflicts with stressful situations experienced in the workplace itself.⁶

In an environment where change is necessary, as in the CAPS undergoing the reorganization of their practice, interpersonal relationships sometimes become fragile, interfering with daily work and user care.^{4,12} In this sense, the care practice developed was necessary, as it was directed not only to improve communication, but also to make the interpersonal relationship harmonious, implying the improvement of user care, empathy, peace of mind, increased self-esteem and good mood.

Care in the context of mental health encompasses the needs of people with mental disorders and their families. Thus, nursing care has its significance, as this profession is found in most services available in the health care network.¹³ Nursing is a profession that is in direct relationship with other professions, the construction and articulation of multiple knowledge being important. It is noteworthy that, in the area of mental health, with all the movement of deinstitutionalization, there is a complexity to be reinvented, and the field of mental health is admittedly interdisciplinary, “incorporating a huge list of interventions in the most diverse areas”.^{14:107} Thinking about interdisciplinary practices reflects on the valorization of workers and, therefore, we must create spaces that allow them to reflect and dialog. It is believed that understanding the feelings experienced by the workers is necessary for their health promotion, besides reflecting directly on the improvement of the quality of care provided.¹⁵

To allow verbalization and reflection by the professionals is necessary to establish strategies that facilitate the process of communication among the workers. In this sense, in many situations, knowledge from other professions must be resorted to, as was done in this intervention project. The use of the dynamics of the Mind Map and the Six Hats Technique, pertinent to the design area, allowed for the implementation of a creative space in which the worker can express his dissatisfaction and anguish, as well as point out strategies that may contribute to the change in daily life of work. From the moment the importance of interdisciplinarity is perceived, new perspectives of care arise with a view to building an integral look away from fragmented and decontextualized practices.¹⁶

In this context, addressing the theme of interpersonal relationships in a multiprofessional team is not an easy task, especially when there are relational difficulties in the group. Thus, there is a need for a peculiar management in order to transform negative attitudes into positive ones, promoting an improvement in professional daily life, making the work environment more harmonious and pleasant. These actions can benefit the care provided to the users, improve relationships and enable workers to feel as actors in the work process by identifying strategies as well as putting them into practice. Certain fragility of interpersonal relationships among the members that make up the work team was identified, harming and hindering the multiprofessional care to the user of the psychosocial care service. Such positioning of the professionals had been causing intrigue, difficulty in relating, or even an unsatisfactory professional posture, reflecting directly on work relationships and the care provided.

It should also be noted that the approximation of the design and health increasingly present in care spaces, in a perspective that articulates space and user, in a communication process in which objects and environments are perceived as texts and “express a way of perceiving the world, the relationship between people and between them. and objects (the

product of design) make the senses circulate. Therefore, they can be considered as mediators in the communication process between those who design them and those who appropriate them”.^{17:2271} Therefore, tools are needed to sensitize people to express affection and enable reflection. Similar experiences that developed a pilot workshop, using techniques such as drawing and role playing, allowing the participants to listen sensitively, could conclude and emphasize the need for new forms of communication.¹⁵

In the experience report presented here, it was sought through the approach to design to use techniques that allowed the workers to express, reflect and propose changes in a different way, as these distanced themselves from the dynamics generally used in the health area. With the Mind Map technique, the workers reflected on their daily lives, identifying and recording visually and hierarchically the problems that interfered in interpersonal relationships. This dynamic was endorsed with the Six Hats technique, in which coping strategies were proposed to improve interpersonal relationships.

It should be noted that the thinking design is characterized as a “user-centric collaborative problem-solving approach that drives innovation through iteration and creative practices”.^{9:169} In this sense, it made it possible to give voice to the workers since this approach is focused on the human being, their desires, wants, needs, providing new ideas based on everyday, innovative and possible to apply in practice.

The results of both dynamics became evident, in view of the observation of their implementations, the importance of seeking other disciplines and techniques to be used in the reflection processes through playfulness, giving lightness to the process and contributing to the appreciation of the worker.

Final considerations

The practice of the educational intervention developed with a multidisciplinary team in a Psychosocial Care Center within the perspective of interpersonal relationship, from the use of the thinking design proved to be feasible, innovative and made it possible to stimulate the reflection process. The professionals were motivated to promote the change, and this practice has greatly contributed to healthy interpersonal relationships in the workplace.

Thus, it reinforces the importance of seeking strategies in other disciplines that encourage professionals to perceive themselves as active and reflective subjects in the process of building alternatives for improvement in the work process, interfering with the care provided to the users. Based on this reflection, the gap between studies and other experiences that address workers' health in the context of mental health and interpersonal relationships in this area of activity is considered fragile, making comparisons and discussions within this theme explored, which makes it difficult to corroborate. further the need for further studies in this area of knowledge.

The techniques used greatly contribute to vocational training since, through a systematic process of innovation, prioritize desires, needs and challenges, aiming to develop more comprehensive and effective solutions. Thus, it is hoped that this report may come to contribute to other professionals not only to improve interpersonal relationships in their work environment, but also to enable them to grasp other techniques such as those used by design, from the experiences illustrated here.

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