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RESEARCH ARTICLE

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INFLUENCE OF SPIRITUALITY IN NURSING ASSISTANCE TO PATIENTS WITH MENTAL DISORDERS

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ABSTRACT

Introduction: Nursing professionals deal directly, and most of the time, with patients with mental disorders and thus play an essential role in front of the public through different strategies, such as encouraging spirituality in these patients. **Objective:** To describe the influence of spirituality encouragement in nursing care for patients with mental disorders. **Methods:** This integrative literature review is carried out in the LILACS, MEDLINE, and BDNF databases. The inclusion criteria were: articles being in full, in the Portuguese language; published between 2016 and 2020. The Ursi instrument and the Bardin content analysis were used to interpret the results. **Results:** The sample consisted of six articles. The central approach of these articles focused on two axes, the first one entitled: "Spirituality as a change in lifestyle for mental health" and the second one entitled: "Nursing care in mental health through spirituality". **Conclusion:** Spirituality contributes to nursing care for patients with mental disorders, helping to reduce stress, improving interpersonal relationships, alleviating suffering and coping with the disease, social reintegration, and protecting against recurrences of new crises and the consumption of alcohol and other drugs.

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INTRODUCTION

The World Health Organization 1988 provided spirituality as a multidimensional concept in health, attributing a broad meaning, not just being related to religious beliefs or acts. Spirituality provides an answer to certain fundamental aspects of life, and it causes a peculiarity in human beings that makes them search for the transcendent. It refers to questions about the existence, emotions, and convictions of a non-material nature (Organização Mundial da Saúde, 1998).

It is inherent to the human being, not a monopoly of religions or any movement focused on the spiritual aspect (Organização Mundial da Saúde, 2013; Volcan, 2003). Religion and spirituality, although generally confused, have different concepts. The first refers to the doctrinal aspect of religious experience, defined by beliefs and acts that transcend and aim to guarantee salvation. The second drives the human being in search of the sacred, of transcendence, in an attempt to offer to mean to fundamental questions of human existence (Regina et al., 2012). In clinical practice, spirituality and religiosity are essential instruments for promoting positive patient health outcomes (Shiozawa, 2012). A specific form of spirituality, which manifests itself religiously, is mysticism. This spiritual retreat can

transform the lives of people who experience it, changing people's interiors through the strength that goes from involvement in the figure of a God (Vasconcelos, 2014). Thus, religiosity and spirituality are concepts that have a direct influence on the mental health of human beings (Moreira, 2012), where the levels of involvement with religiosity and spirituality are positively associated with classified indicators of well-being for promoting psychological health, nutrition, positive affect and improvement in mental and physical health (Stroppa, 2014). Psychiatric reform in Brazil transformed the mental health care model with the sanitary movement in the 70s, starting a profound transformation in the mental health care model through collective criticism, previously focused on violence in asylums and the hegemony of a private one assistance network (Brasil, 2015). In the second half of the 20th century, religion began to be seen as a possible collaborator in the treatment/assistance process of those considered mentally ill (Moreira, 2012).

Where spiritual/religious practices are related to lower rates of depression, stress, and better quality of life (Leopardi, 2012). Nurses who work in mental health to establish an individualized care plan for people with mental disorders plan their care based on the emotional, physical, spiritual, social, and family aspects of this individual, always with the aim of monitoring, promoting, maintaining, and recover the patient's health according to their needs and thus ensure an adequate prescription of care (Leopardi, 2012). This study comes under the light of Myra E. Levine's holistic theory, which refers to the importance of considering man holistically and not only concerning his disease also considering his interaction with the environment. that surrounds it (Levine, 1973). Considering that users' needs must guide nursing care, it is essential to know how to identify and recognize spirituality's role for people with mental disorders. This study aims to analyze the evidence in the literature on the influence of spirituality in nursing care for patients with mental disorders.

METHODS

This an integrative literature review study developed to gather and synthesize findings from studies carried out using different methodologies to contribute to the deepening of knowledge related to the deepened topic (Soares *et al.* 2014; Mendes, 2008). The guiding question that led this study was: "How can spirituality contribute to the mental health of people with psychiatric illnesses and the nursing care provided to these patients?". To carry out the study, bibliographic surveys were carried out through electronic searches in the following databases: Nursing Database (BDENF), Latin American Literature in Health Sciences (LILACS), and Scientific Electronic Library Online (SciELO), through the Virtual Health Library. For the survey of the study, the following descriptors in health sciences were used: "Mental Health," "Nursing" and "Spirituality" combined with the Boolean logical operator "AND". The period used to access the databases was October 2021 to November 2021. The inclusion criteria established included: articles available in full text, in the Portuguese language; published between the years 2016 to 2020. Articles that did not directly or indirectly address the theme did not contribute to the discussion, and the scope of the proposed objective was excluded.

RESULTS

The initial survey allowed the identification of 5315 titles. After applying the inclusion mentioned above criteria, the total was 132 titles that went on to the next phase. After reading the titles and abstracts of the studies selected in the previous phase, 24 articles were read in full. After a thorough reading, six articles, two from BDENF and four from LILACS, were selected. The studies were analyzed and classified according to a year of publication, journal, type of research, and topic found in the database (Table 1). The instrument used to synthesize the results was based on the model described by Ursi (2005) (Ursi, 2005). Two reviewers completed the instrument independently to extract the main aspects addressed. In interpreting

the results, a comparative reading between the articles was followed, verifying their similarities, proceeding to the grouping and content analysis of Bardin (2010) (Bardin, 2010). From the reading of the main findings of the selected articles, their central approach focused on two axes, the first entitled: "Spirituality as a change in lifestyle for mental health," correlating the benefits of spirituality in the lifestyle of these people with some disorders and the second axis entitled: "Nursing care in mental health through spirituality" dealt with the practice of nursing through spirituality in people who have mental disorders, highlighting the difficulties and improvements.

DISCUSSION

AXIS 1: SPIRITUALITY AS A LIFESTYLE CHANGE FOR MENTAL HEALTH: Patients with mental disorders, according to studies, tend to have anxiety, stress, persecution mania, introversion, and low self-esteem. In addition, evidence shows that it is possible to generate change in this behavior through spirituality. Spirituality modifies the prognosis of the disease, providing them with a better quality of life (Salimena, 2016; Reinaldo, 2016). In addition to the positive change in behavior, the acceptance of the psychiatric diagnosis occurs more positively, enabling better adherence to the proposed pharmacological treatment helping to improve the quality of treatment. In line with a study carried out with patients diagnosed with a psychiatric disorder, spirituality proved to be a protective factor for improving treatment reducing crises (Salimena, 2016; Reinaldo, 2016). Several studies show that spirituality helps people with mental disorders, alleviating suffering, bringing tranquility, reducing stress and anxiety. It also helps in adopting healthier lifestyles, with improvements in diet, regular physical exercise, adherence, and frequency of consultations, which further contributes to controlling their condition (Salimena, 2016; Longuiniere, 2017). The study by Reinaldo and Santos (Reinaldo, 2016) shows that in addition to improving treatment adherence and behavior, another aspect is of paramount importance, introducing these people into society. Because they have a mental disorder, they are often marginalized. Through religion/spirituality, they begin to be part of an institution and create bonds friendships, making the space conducive to affective exchanges and enabling the integration of these people into society (Reinaldo, 2016; Bettarello, 2016).

A study addressing alcoholism shows that spirituality was able to improve the quality of life of people who have alcoholism disorder through vital energy, a force related to the way the subject believes in life, and the ability to direct that force in your favor. This relationship between health and religiosity/spirituality becomes a promising field of study, at the same time, controversial and challenging (Zerbetto, 2017; Carvalho, 2014; Moreira-Almeida, 2014). In this sense, it corroborates another study on the same theme: religiosity and spirituality are protective factors for consuming alcohol and other drugs since it promotes a better quality of life physical and mental well-being. Religiosity and spirituality have been identified as protective factors against drug use at different levels. Regarding the consumption of psychotropic drugs, religiosity/spirituality has been associated as a protective factor against drug use, both in Brazil and abroad (Salimena, 2016; Sanchez, 2016). In this context, Levine's holistic theory brings this perspective of adaptation, energy conservation, and promotion and maintenance of structural, personal, and social integrity through spirituality since health is understood as a balance between the bio-psycho-social dimensions. -spiritual. In this way, people diagnosed with mental disorders accept their disease more positively and learn to adapt to it, contributing to the reduction of stress and related crises (Levine, 1973; Czarnobay *et al.* 2018).

AXIS 2: NURSING CARE IN MENTAL HEALTH THROUGH SPIRITUALITY: Through strategies that aim to encourage spirituality, such as external and internal dialogues, relaxation techniques, acupuncture, reiki, meditation, and prayers, nurses can stimulate the patient's spirituality, which is scientifically proven,

Table 1. Description of articles that address the contributions of spirituality in mental health, according to the Author, title, database, year, place, method and contributions of spirituality

Titles, authors and year of publication	Data base	Method	Contributions of spirituality
Compreensão da Espiritualidade para os portadores de transtorno mental: contribuições para o cuidado de enfermagem/ (Salimena <i>et al.</i> , 2016)	LILACS	Qualitative	It helps in the recovery of your health and the fight against diseases, and it can contribute to the success of the treatment and balance of mental problems and alleviating the suffering faced.
Religião e transtornos mentais na perspectiva de profissionais de saúde, pacientes psiquiátricos e seus familiares/(Reinaldo <i>et al.</i> , 2016)	LILACS	Qualitative	The religious/spiritual experience promoted encouragement for life and proved to be a strategy for coping with difficulties faced by people with mental disorders.
Uso de psicofármacos pelo portador de transtorno mental: Percepções do enfermeiro/ (Czarnobay <i>et al.</i> , 2018)	LILACS	Qualitative	It proved to be a factor for adherence to the use of psychotropic drugs and helping in the desire to improve and return to daily life, contributing to the improvement of the patient's health status.
Influência da religiosidade/espiritualidade do profissional de saúde no cuidado ao paciente crítico/(Longuiniere <i>et al.</i> , 2018)	LILACS	Quantitative	It proved capable of generating a state of calm and tranquility and improving physical and mental health, promoting healthier behaviors and lifestyles, reducing stress, and improving interpersonal relationships.
Qualidade de vida, espiritualidade, religião e crenças pessoais de dependentes químicos em tratamento/Bettarello <i>et al.</i> 2018	BDENF	Quantitative	He helped in the rehabilitation of chemically dependent individuals in treatment, helping to improve their lifestyle and new values, such as responsibility, solidarity, honesty, and love.
Religiosidade e espiritualidade: mecanismos de influência positiva sobre a vida e tratamento do alcoolista/ (Zerbetto <i>et al.</i> , 2017)	BDENF	Qualitative	The protective factor for the consumption of alcohol and other drugs in preventive treatment is the best life skill and the physical and mental well-being of the human being.

provides support in improving self-esteem, optimism, and behavior. However, evidence indicates that the training of nurses with an approach to spirituality is infrequent, with a deficit in their training, as it directly implies the future care that will be provided (Bettarello, 2016; SA, 2015). When properly trained, the nursing profession can provide comprehensive care without prejudice since this can distance him from the service, resulting in numerous consequences. The professional must have a welcoming attitude understanding the health problem for which the patient needs help and support (Bettarello, 2016; Carvalho, 2014). For a long time, it was believed that patients with mental health problems, because they present problems such as aggression, isolation, hallucinations, could not live in society; however, today, it is known that the scenario is the opposite, and the nurse can contribute positively, helping in the integration of this patient into society along with the family, demystifying these myths (Bettarello, 2016; Carvalho, 2014). Health care for people with mental disorders, such as those affected by schizophrenia, was neglected for many years due to ignorance of the disease. It was believed that these people suffered from religious problems, in which spirits would be there to haunt these people. However, with the advancement of science today, there is an understanding and distinction of the disease (Reinaldo, 2016; Longuiniere, 2017).

However, in common sense, illnesses like schizophrenia and other mental disorders are involved with spiritual problems. From this perspective, nurses, through health education strategies, can demystify such myths, breaking social barriers, helping the person with mental disorders, together with the family and with the help of spirituality, to develop a support network, improve self-esteem, and ensure social participation. The nursing professional who accompanies patients with psychiatric disorders deals with the various issues these patients face, such as anxiety, agitation, helplessness, irritability, with and without outbursts of anger. Generally, they relate to threats, which may or may not be accurate. These professionals will help face these difficulties, differentiate real situations from imaginary ones, clarify the patient's fears, reassure him, and encourage physical and spiritual practices that bring this patient relaxation, peace and reduce crises. Spirituality and religiosity strengthen the coping mechanisms related to treatment, promoting behavioral change in this patient. This can reduce the occurrence of states of mania, persecution, irritability, and aggressiveness. In addition to helping to prevent recurrences of crises. Levine's theory demonstrates how nurses can help patients adapt to and understand their illnesses. In the case of a mental disorder, the acceptance of the person who has the disorder is essential for adaptation and balance since they are chronic diseases, often without a cure, making it necessary for them to learn to live with it, and spirituality has shown

effective in this learning process. This review is concerned with presenting data from an intervention that has enabled nursing professionals to experience clinical spirituality with patients with mental disorders. It is evidencing that this strategy presents satisfactory results, either in the preparation to work with this clientele or in the change of conceptions and representations of the nurse about mental health and spirituality. As shown in another study, where nursing care proved to be an effective tool in the face of the problem addressed (Albuquerque *et al.* 2021).

CONCLUSION

This literature review contributes to the union of published knowledge on spirituality in nursing. However, the scientific production on spirituality in nursing care is still insufficient to consolidate knowledge. However, it was evidenced through this study that the encouragement of spirituality through different strategies contributes to nursing care for patients with mental disorders, in addition to assisting in assistance directed to the needs evidenced by these individuals concerning the use of medication, physical health, stresses experienced, and thus helps to improve interpersonal relationships, easing suffering and helping to cope with the disease, in addition to supporting social reintegration, and protecting against recurrence of new crises, and for alcohol consumption and other drugs.

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