



# Urban parks as a possibility of service of the mental health care network of Brazil

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#### **1 INTRODUCTION**

Mental Health in Brazil has undergone a transition from the hospital-centered model to a humanized model. The Mental Health Policy presents strategies and guidelines of mental health care that consider the participation of users in several of the territorialized open services that aim to improve the health of users considering their biopsychosocial needs. In this sense, we understand that urban parks can be used in psychosocial care networks that areseated by the Brazilian Mental Health Policy by providing well-being in their spaces that offer opportunities for coexistence, contemplation, physical activity, educational actions, leisure and also cultural activities, in addition to bringing thenatural environment closer to all, including for people who have mental illnesses and/or consequences of the use of psychoactive substances such as alcohol, crack and other drugs.

#### **2 METHODOLOGIES**

This article was developed from bilingual research.

## 2.1 MENTAL HEALTH IN BRAZIL

"According to the World Health Organization (WHO), mental health is a state of well-being in which the individual is able to use his own skills, recover from routine stress, be productive and contribute to his community. Mental health implies much more than the absence of mental illness." (2017).

From these initial considerations, let us learn a little more about mental health policy and the format in which services are currently offered in Brazil.

The National Mental Health Policy is an action of the Federal Government, coordinated by the Ministry of Health, whichunderstands the strategy and guidelines of organization and assistance to people with specific care and treatment needs in mental health; in addition to actions and initiatives to prevent problems related to mental health and chemical dependence.

The actions are carried out through a Psychosocial Care Network (RAPS) that consists of locations throughout the country, in order to offer actions with emphasis on territoriality.





The services Offered healthy: Psychosocial Care Center

In the Psychosocial Care Center (CAPS), the services are opened with care provided by a multidisciplinary team, performing primarily care for people with suffering or mental disorder, including those resulting from the use of alcohol and other drugs, either in crisis situations or in rehabilitation processes Psychosocial. The modalities of Psychosocial Care Centers (CAPS) depend on the number of citizens and are presented as follows on the website of the Ministry of Health:

• <u>CAPS I</u>: Care for all age groups, for severe and persistent mental disorders, including the use of psychoactive substances. It serves cities and regions with at least 15,000 inhabitants.

• <u>CAPS II</u>: Care for all age groups, for severe and persistent mental disorders, including the use of psychoactive substances. It serves cities and regions with at least 70,000 inhabitants.

• <u>CAPS i</u>: Care for children and adolescents, for severe and persistent mental disorders, including the use of psychoactive substances. It serves cities and regions with at least 70,000 inhabitants.

• <u>CAPS ad</u>: Care for all age groups, specialized in alcohol and other drug disorders.Serves cities and regions with at least 70,000 inhabitants.

• <u>CAPS III</u>: Care with up to 5-night reception vacancies and observation; all etári as tracks; serious and persistent mental disorders including the use of psychoactive substances. It serves cities and regions with at least 150,000 inhabitants.

• <u>CAPS ad III</u>: Care and 8-to-12-night reception and observation vacancies; 24-hour operation; all age groups; alcohol and other drug use disorders. It serves cities and regions with at least 150,000 inhabitants.

#### **2.2 BASIC HEALTH UNITS**

The B-health units (UBS) are the preferred gateway to the Unified Health System (SUS). The purpose of this service in the area of mental health is to assist people with mental disorders in remission for follow-up. <u>Street Clinics</u>

The Street Office is formed by multidisciplinary teams that develop comprehensive health actions in the face of the needs of this population in an itinerant way, developing actions in partnership with other services.

### 2.3 URGENCY AND EMERGENCY

For urgent and emergency care necessary people with mental disorder and/or needs arising from the use or abuse of psychoactive substances. The Mobile Emergency Care Service (SAMU192) and the Emergency Care Units (UPA 24 h) are offered.

## 2.4 THERAPEUTIC RESIDENTIAL SERVICES

People with mental disorders, graduates of long hospitalizations, without family ties and social support; or even, people with mental disorders who are in situations of personaland social vulnerability, can be welcomed to the Therapeutic Residential Services.



BRAZII



## 2.5 RECEPTION UNIT

People with needs arising from the use of crack, alcohol and other drugs that present markedly.

vulnerability, and which require therapeutic and protective monitoring of a transitory nature, can remain for up to six months in the Reception Units (AU) that function as a home and that welcomes the treatment and life project take place in the various locations of psychosocial support networks (RAPS).

## 2.6 MULTIPROFESSIONAL MENTAL HEALTH OUTPATIENT CLINICS

The Multidisciplinary Mental Health Outpatient Clinics are services composed of psychiatrists, psychologists, social workers, occupational therapists, speech therapists, nurses and other professionals who care for patients through consultations. They can functionin general and specialized outpatient clinics, polyclinics and/or outpatient clinics of hospitals, expanding access to mental health care for people of all age groups with mental disorders of severity moderate, meeting the needs of intermediate complexity between primary care and Psychosocial Care Centers (CAPS).

### 2.7 THERAPEUTIC COMMUNITIES

They are transitional residential services that provide continuous health care for patients with stable clinical needs resulting from the use of crack, alcohol and other drugs.

## 2.8 SPECIALIZED WARDS IN GENERAL HOSPITAL

They are services for patients with keen clinical conditions, in a protected environment, with support and care 24 hours a day. They are indicated for this service when there is severe incapacity for self-care; risk of life or serious health damage; risk of self-harm or heteroaggression; risk of moral or property damage; risk of injury to public order. Hospitalizations occur in cases of patients with acute clinical conditions, inpost-ves, humanized hospitalizations and with a view to their return to the other services of the Psychosocial Support Network (RAPS).

#### **3 DAY HOSPITAL**

It is the intermediate care service between hospitalization and outpatient care, to perform procedures that require the patient to stay in the Unit for a maximum period of 12 hours.

## **3.1 CENTERS OF COEXISTENCE AND CULTURE**

They are services that offer people with mental suffering, spaces of coexistence, sociability, cultural production and intervention in their territoriality.





## 3.2 MENTAL HEALTH IN THE WORLD

Everyone has been concerned about mental health care, especially after the pandemic that has plagued our planet.

In 2022, the World Health Organization (WHO) released its largest global review on mental health, and brings some of the global priorities on the topic:

1. Deepen ing the value and commitment we give to mental health.

2.Reorganize the surroundings that influence mental health, including homes, communities, schools, workplaces, health services, etc.

3. Strengthen mental health care by changing the places, modalities and people who offer and receive services.

Based on these current priorities, after a period of social isolation due to the COVID Pandemic 19, we seek new opportunities for mental health care of the entire population in a preventive way and also in the sphere of care.

#### **4 LEGAL PROTECTIONS OF PEOPLE WITH MENTAL DISORDERS**

In addition to the services offered, our sluggisers concerned about the growing number of people with mental problems, consolidated Law No. 10,216 of April 6, 2001, (Brazil, 2001) said law aims to protect these people from any form of discrimination, whether in relation to race, color, sex, sexual orientation, religion, public option, nationality, age, family, economic resources, or level of education.

Evolving a little more, in July 2003, concerned about the rehabilitation of patients with mental disorders, after hospital discharge, the Law was enacted.10.708 /2003(Brazil, 2003), which instituted a psychosocial rehabilitation assistance for follow-up and care, outside the hospital environment.

#### **5 URBAN PARKS**

There are several types of urban green spaces, large and small, randomly scattered and named by the population of squares; parks; spas, gardens, green strips, and several others. But when we consider the commonly used green space, CONAMA – National Council for the Environment brings a definition in Article 8, § 1, of Resolution No. 369/2006; saying that the commonly used green spaces are those that perform "function ecological, landscape and recreational, providing the improvement of the aesthetic, functional and environmental quality of the city, being endowed with vegetation and spaces livres of waterproofing".

Urban parks show green spaces that can offer environmental services to the community in order to favor the preservation of the environment and provide social and environmental services that directly impact the perception of quality of life.





The concern with human-nature integration is multifaceted, and the construction of urban spaces is very important this question because they structure the networks of connection and favoring of interfaces. Jeanneret-Gris refers to the changes imputed in man by urbanization and highlights:

... In this moment of confusion, we return to the true principles thatthe human being and his environment are. Man considered as a biology - psychophysiological value; a means explored again in its permanent essence: that it will be nature... Refind the law of nature, and bring into account man in his midst – the fundamental man and the deep nature. Reseek, rediscover, rediscover the unity that generates human works and those of nature. Man product (perhaps supreme) of Natureand, consequently, mirror of this; Nature, part of the cosmos. In order for harmony to be in place, it is necessary to introduce into the spirit enterprises the very spirit that resides in the natural work. As for human work, it is necessary to become a solidary of natural work... (JEANNERET- GRIS, 1971, p 49)

Since the beginning of civilization, man has sought to reproduce in urban spaces the natural environments under practical manipulation and control of it; whether it is creatingrather ulations of natural shelters as one day were the caves, in solid dwellings built with its own natural wood and so many other elements from the transformations of our ores; or creating bathtubs and pools as simulations of rivers, lakes and even seas.

It is known that the creation of the parks seeks an adaptation that meets personal and family comfort. Shared social spaces have been created over time, as a consequence of the social nature of the human being, but also by specific needs throughout the history of mankind.

In prehistory, the parks were built with rocks. Man begins the transformation of nature, to better serve it, so as to offer shelter and security; supplying food needs, respecting luminosity in order to favor crops.

The Egyptians had in the parks the areas of cultivation and contemplation. The ruins of the palace of Nebuchadnezzar, demonstrates how wide and multiple were the spaces created in the jardins of Babylon, in antiquity, when a mechanical irrigation system was developed that carried water to the upper spaces of the gardens; and which became known as one of the 7 wonders of the Earth.

The parks of Ancient Greece valued the natural layout, introduced the manifestations of architectural art and that's when public parks emerged, the spaces began to be shared, and it was where philosophers met to dialogue and build hypothetical theories.

The Roman parks are large, with vegetation rich in trees and shadows, with the introduction of sculptures, water mirrors; with vast spaces where leisure and recreation were practiced. There were public gardens and private parks that interrelated with the villas, offering a playful and also productive space.

The Chinese parks were created with respect and admiration for nature, seeking to reproduce it in beautiful spaces with paths in which one could walk, and with spaces in which one can sit and contthe beauty of nature. The natural aesthetics in these parks play a key role.





Japanese parks, on the other hand, bring in themselves an exuberant symbology, stimulating feelings and meditation, *through* the transformation of natural *elements such as water, rocks, wood and others that bring the harmonic perception that reflects the symbols organized.* 

In the Middle Ages, parks have changed. Due to the period of insecurity caused by the wars of this period, the spaces and surrounded by walls were reduced, returning the practical use of planting food and medicinal herbs.

Nowadays, we can observe the unification between parks and buildings, where man becomes the "center of the universe", and the park. The parks reflect man's ability to build great spaces and control nature, demonstrating that natureza has its space determined by the one who is sovereign: man.

#### **6 FINAL CONSIDERATIONS**

In research authorized by the Research Ethics Committee of The Brazilian University, conducted by the author in 2019, it can be ascertained that "... users perceive the imposing of parks in the aspects of health, education, culture and leisure providing well-being but point to the need to carry out actions that provide services "(HILUANY, 2019)

In addition, they perceive the parks "... as a place for leisure, socialization, cultural experiential exchanges, recreation, the development of physical activities providing significant experiences of biopsychosocial health and coexistence." (H ILUANY, 2019)

Thus, thinking about the need for reorganization and eventual expansion of mental health care services, services that serve people with mental disorders and/or who have needs due to the use of crack, alcohol and other drugs, urban parks can be a service possibility,

offering spaces of education, coexistence, leisure, culture, sports practices, contemplation and approach to the natural environment.





## REFERENCES

Brasil. Lei nº 10.216, de 06 de abril de 2001.dispõe sobre a proteção e os direitos das pessoas portadoras de transtronos mentas e redireciona o modelo assistêncial em saúde mental. Disponível em: https://www.planalto.gov.br/ccivil\_03/leis/leis\_2001/l10216.htm#:~:text=lei%20no%2010.216%2c%20d e,modelo%20assistencial%20em%20sa%c3%bade%20mental. Acesso em: 20 nov.2022

Brasil. Lei nº 10.708, de 31 de julho de 2003.dispõe sobre um o auxílio-reabilitação psicossocial para pacientes acometidos de transtornos mentais egressos de internações. Disponível em: http://www.planalto.gov.br/ccivil\_03/leis/2003/l10.708.htm. Acesso em: 20 nov.2022

Davis, mike. Planeta favela. São paulo. Editora boitempo. 2006 Organização das nações unidas para educação, ciência e cultura - unesco.

Declaração universal sobre bioética e direitos humanos. Unesco. 2005. Disponível em https://unesdoc.unesco.org/ark:/48223/pf0000146180

Fleck, marcelo pio de almeida. Qualidade de vida. Disponível em https://www.ufrgs.br/qualidap/qualidade-de-vida

Gomes, m. A. S., parques urbanos, políticas públicas e sustentabilidade. Mercator, fortaleza-ce, vol. 13, n2, p 79 –90, maio-ago, 2014

Hiluany, marcela. Parques públicos e condições socioambientais da população: estudo comparativo no município de mauá – sp. 2019. 97f. (mestrado interdisciplinar em ciências ambientais), são paulo-sp.

Ministério da saúde. O que é a política de saúde mental? Publicado em 2020. Disponível em Https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/s/saude-mental

Ministério da saúde. Saúde brasil. Disponível em https://www.gov.br/saude/pt-br/assuntos/saude-brasil

Ministério da saúde. Saúde mental no trabalho é tema do dia mundial da saúde mental 2017, comemorado em 10 de outubro. Publicado em 2017. Disponível emhttps://bvsms.saude.gov.br/saude-mental-no-trabalho-e-tema-do-dia- mundial-da-saude-mental-2017-comemorado-em-10-de-outubro/

Organização pan-americana de saúde mental. Oms destaca necessidade urgente de transformar saúde mental e atenção. Publicado em junho de 2022. Disponível em https://www.paho.org/pt/noticias/17-6-2022-oms-destaca- necessidade-urgente- transformar-saude-mental-e-atencao

Souza, amaury de; lamounier, bolivar. A classe média brasileira: ambições, valorese projetos da sociedade. Rio dejaneiro. Editora campus. 201