67 - RECREATION TO SEVERELY MENTALLY DISTURBED INDIVIDUALS: STUDY OF COMPETENCIES

GISELE MARCOLINO SAPORETTI;
MARIA CECÍLIA M. C. MONTEIRO;
FÁBIO JUNIO MALAQUIA;
RODRIGO RODRIGUES GOMES COSTA;
KÁTIA EUCLYDES DE LIMA E BORGES.
Federal University of Minas Gerais-UFMG - Belo Horizonte/Minas Gerais - Brazil
laboratoriodomovimento@medicina.ufmg.br

INTRODUCTION

Life in Movement is a School of Physical Education, Physiotherapy and Occupational Therapy project and it is developed in the Laboratory of Movement. The project's aimed public is severely mentally disturbed individuals.

To Dalgalarrondo (2000), the body is a place of pain, pleasure, worry, fear and desire. Three factors are pointed out in the specialized literature as characteristics of the individuals suffering from psychosis: concrete thought, sedentary lifestyle and difficulty in establishing and maintaining social relationship. (BORGES, 2005; FAULKNER e TAYLOR, 2005).

The Life in Movement Project uses physical and recreational activities to stimulate severely mentally disturbed individuals to live deeply, and with quality, their own body and the contact with other participants.

MENTAL HEALTH

The increase of mental health problems that has been occurring in recent years involving the population of the planet has been faced as a challenge for the World Health Organization (WHO). The organization declares that three fourths of the population, that present problems in this field live in developing countries (WHO, 2000).

According to WHO (2000), neuro-psychiatric disorders are responsible for 11.5% of the increase of general illnesses in the worldwide population. Special contribution to the increase of these figures is attributed to depressions and psychoses.

The World Health Organization (2000) believes a reform in the attention and care system for the mentally disturbed individual around the world is essential. Among the reform proposals there is the desinstitutionalization.

The desinstitutionalization means a possibility of alternative treatment in the community, avoiding hospitalization in psychiatric hospitals, enabling all institutionalized patients, that has been adequately prepared for the change, to have a community life, and the establishment and maintenance of a communitarian system to support desinstitutionalized individuals (WHO, 2000).

Fonseca (1997: 331,201) teaches us that "conscience function organization and the "I" notion in human beings depend on the quality and quantity of the integrative system from personality activities, the structurants and integrative sectors of personality are three: the affective; the volitive and the intellectual activity. According to this author we call psychosis "a mental disturbed of a certain duration in which the individual often looses the contact with reality, having not conscious of this state and is, consequently, unable to establish an adequate critic of their symptoms and their clinical situation". Therefore the psychotic person is recognized by his physical and mental structure disorganization".

Using an instrument that evaluates three life domains: social, occupational, and intra-psychic and interpersonal functions, Borges (2005) researched 256 individuals with psychosis or serious neurosis. The social network domain got the smallest rates among the evaluated domains. This result confirms that this population's fragility reveals much more in social domain than in life conditions belongs. The same author defends that the way the person uses the own body and gestures, when expressing desires and frustrations, enables to explore the difficulties and potentialities in the integration of the body, psychic and social functions.

RECREATION

The etymology of the word recreation originate from two latin terms: *recreatio* which means refresh and *recreare* which means recover, reestablish, related to oneself (EDGINTON *et al*, 1995:85).

To Edginton *et al* (1995) recreation is a pleasant activity developed during free time, which can be used to recover social values. It involves voluntary participation, which can be focuses in a development of healthy and socially life style.

Sherrill quoted by Mauerberg-deCastro (2005: 281), says that "recreation emphasizes a mental process that may focus on a continuity of creation, intentions, beliefs and attitudes having the possibility to offer joy, pleasure and reflexes of cultural and historical significations for each individual". Still to Mauerberg-deCastro (2005), there isn't adapted recreation because it is organized by principles that assure affective, physical and cognitive demands.

Therefore, therapeutic recreation proposes the well being to the individual, supported by the personal relations improvement, ability to control anxiety, ability to express and communicate demands and necessities (EDGINTON *et al*., 1995). Mauerberg-deCastro (2005: 289), teaches us that therapeutic activities should include adequate interest and level elements to child, adolescent and adult development in order to guarantee maximum participation.

Li (1981) emphasized that professionals that work in the recreational programs for schizophrenic patients should have the following participant aim: learning abilities, the knowledge about community programs and the different ways of dealing with daily stress.

According to the author mentioned above, recreational approach consists of helping individuals in environmental and relational stress control and in the recognition, analysis and anticipation of daily situations that cause pressure for the individual on social level and also in recreational activities.

SELF-ESTEEM AND SELF- PHISICAL PERSEPTION

Van de Vliet *et al.* (2002) says that in some cases of mental disturb such as depression and anxiety the phenomenon of becoming ill is accompanied by the diminution of self-esteem, which provokes the decrease of social interactions.

According to Fox (2000), self-esteem can be influenced by several life dimension like, family, work and or physical I. Each domain mentioned has its own structure. To understand the influence of the "I" physical in self-esteem, Fox & Corbin (1998) shows a multidimensional, hierarchical model of self-esteem. In this hierarchical model Global Self-Esteem can be found on the highest level and, according to Hayes *et al.* (1999), it represents the general feelings of self-esteem. A level bellow there is Physical Self-Esteem that refers to the way the person feels regarding to his physical dimension (FONSECA & FOX, 2002).

In this model proposed by Fox and Corbin (1998), Physical Self-Perception can be found in the lowest level and it is dimensioned in four facets: sport competence, attractive body, physical strength and physical condition. The last refers to trust and ability to exercise. The physical strength is related to confidence in situations that require strength. Attractive body transmits confidence in appearance. According to the authors, sport competence refers to the ability of learning and performing a type of sport activity. Therefore it divides the perceptions to different contents of the "I" physical.

So, it is possible to conclude that one of the most important substratum of a person motor competence anchors in the Physical Self-Perception and consequently this Physical Self-Perception will influence the Global Self-Perception.

GENERAL OBJECTIVE

To create opportunities to develop social relationship in groups of severely mentally disturbed individuals.

Specific Objective:

To evaluate recreational activities possibilities to develop social relationship in groups of severely mentally disturbed individuals.

QUESTION

How do motor, psychic and social competencies factors that are included in recreational games behave when prescribed to a group of psychotic individuals?

METHODOLOGY

Participants: 14 severely mentally disturbed adults of both sexes.

Origin of the participants: *"Centro de Convivência* Program. Public mental health program coordinated by *Belo Horizonte* City Health Department and University Psychiatric Clinic. The *Centro de Convivência* is a community substitutive program to the psychiatric hospitals.

Professionals Involved: Physical Education teacher responsible for the classes and a team of three others Physical Education teachers.

Period of the program: February to July 2007.

Procedures: The one hour classes took place once a week and they consist of 25 recreational games, that as characterized as competitive or cooperative games. To games didactics partial method was used, with the following resources: demonstration, verbal instructions and feedback from the students. As a positive reinforcement it was established that participants should be invited verbally to participate in all activities. Classes were planed with the aim to respect physical, motivational, cognitive and psychic abilities of the participants.

Study Methodology: The qualitative method was used for this study. 03 instruments were defined: systemized observation of the participants during their time in the Laboratory of Movement; interviews with participants, relatives and reference professionals; participant Frequency File.

Observations data: The observations made by the 03 teachers were structured and systematized under the concept of competence.This term was defined in this study as a capacity to perform, control and produce adequate results in a requested or spontaneous action. The established categories are: (1) Motor Competence; (2) Psychic Competence; (3) Social Competence.

Observations were carried out during classes that was based on the class plan and, also, during all time of participants in the Laboratory of Movement.

After each class there was a professional discussion to systemize the observations, according to the established competences.

Interviews: During the semester, opened interviews were conducted with participants, their relatives and health workers references and the information collected during the interviews were organized during the team discussions.

Participant Frequency File: Participations and reasons of absence were registered in the Participant Frequency File.

RESULTS

At the end of the semester the participants presented the following results in each observed category:

(1) Motor Competence: Improvement was observed in the motor skills control in recreational games and activities. Factors as time, space, rhythm and balance showed positive changes when compared the beginning of the semester.

(2) Psychic Competence: Psychic availability was observed at the whole group when the required activities were carried out, but this performance was not observed in spontaneous activities. The psychic functions - attention and memory - influenced negatively the adequate control and the results of the requested and spontaneous activities.

The psychic function - affectivity - was the factor which showed highest instability in performance and control of the requested activities. The slight mood changes, showed by the participants, did not interfere in their capacity of following the rules, the organization and the strategies that was set in class plans. Sometimes, anxiety was experienced but it didn't in make the activities unfeasible.

(3) Social Competence: the best results were found in this category. Complexity of the socialization was noticeable during recreation games and activity in the Laboratory of Movement connected to the increase of the dialogue in the group. At the end of the semester the participants was arriving an hour before activities schedules. The interviews with the relatives and health professionals didn't registered changes in the participant's routine that would have caused the time increase in the Laboratory of Movement. This participants extra-time in the project was the result of an increase of participant's dialogue during recreation activities and extra-classes period in the Laboratory.

The observations indicated an improvement in the involvement control with others in the whole group when comparing the beginning and the end of the semester, however, the group still had difficulties performing competitive activities. The planed competitive activities were changed into cooperative activities by the participants.

The participation Frequency File contributed in the organization of the observations in the Social Category, once it subsidizes the team with the information about the participation constancy and the discipline in justifying absence. Two participants abandoned the project.

DISCUSSION

Legal insertion of Physical Education workers in the health team is a reality, however, the insertion by merit is considered as a great challenge for those working in public health services. A way to achieve a place in health public teams is through interventions which prove that the Physical Education workers are efficient to attend clinical groups.

OMS (2000) position, specifically about sustainable state politics that consolidate the deinstitutionalization, together with the factors interventions that characterizes mental disturbed individuals indicates that investigation field has to be established to consider specific facts to support the Physical Education professional's interventions among this specific health population.

Therefore, due to the references mentioned above the Life in Movement's Physical Education teachers aimed, for the first semester of 2007, to establish a quality investigation to verify the potential of the recreational games to offer opportunities to develop social relationship in a group of severely mentally disturbed individuals. The method used to respond the question that came up during the work had its reference by the study of factors that characterize the priority and legal domains of the prescription and intervention made by Physical Education teachers and factors mentioned in the literature as characteristics and weaknesses of the investigated

clinical group.

How do motor, psychic and social competencies factors that are included in recreational games behave when prescribed to a group of psychotic individuals?

Fox e Corbin (1998) emphasize the importance of Physical Self-Perception in the evaluation of the Global Self-Esteem and Van de Vliet *et al.* (2002) confirms that in some cases of mental disturb, such as depression and anxiety, the phenomenon of becoming sick is joined by the decrease of self-esteem which leads to the decrease of social interaction.

Therefore, it was possible to register in this study the contribution of the physical self-control, inserted in the following facets of physical self-perception: sport competence, physical strength and physical condition, to sustain the participant's self-esteem, since improvement in movement performance wasn't registered.

In the psychic domain, Fonseca (1997, p. 331) teaches us that "conscience functions organization and the elaboration of the "I "notion in human beings depends on the quality and quantity of integrative system of the personality activities: affective activity, volitional activity and intellectual activity. According to this study, the participation in the recreational games and activities showed: affection inconstancy, availability of the participants to perform requested but not the spontaneous activities and decrease in the attention and memory control. So, it is possible to identify gaps in the three sectors that structure the quality and quantity of the integrative system of the group attended by the Life in Movement Project, in other words, in the affective activity, volitional activity and in the intellectual activity.

The growth in the socialization complexity was observed during all the time of the group in the Laboratory of Movement and by the investigation of the interrelation of this vector with the increase of group conversation during classes and for an hour before classes. This find confirms the affirmative about the social values of the recreational activities as it is registered by Edginton *et al* (1995) when he confirms that recreation is a pleasant activity that can be used to rescue social values. This social value is, also, pointed out by Sherrill, quoted by Mauerberg-deCastro (2005: 281), when states that "recreation emphasizes a mental process that may focus on a continuity of creation, intentions, beliefs and attitudes having the possibility to offer joy, pleasure and reflexes of cultural and historical significations for each individual".

Therefore, it is important to reaffirm WHO concept regarding the political process of deinstitualization, which means an offer of alternative treatment in the community avoiding hospitalization, allowing community life for all the institutionalized patients, that had been adequately prepared for the change, including the establishment and maintenance of a communitarian system in order to support these people in their society (WHO, 1999).

CONCLUSIONS

According to Borges (2005), the individual way to use the body and the gestures when expressing desire and frustrations enables the person to explore difficulties and potentialities in the integration of body, psychic and social functions. A relevant factor to achieve an adequate quantification and qualification of body and gestures use, for a better integration of body, psychic and social functions, is to have the aim to improve the participant Physical Self-Perception.

By this study, it is possible to confirm that recreational games and activities offered by Life in Movement Project when used this specific methodology to answer the question made by the teachers opened up opportunities to develop social relations in this severely mentally disturbed group. These opportunities came up based on the possible modifications of motor, psychic and social competencies of the participants that were implicit and explicit in the recreational games planed for the interventions.

A quantitative investigation of Physical Self-Perception and Global Self-Esteem is suggested to refine researched factors.

KEY WORDS: recreation, severely mentally disturbed individuals, social network.

REFERENCES

BORGES, Kátia Euclydes de Lima. *Influência da Atividade Física na Qualidade de Vida de Sujeitos com Transtornos Mentais:* Estudo realizado nos Centros de Convivência do Município de Belo Horizonte. 2004. 425 f. Tese de Doutorado em Educação Física, Faculdade de Ciências do Desporto e de Educação Física, Universidade do Porto, Porto/Portugal, 2005.

DALGALARRONDO, Paulo. *Psicopatologia e Semiologia dos Transtornos Mentais*. Porto Alegre, RS: Ed. Artes Médicas, 2000. 265 p.

EDGINTON, C. R.; JORDAN, D. J.; DeGRAAF, D. G. & EDGINTON, S. R. *Leisure and life satisfaction: Foundational perspectives.* Dubuque, Iowa: Brown & Benchmark Publishers, 1995.

FAULKNER, G. E. J.; TAYLOR, A. H. *Exercise, Health and Mental Health Emerging relationships*. Londres: Routledge Taylor and Francis Group, 2005.

FONSECA**,** A. Fernandes da**.** *Psiquiatria e psicopatologia*. 2ª edição. Lisboa: Fundação Calouste Gulbenkian, 1997.

FONSECA, A. M.; FOX, K. Como avaliar o modo como as pessoas se percebem fisicamente? Um olhar sobre a versão portuguesa do Physical Self-Perception Profile (PSPP). *Revista Portuguesa de Ciências do Desporto*, Porto, v. 2, n. 5, p. 11-23, 2002.

FOX, K. R. Self-esteem, Self-perceptions and Exercise. *International Journal of Sport Psychology,* v. 31, p. 228-240, 2000.

FOX, K. R.; CORBIN, C. B. The Physical Self-Perception Profile: Development and Preliminary Validation. *Journal of Sport & Exercise Psychology,* v. 11, p. 408-430, 1989.

HAYES, S. D.; CROKER, P. R. E.; KOWALSKI, K. C. Gender differences in physical self-perceptions, global self-esteem and physical activity: evaluation of the physical self-perception profile model. *Journal of Sport Behavior*, v. 22, p. 1-10, 1999.

HOLANDA FERREIRA, A. B. *Novo Dicionário da Língua Portuguesa*. Rio de Janeiro, RJ: Editora Fronteira S.A., 1986.

LI, R. K. K. Activity Therapy and Leisure Counseling for the Schizophrenic Population. *Therapeutic Recreation Journal*, v. 4, p. 47-49**,** 1981.

MAUERBERG-DECASTRO, Eliane. *Atividade Física Adaptada*. Ribeirão Preto, São Paulo: Tecmedd, 2005. 555p.

ORGANIZAÇÃO MUNDIAL DA SAÚDE. (2000). *About Mental Health*. [Em linha]. Disponível em: http:*www.who.org*. Acesso em: out. 2000.

VAN DE VLIET, P. *et al.* Assessment of physical self-perceptions in normal Flemish adults versus depressed psychiatric patients. *Personality and Individual Differences*, v. 32, p. 855-863, 2002.

Rua Netuno, 74/303 Bairro Ana Lúcia CEP: 34.710-190
Sabará - Minas Gerais - Brasil
Telefone: (31) 3248-9929
E-mail: giselesaporetti@yahoo.com.br

RECREATION TO SEVERELY MENTALLY DISTURBED INDIVIDUALS: STUDY OF COMPETENCIES
ABSTRACT

Introduction: In 2007 between February and July recreational activities had been carried out under the Project called Life in Movement. The project's aimed public is severely mentally disturbed individuals. Three factors are pointed out in the specialized literature as characteristics of the individuals suffering from psychosis: concrete thought, sedentary lifestyle and difficulty in establishing and maintaining social relationship. (BORGES, 2005; FAULKNER e TAYLOR, 2005). Objective: Offer opportunities to develop social relationship in group of mentally disturbed individuals by recreation activity. Methodology: Qualitative study, using the following instruments: systemized observations of the participants during their period at Laboratory of Movement; interviews with participants, relatives and reference professionals; participant Frequency File. Results: Specific modifications had been showed in motor, psychics and social competencies, which lead to social bond formation among the participants. Conclusion: By this study, it's possible to confirm that with the recreational activities offered by the project and with the methodology used in the study social relationship was developed in this group of severely mentally disturbed individuals. The social relationship arose based on the motor, psychic and social participants competencies modifications.

KEY WORDS: recreation, severely mentally disturbed individuals, social network.

RÉCRÉATION POUR DES PERSONNES AYANT DES TROUBLES MENTAUX SÉVÈRES : ETUDE DES COMPETENCES
RÉSUMÉ

Introduction: Dans la période de février à juillet 2007 ont été réalisées des activités récréatives dans le Projet Vie en Mouvement. Le public que l'on prend pour cible dans ce projet est un groupe de personnes avec des troubles mentaux sévères. Trois variables sont indiquées dans la littérature spécialisée comme etant les caractéristiques de personnes avec une psychose: concretismo de la pensée, haut niveau de sédentarité et la difficulté à établir et maintenir des liens sociaux (BORGES, 2005 ; FAULKNER et TAYLOR, 2005). Objectif: Fournir des occasions de former des liens sociaux dans un groupe de personnes avec une souffrance mentale. Méthodologie: Travail qualitatif, en utilisant les instruments suivants: Observations systématiques des participants pendant leur periode de sejour dans le Laboratoire du Mouvement; Entretient avec les participants, leurs parents et des professionnels de la santé designés par ceux ci; Fiche de Fréquentation dans le Projet. Résultats: Il y a eu des modifications spécifiques dans les compétences motrices, psychiques et sociales qui se sont transformées en formation de liens sociaux entre les participants. Conclusion: Avec ce travail il est possible d'affirmer qu' avec les activités récréatives offertes dans le Projet Vie en Mouvement et avec la méthodologie utilisée pour répondre à la question établie par l'équipe, ce travail a fourni des oportunités de former de liens sociaux dans le groupe de personnes avec une souffrance mentale. Et que ces oportunités se sont produites sur la base de possibilités de modification des compétences motrices, psychiques et sociales des participants, implicitement et explicitement contenues dans les jeux récréatifs préparés par l'équipe pour ses interventions.

MOTS-CLÉF: récréation, troubles mentaux sévères, réseau social.

RECREACIÓN PARA LOS INDIVIDUOS CON AGITACIONES MENTALES SEVERAS: ESTUDIO DE CAPACIDADES
RESUMEN

Introducción: En el período de febrero a julio de 2007 habían sido realizadas actividades recreativas en el Proyecto Vida en Movimiento. El público objetivo de este proyecto es individuos con agitaciones mentales severas. Tres variables son acentuadas en la literatura especializada como característica de los individuos con psicosis: concretismo del pensamiento, alto nivel de sedentarismo e la dificultad en establecer y guardar enlaces sociales (BORGES, 2005; FAULKNER e TAYLOR, 2005). Objectivo: Proporcionar ocasiones de formación de enlaces sociales en el grupo de individuos con el sufrimiento mental. La metodología: Trabajo cualitativo, a utilisar los instrumentos siguientes: Comentarios sistematicos de los participantes durante el período en Laboratorio del Movimiento; Entrevista abierta con los participantes, sus familiares y con los profesionales de salud de referencia de los mismos; Ficha de Frecuencia en el Proyecto. Resultados: Habían tenido modificaciones específicas en las capacidades del motor, psíquicas y sociales que si habían transformado en formación de enlaces sociales entre los participantes. Conclusión: Con este trabajo es posible afirmar eso, con las actividades recreativas ofrecidas no Proyecto Vida en Movimiento e con la metodología empleada para contestar a la pregunta establecida por el equipo, el mismo proporcionó ocasiones de formación de enlaces sociales en el grupo de individuos con sufrimientos mentales. E que estas ocasiones habían ocurrido con base en las posibilidades de modificación en las capacidades del motor, psíquicas e sociales de los participantes, implícito y explícito en los juegos recreativos planeados para las intervenciones, por el equipo.

PALABRAS CLAVES: recreación, agitaciones mentales severas, red social.

RECREAÇÃO PARA INDIVÍDUOS COM TRANSTORNOS MENTAIS SEVEROS:
ESTUDO DE COMPETÊNCIAS
RESUMO

No período de fevereiro a julho de 2007 foram realizadas atividades recreativas no Projeto Vida em Movimento. O público alvo deste projeto são indivíduos com transtornos mentais severos. Três variáveis são apontadas na literatura especializada como características dos indivíduos com psicose: concretismo de pensamento, alto nível de sedentarismo e a dificuldade em estabelecer e manter vínculos sociais (BORGES, 2005; FAULKNER e TAYLOR, 2005). O objetivo foi proporcionar oportunidades de formação de vínculos sociais em grupo de indivíduos com sofrimento mental. Foi realizado trabalho qualitativo, utilizando os seguintes instrumentos: observações sistematizadas dos participantes durante o período dos mesmos no Laboratório do Movimento; entrevista aberta com os participantes, seus familiares e com profissionais de saúde de referência dos mesmos; ficha de freqüência no Projeto. Os resultados demonstraram modificações específicas nas competências motoras, psíquicas e sociais que se transformaram em formação de vínculos sociais entre os participantes. Com este trabalho é possível afirmar que, com as atividades recreativas ofertadas no Projeto Vida em Movimento e com a metodologia utilizada para responder à pergunta estabelecida pela equipe, o mesmo proporcionou oportunidades de formação de vínculos sociais no grupo de indivíduos com sofrimento mental. E que estas oportunidades ocorreram com base nas possibilidades de modificação nas competências motoras, psíquicas e sociais dos participantes, implícitas e explícitas nos jogos recreativos planejados para as intervenções, pela equipe.

PALAVRAS-CHAVES: recreação, transtornos mentais severos, rede social.