

Freedom is therapeutic: reinventing lives in psychiatric reform

DOI: 10.3395/reciis.v3i4.328en

Paulo Amarante

Doctor in Public Health, LAPS/SNP/FIOCRUZ
Av. Brasil, 4036/506 – CEP 21040-361 –
Manguinhos – Rio de Janeiro
laps@ensp.fiocruz.br

Mariana Rangel

Master in Public Health, LAPS/SNP/FIOCRUZ
Av. Brasil, 4036/506 – CEP 21040-361 –
Manguinhos – Rio de Janeiro
laps@ensp.fiocruz.br

Technical File

DVD / Documentary

RUÍNAS DA LOUCURA

Directed by Karine Emerich e Mirela Kruehl. Script by Karine Emerich. Produced by Cris Reque
Rio Grande do Sul, 2008

26 minutes

Fiocruz Video / Fiocruz Distributor – Health Video / Fiocruz Publisher

Synopsis

“A portrait of the daily lives of Ecton, Jorge, Israel, Abel, Marli and their two siblings: Manoel and Regina. Stories of lives that cross and the possibility of living differently in a Home – the Morada Viamão Therapeutic Residential Service – created in 2005 to house former patients of the São Pedro Psychiatric Hospital.”

One of the most notable experiments that have been occurring in this country is that of psychiatric reform. Under this concept, which is not always clear, there are a series of political, social and cultural initiatives that are radically transforming psychiatric care, health policies and, most importantly, the lives of numerous people and the day-to-day of many social practices.

Psychiatric reform stopped being a set of innovations restricted to the psychiatric care model and became a complex social process (Amarante, 2008) which aims to transform the relations society

establishes with madness, diversity and difference. Most conceptions of psychiatric reform tend to reduce it to care reform, focusing mainly on the modernization of treatment modalities.

However, the most current and broad conception of psychiatric reform defines it based on various dimensions. Apart from the technical-assistance dimension, which indeed implies a change in the various forms of caring and care services, the epistemological dimension relates to transforming the paradigm that psychiatry is based on, moving the biomedical model's privileged

knowledge about madness to other forms to other ways of understanding psychic suffering. Another dimension, of a legal-political order, includes the concept of citizenship and social and human rights and goes against notions of danger, alienation and irresponsibility that underlie and help to sustain the traditional psychiatric model.

Finally, the socio-cultural dimension expands knowledge about madness, not only by removing it from the restricted field of psychiatry but also by constructing a new relation with society. In this dimension, madness gains a broader field of experimentation and, by leaving the privileged space of treatment, it ends up influencing broader society. It allows itself to be touched by resources that go beyond the therapeutic, gaining more space in the media, as well as using socially-valued resources for expression.

As an instrument to achieve such daring changes, there is nothing more strategic than using the devices of art and culture and, even more, the art and culture produced by the subjects of these innovations. This, for example, is the purpose of the recent policy Crazy for Diversity (*Loucos pela Diversidade*), developed by the Ministry of Culture in cooperation with Fiocruz, to give visibility to the productions of people undergoing psychic suffering.

That is how diverse artistic-cultural productions have been the stage for constructing a new relationship between society and madness, leading to a stronger role for those subjects traditionally limited to the role of “mental patients”, objectified by medical knowledge (Basaglia, 2005).

Among the significant examples are those in the field of music, where many groups are appearing and becoming increasingly well-known by the general public, leaving the restricted space of their treatment sites and of the conception of therapy itself, which they had been strongly associated with. That is the case with the musical groups *Harmonia Enlouquece* (*Harmony Makes You Crazy*), *Sistema Nervoso Alterado* (*Altered Nervous System*), *Hip Hop Black Confusion* and *Trem Tan Tan* (*Loopy Train*), among others. Or those in the theater field, with an increasingly great involvement of social actors linked or not to the mental health field, making this limit even more subtle and complex. In this respect, it is worth noting the theatrical companies *Ueinzz!*, *Pirei na Cenna* (*I Went Mad on Stage*) and *Os Nômades* (*The Nomads*), to name but a few examples of the artistic wealth that is being produced.

Regarding filmography, important changes

can be seen in the themes approaches, as well as in the main participants of the short films or feature films of the last decades. “*Em Nome da Razão*” (*In the Name of Reason*), directed by Helvécio Ratton, in 1979, became a classic by eternalizing the criticism of the horrors at the Barbacena psychiatric hospital, an emblematic institution of the asylum-mental home model.

Having attained some repercussion in the media, the psychiatric reform process provoked important echoes, such as “*Policarpo Quaresma – Herói do Brasil*” (*Policarpo Quaresma – Brazilian Hero*) (1998), by director Paulo Thiago - inspired on the classic by Lima Barreto - who declared that he focused on psychiatric criticism in the film after finding out about the fight against mental homes in Brazil; “*Estamira*” (2006), by Marcos Prado; “*Profeta das Águas*” (*Prophet of the Waters*), by Leopoldo Nunes (2005); and the highly-awarded “*Bicho de 7 Cabeças*” (*Creature with 7 Heads*) (2001), which became known as an anti-mental home film; in addition, it was recently the “social activism” in the soap opera “*Caminho das Índias*” (*The Path to India*), aired on Brazilian prime-time television.

A rich video production has recently been demonstrating the possibilities of overcoming the traditional psychiatric model. Mirroring changes in the role played by people in mental suffering, these productions register and prove the changes in the paradigm sustaining mental health care. Propelled by the principles of psychiatric reform, these transformations have been leaving the field of therapy and the interest of mental health technicians, entering a society that is broader and more sensitive to the changes begun in this transformation.

“*Ruins of Madness*”, from the state of Rio Grande do Sul, is part of this generation of films that present successful situations, representing the gradual change in the social perspective on madness. Directed by Mirela Krueel and Karine Emerich and produced by Cris Reque, it was one of the seven winners of the 1st Fiocruz Video Competition, which took place in 2009 and had as its final purpose to fund audiovisual productions about health, with a total of 155 registrations. The film, in its 26 minutes, is the living representation of how to overcome health as “the absence of illness”, a notion that has been formalized in Brazil since the 1988 Constitution, but which is still a challenge for the construction of the conception of madness. The film relates to new forms of life, constructed on the challenge of leaving the hospital’s “protection” and creating new social ties and new

circuits through the city, which is part of the idea of health as “physical, mental and social well-being”. It is an extremely beautiful example of these new settings and new lives which, leaving the mental homes, flower abundantly, which would surprise anyone who read these people’s medical records, where expressions such as incapacity for social life, danger, irresponsibility, etc, predominate.

The video presents absolutely everyday situations that become unexpected when they involve actors who, long kidnapped from the urban circuit, begin to construct a new relationship with the city, using their surroundings – the supermarket, the bus, the local store, the neighborhood park, strolling through city streets – in an almost novel way. With the closing of one of the wings of the São Pedro Psychiatric Hospital, in Porto Alegre, the Morada Viamão Therapeutic Residential Service was built, which began to house some of the former patients. This way, the “interned patients” gained the status of inhabitants of houses and the city.

They began to be no longer dictated by the pace of the local institution (Goffman, 1975), where patients tend to live, work and play in a single space, under rules imposed by the hospital’s directors and always in the company of numerous other patients. Challenges then arise, such as managing their own nutrition, as it is no longer produced by the psychiatric institution, as well as dealing with their own money and their own time, using these in their own way, rediscovering this, as it had long been wrapped up in the institutional web.

In this new modality of inhabiting, where the experience of living somewhere and the therapeutic act cross in various ways, there is not single, homogenous experience. The film shows, on the contrary, a space that is not free from contradictions, but one that congregates various meanings – for some, the residence is a place to pass through, still a necessary space due to the exclusion created by the family or other situations; a place for reuniting, where brothers and sisters, for many years artificially distanced by the psychiatric institution, start living together again; for others, a home in the true sense of the word.

The very denomination of Therapeutic Residential Service contains two contradictions. On the one hand, it joins in a single expression, home and a therapeutic space; on the other hand, home and service, bringing together such different spaces and objectives. They are official impositions, which guarantee the funding and continuity of projects which could take even more diverse forms.

Although the video makes countless

references to the deactivated ward and the suffering of those who were part of its daily life, the title “Ruins of Madness” can be questioned, as the prevailing message is of an optimism that points to new and richer ways of dealing with madness and with those subjects who have been institutionalized and oppressed by the psychiatric hospital.

Not only the content of what is shown – the transition from psychiatric hospital to a residence in formation and all the reflections that can be made around this – but also the form reveals a new relation with the subjects with psychic suffering. Side by side, the images captured by the cameraman and by the inhabitants of the Residence make up the entirety of the work that contains, with a single action, the outsider’s gaze, as well as the gaze of those who are part of this new process, as inhabitants, highlighting what is important for both parts. It also reveals that, despite the differences that exist between technicians and inhabitants, roles are often confused, indicating a new care paradigm that implies contradictions and new learning for those who traditionally had the psychiatric hospital as the intermediary of their relations.

When one of the inhabitants is asked about what to do with the deactivated hospital building, he doesn’t hesitate to answer – “demolish the building!” The request for the end of mental homes remains very current. Many arguments still persist in favor of the existence of the psychiatric hospital, fundamentally based on several attempts to modernize it, or to transform it into a “true” healing institution. These ideas are present from the classic English experiments – Maxwell Jones therapeutic community – and French experiments – François Tosquelles institutional psychotherapy and Lucien Bonnafé’s sector psychiatry, which have long shown the failure of these initiatives. Thus, the progressive overcoming of the mental home model and its resulting substitution for care, social, community and cultural networks and devices has been the fundamental objective of Brazilian psychiatric reform.

The idea of demolishing the building echoes the reaction that both the former inhabitants of the hospital and the technicians have when they visit its facilities. This reunion seems to bring back to the subjects the experience of suffering, violence and neglect that, in a way, both groups were subjected to.

This impression is so striking that some of the utterances of technicians and users become

confused. In certain moments, it is difficult to identify the relation between the author of the utterance and the institution. This evidence points strongly to the necessity of transforming the technicians themselves, as these also need to construct new mindsets, new conceptions of the suffering-existence (Rotelli et. al, 2000), of the so-called therapeutic relation, of the ideas of healing and care and of autonomy, among others. De-institutionalization, as a complex social process, implies not only in the transformation, as has already been seen, of techniques and therapies, but also of the social actors involved, including the users themselves, their families and the technicians.

An inscription on the wall of one of the residences brings to mind one of the first mottos, but also one of the hypotheses that inspired Italian psychiatric reform, which became one of the first conceptual references and practices in the Brazilian process: "Freedom is therapeutic!"(Mauri, 1983)

Franco Basaglia, leader of the Italian Democratic Psychiatry movement, used to say that he would like it if, when someone told the story of the experiment he coordinated in Trieste, they would not tell a story of dates, of great deeds and facts, but rather a story of lives transformed by this work, of lives reconstructed, of life projects created. That is what came into our minds when

another inhabitant was asked about the future, about tomorrow. "Tomorrow is Wednesday. There's painting class", he answered. And isn't that a good enough life project!?

Fontes de consulta

AMARANTE, P. **Saúde Mental e Atenção Psicossocial**. Rio de Janeiro: Editora Fiocruz, 2008.

BASAGLIA, F. **Escritos selecionados em saúde mental e reforma psiquiátrica**. Rio de Janeiro: Editora Garamond Universitária, 2005.

GOFFMAN, E. **Manicômios, prisões e conventos**. Rio de Janeiro/São Paulo: Editora Perspectiva, 1978.

MAURI, D. (org.) **La libertà è terapeutica? l'esperienza psichiatrica a Trieste**. Milano: Feltrinelli, 1983.

ROTELLI, F. De Leonardis, O. Mauri, D. **Desinstitucionalização, uma outra via**. In Nicácio, F (org.) **Desinstitucionalização**. São Paulo: Editora Hucitec, 1990.