





Mental Health care: contributions of physiotherapy

O cuidado em Saúde Mental: contribuições da fisioterapia

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The concept of mental health adopted by the World Health Organization (WHO) is related to the state of well-being of a person capable of realizing his / her own skills, dealing with the tensions of everyday life, and making contributions to society which he / she lives.¹ According to the mistaken body-mind dualism, mental health is an integral and essential part of health and, therefore, cannot be approached in opposition to physical health.

It is understood that psychological suffering is not reserved for people who have received a specific diagnosis, but something present in everyone's life, and that manifests itself in a particular way to each one. Sometimes, such sufferings become so significant that they affect social, family, and professional activities.²

Mental disorders are described as conditions that affect cognition, mood, impulse control, and behavior to compromise the individual's ability to perform their duties in society, which

can lead to disability, morbidity, and premature death. Regarding epidemiology, Brazilian studies indicate a prevalence of 30% of adults affected in the period of one year.³ Belfer⁴ and Kieling et al.⁵ state that mental disorders are among the ten conditions that professionals worldwide have increasingly discussed most cause disability and.

Among the manifestations that characterize mental disorders are changing body structure and movement, such as difficulties in performing movements, chronic muscle stiffness, posture changes, abnormal breathing patterns, and impaired body expression. The presence of these bodily changes can occur to the detriment of the mental disorder itself or due to the prolonged action of psychotropic medications and significantly interferes with daily life.⁶

Epidemiological data demonstrate that, concerning old age, the most common psychopathologies are depression, anxiety, dementia, schizophrenia, alcohol dependence, and personality disorders.

It is believed that the aging process may be related to a situation of a vulnerability contributing to the development of diseases such as mental disorders. Factors such as advanced age (over 80 years old), family abandonment, loneliness, social fragility, and continuous use of five or more medications can also negatively influence the functionality of the elderly.⁷⁻¹²

Regarding mental health in childhood and adolescence, the prevalence can reach 20% of the population in this age group. Family conflicts, school problems, bullying, impulsivity, and depression are estimated to be the main risk factors for childhood suicide.^{13,14}

Care for people with mental disorders, since the Psychiatric Reform in the 70s, has as main objective the full exercise of their citizenship, which implies offering care through open services, with the active participation of the community, forming networks with public policies such as education, employment, housing, and etc.²

For Ayres¹⁵, the relationship between patient and professional is always an encounter. This therapeutic encounter must be a true relationship of care. There is already in Brazilian collective health a reconstruction of health practices that bring health care to the fore. According to the National Humanization Policy of SUS, health care is a dimension of integrality that must permeate health practices.

Therefore, care does not belong to one or the other profession. Heidegger¹⁶ considers that the human being is a being launched into the world, in a reconstruction of himself and the world and, therefore, he thinks it is fair to assume that health practices, whatever they may be, and practiced by any professional's health, are also elucidated as care.

Speaking specifically of physical therapy, it has become increasingly important in the field of mental health, presenting itself as a non-drug treatment option for the promotion of well-being, self-care,

optimization of functional movement, and awareness of movement. The physiotherapist is the health professional who studies the body's movement, its forms of expression, and potential. He can act in the prevention and treatment of functional kinetic disorders.¹⁷

Regarding its performance in mental health, physical therapy can contribute to the maintenance of health status and enable the rehabilitation of functional capacity. One of the possibilities for intervention is through psychomotricity, a transdisciplinary field of action whose objective is to investigate the relationship between thought and action associated with emotions. In mental health, this practice uses the body and movement as an instrument to assist in social communication, enable contact with emotions, and express thoughts. In addition, it seeks to improve self-esteem and self-confidence.¹⁸⁻²⁰

Duignan, Hedley, Milverton²¹ state that the work of movement, of body awareness, bring different interpretations for people in psychological distress; however, there is a consensus that the benefits arising from their practice are great, whether organic or psychological. It is said that its action is not only psychomotor but psychosocial. In addition, the therapeutic body practice fits into the precepts of health for promoting health, preventing diseases, and providing longevity.

Authors' contributions

FV, Sampaio LVP, Ceccato MW and Nascimento S participated in the conception and design of the study, search and analysis of research data, interpretation of results, bibliographical survey and writing of the scientific article.

Competing interests

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