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EXPERIÊNCIA

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LEARNING MENTAL HEALTH THROUGH VIDEOGRAPHY PRODUCTION: AN EXPERIMENTAL REPORT

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ABSTRACT: This article reports on an educational experience developed in the Undergraduate Nursing Program of the Escola Superior de Ciências da Saúde in the Federal District of Brazil. The objective is to describe the methodological proposal of the adult health module, with emphasis on learning evaluation. The module promoted dialogue between the thematic of mental health, with a focus on anti-asylum medicine; art, through thematic triggers (films, music, poetry); and Problem-Based Learning. The cognitive evaluation exam was done through production of videos. The results indicate that in the students' perceptions, the module's methodology aided in understanding the psychosocial perspective of mental health care, created a legitimate space of familiarity with singularity, and stimulated group work and the creative process.

DESCRIPTORS: Problem-based learning. Educational measurement. Nursing education. Mental health.

APREDIZAGEM EM SAÚDE MENTAL POR MEIO DA PRODUÇÃO VIDEOGRÁFICA: RELATO DE EXPERIÊNCIA

RESUMO: Relata-se uma experiência educacional desenvolvida no Curso de Graduação em Enfermagem da Escola Superior de Ciências da Saúde do Distrito Federal. Objetivou-se descrever a proposta metodológica do módulo de saúde do adulto, com ênfase na avaliação de aprendizagem. O módulo promoveu o diálogo entre a temática da saúde mental, com foco na clínica antimanicomial, a arte, por meio dos disparadores temáticos (filmes, música e poesia) e a Aprendizagem Baseada em Problemas. O exame de avaliação cognitiva foi realizado por meio da produção de vídeos. Os resultados indicam que na percepção dos estudantes, a metodologia do módulo favoreceu a compreensão da perspectiva psicossocial de atenção em saúde mental, criou um espaço legítimo de convivência com a singularidade, e estimulou o trabalho em equipe e o processo criativo.

DESCRIPTORES: Aprendizagem baseada em problemas. Avaliação educacional. Educação em enfermagem. Saúde mental.

APRENDIZAJE EN SALUD MENTAL A TRAVÉS DE LA PRODUCCIÓN VIDEOGRÁFICA: RELATO DE EXPERIENCIA

RESUMEN: Se presenta una experiencia educativa desarrollada en el curso de graduación en Enfermería de la Escuela Superior de Ciencias de la Salud del Distrito Federal. El objetivo fue describir el módulo de la propuesta metodológica de salud del adulto, con énfasis en la evaluación de los aprendizajes. El módulo ha promovido el diálogo entre el tema de salud mental, centrándose en la clínica anti-manicomial, el arte, a través de disparadores temáticos (películas, música y poesía) y el Aprendizaje Basado en Problemas. El examen de evaluación cognitivo se realizó por medio de la producción de video. Los resultados mostraron que en la percepción de los estudiantes, el módulo de metodología favorece la comprensión de la perspectiva psicossocial de la salud mental, y ha creado un espacio legítimo para la convivencia con la singularidad y alienta proceso de trabajo en equipo y creatividad.

DESCRIPTORES: Aprendizaje basado en problemas. Evaluación educacional. Educación en enfermería. Salud mental.

INTRODUCTION

This article has the objective to report on the academic experience of establishing a thematic module developed in the Undergraduate Nursing Program of the Escola Superior de Ciências da Saúde (ESCS) of the Fundação de Ensino e Pesquisa em Ciências da Saúde, in Distrito Federal (DF), Brazil; to analyze the experience of teaching mental health care through dialogue between Problem-Based Learning (PBL) and art, as understood from the perceptions of the students; and to reflect on the potential for amplification of learning through this dialogue in the education of health professionals. The ESCS nursing program curriculum has PBL as one of its six axes, the student as the center of learning, and is oriented toward the education of professionals who are critical, reflective, and have the capacity to intervene in community health problems, thus meeting the national guidelines for nursing education.¹

PBL is an approach in which the students deal with previously prepared problems in small groups, with the support of a tutor. It is guided by the assumptions of adult learning, which emphasizes: previous knowledge for the mediation of new learning; diversification of scenarios that facilitate the construction of new knowledge; the understanding that knowing implies access to, and the constant reconstruction of, information; appreciation of the practice as a structure for learning; and the understanding that motivation to learn is produced in the articulation between personal projects and socio-educational conditions.^{2,3} It is the method of learning adopted in the thematic modules of the program, through which is sought a comprehensive approach to health problems of the epidemiological profile of Brazil and DF, in their multiple dimensions, and in the perspective of comprehensive health care.^{1,4-5}

The module, called "Adult health: mind and behavior," focused on mental health care, and was directed to 46 third-year students in the Nursing Program. The theoretical framework of the module included health and mental suffering as subjective processes, the promotion of autonomy and role of the subject in the perspective of psychosocial rehabilitation, and care centered on singularity, in the promotion of citizenship and social inclusion. The articulation between PBL as a guiding methodology of the teaching-learning process of the module put into perspective the possibility of overcoming the fragmentary concept of the

subjects, attained through the use of a critical pedagogy and dialogue.⁵

The perspective of social inclusion is particularly important to the establishment of the psychosocial approach to mental health care, and replacement of the asylum model that preceded it. Social inclusion, understood as the movement to return the possibility of a social life to institutionalized patients, is a movement that goes beyond deinstitutionalization, aiming "to make the excluded person once again a participant in social, economic and political life, assuring respect for his/her rights in society, by the state and public authorities, recognizing his/her special needs and specific rights, the protection and exercise of which depend on the fulfillment of basic human rights".^{5:13}

The principal of singularity as recognition of what is particular to each patient constitutes one of the bulwarks of anti-asylum practice,⁶⁻⁸ in that this approach takes the construction of singularized subjectivity as a tool for the production of mental health. This construct identifies not only a clinical aspect, but also an ethical one, which makes possible "the redemption of the value and importance that the mentally-ill patient has for a life of inclusion in the sphere of the family and society".^{7:32}

Based on these aspects, the thematic module had the objective to provide students with reflection about the challenge of inclusion, and experimentation with the singularities of mentally-ill patients, through dialogue between education, art and the principles of anti-asylum practice.

The experience sought to provide the opportunity for dialogue between art, education and health, through the articulation of aesthetic and epistemological elements; to promote understanding and the practice of mental health care from the perspective of social inclusion of the mentally-ill patient; to make teaching and learning activities flexible, and to innovate educational technologies; and to promote the education of professionals capable of thinking and making decisions, and of searching for important information that they need, so that they relate to a particular situation, and participate in the collective construction and permanent adaptation to the changing context.⁹⁻¹⁰

METHODOLOGY

Evaluation of the experience that resulted in the development of this article was done after

conclusion of the module, through analysis of the dossiers produced by the students, subdivided into six groups, which contain the report and evaluation of the process of videography production. Content analysis was adopted, supported in a critical and dynamic conception of language as an expression of the social representations of a certain reality. This modality can be understood as a group of techniques of analysis of communication that aims to obtain, through systematic procedures of the description of the content of messages, the indicators that permit the inference of knowledge relative to the conditions of production/reception of these messages.¹¹ Organization of the written records constituted a *corpus*, from which the recurring ideas were extracted from keywords and expressions. After organization of the key ideas, three empirical categories stood out: the collective construction of knowledge through videography production, videography production as a strategy for evaluation, and difficulties in establishing the videography production.

In the description of the categories, it was decided to identify the excerpts of the group reports with codes G1, G2, G3, G4, G5 and G6. It is worth noting that the group records represent the consensus of its members (on average eight students). In each category, Arabic numerals were used to indicate the frequency of occurrence of the ideas

that support it, emphasizing the most illustrative excerpts from each key idea. A second, interpretive analysis allowed for making of inferences about the developments that appeared from the reports. The experience was part of the research project titled "Recreation: art and play in health education," approved by the Research Ethics Committee of the Federal District Health Department (CEP/SES-DF 193/11). The Free and Informed Consent Form was used for all of the students.

DESCRIPTION OF THE EXPERIENCE: MENTAL HEALTH, ART AND EDUCATION

As in the other thematic modules of the program, the methodology for development of the module followed the philosophical and operative principles of PBL, considering the processing of problems related to mentally-ill patients. However, some innovations were introduced, such as the use of music, poems, chronicles and films as thematic triggers¹²⁻¹³ (see table 1), in a way that brings the students closer to the theme and nature of mental illness from everyday elements that are familiar and concrete to everyone. Innovations were also made on the cognitive evaluation exam, with the proposed format of videography production, in addition to the evaluative formats already being used.

Table 1 – Thematic triggers for the tutoring sessions of the module "Adult mental health: mind and behavior"

| Mental health theme | Thematic triggers |
|---|---|
| Historical modes of mental health care – from the asylum to the psychosocial | Letter "Letter to chief physicians of asylums," by Antonin Artaud |
| | Video "Rosso come il cielo [Red like the sky]," directed by Cristiano Bortone |
| | Video "Colpo de luna [Moon shadow], directed by Alberto Simone |
| Subjective processes in mental health – the whole being and psychic functions | Letter "Letter 133 – To Theo," by Van Gogh |
| Abuse of psychoactive substances | Music "Heroin," by Velvet Underground, translation by Vander Colombo |
| | Video "When a man loves a woman," directed by Luis Mandoki |
| Anxiety disorders | Music "Paranóia," [Paranoia], by Raul Seixas |
| | Video "As good as it gets," directed by James L. Brooks |

| | |
|-------------------------------------|---|
| Psychotic disorders | Music "Wish you were here," by David Gilmour and Roger Waters |
| | Video "A beautiful mind," directed by Ron Howard |
| Mood disorders | Music "Balada do louco" [The mad man's ballad], by Ney Mato grosso |
| | Video "Mr. Jones," directed by Mike Figgis |
| Suicide behavior | Poem "Adeus, meus sonhos! [Goodbye, my dreams]," by Alvarez de Azevedo |
| Experiences with death and mourning | Poem "Morrer é preciso [Need to die]," by Fernando Pessoa |

The 46 students were divided into six groups for the videography production. Each group was responsible for tackling the transversal themes and one specific theme related to care for mentally-ill

patients, resulting in six videos (Table 2). Additionally, each group developed a report detailing the operational stages and evaluation of the process of videography production.

Table 2 – List of the videos produced by the students during the module "Adult mental health: mind and behavior"

| Theme | Title of video | Synopsis |
|--|---|--|
| Care related to anxiety disorders | A mania to live | Woman sees herself incapable of exercising everyday activities due to severe obsessive compulsive disorder. |
| Care related to psychoses | Relearning to live | Adolescent who does poorly on college entrance exam shows signs of schizophrenia. |
| Care related to the abuse of psychoactive substances | One achievement every day | Adolescent's abuse of alcohol endangers family, school and social life. |
| Care related to suicide behavior | Should have loved more | Man who finds himself bankrupt becomes depressed, with suicidal ideation and behavior. |
| Care related to mood disorders | Love disorders | Woman has her marriage compromised by mood disorders that bring her to megalomaniacal thoughts and compulsive purchases, among other things. |
| Care related to experiences of death and mourning | The supportive relationship begins with ourselves | Nursing students debate the anguish and challenges of coping with situations of death and bereavement. |

The production of videos as an exercise in cognitive evaluation was inspired by the works that approach communication that is processed through the production of images.¹⁴⁻¹⁵ Whether television, film or art, communication is a mirror of reality, bringing together cultures and multiplying knowledge before unreachable physical scales and distances, policies and even cultures of different human societies and social groups. On the other hand, communication through images is also a space to promote the inventive, creative and imaginary, contributing to the expansion of the

production of singularized subjectivities, which makes every patient a unique and worthy being.

The production of images has a rational dimension (historical and cultural record), a sensible dimension (record of the imaginary and inventive), and another that can be called aesthetic and artistic in nature. The image is primarily a sign which, when recognized, provokes interpretative reactions in those who perceive it. Additionally, the polysemic dimension of the image is constituted in a way of placing the theme of the construction of the knowledge as a priority, making it a cultural object.¹⁴

It is seen that in addition to being an aesthetic phenomenon, the production of images can be considered an epistemological phenomenon, because in this scenario not only the image as the final product should be taken into account, but also the process of its production, which is filled with meaning and learning, and is itself a tool of knowledge production. Knowledge is established in so far as the capacity to learn is more critically exercised, considering that "to teach is not to transfer knowledge, but to create possibilities for its production or construction".^{16:52}

In this case, the production of the videos by the students, as an evaluative format, was anchored in three dimensions: the epistemological, through the production of knowledge; the aesthetic, through the production of singularized subjectivity (expression of the imaginary and the inventive); and the dimension of mental health care, in so far as the production of singularized subjectivity functions to forge modes of existence, which model the ways of feeling and thinking of the individuals, making the exercise of subjectivation as much an aesthetic tool as a tool for rehabilitation of mentally-ill patients for a socially-inclusive life.¹⁷

RESULTS AND DISCUSSION

Collective construction of knowledge through videography production

This category was defined from the 54 excerpts from students' reports, and proves the validity of the experience as an instrument of collective construction of knowledge. This perspective places utmost importance on the exchanges and dialogue between the different actors in the process of knowledge construction, as "the subject that opens to the world and to others inaugurates with his/her gesture the dialogue relationship in which unease and curiosity are confirmed as unfinished and in permanent movement in history".^{16:86}

This perception of the students is clear in the excerpt extracted from one of the reports, with their statement: [...] *the proposed methodology-videography production – added new knowledge and experience to our academic routine...and greater integration between the group members, because it was work that needed to be constructed collectively* (G2).

The mobilization of the personal attributes of the subjects involved in the process of production of knowledge are valuable tools in this operation. The reports that reaffirm this idea state: [...] *the*

group members were punctual, diligent and respectful and demonstrated responsibility during the development of the work (G1), and reiterated: [...] *for the creation of this film, we improved our groupwork abilities, which occurred from the development of the script through to editing* (G4). Thus, it is clearly shown that the videography production (VP) mobilized attributes such as responsibility, diligence and punctuality, and improved the ability to work and develop as groups.

Collectively constructed knowledge is allied to the paradigm of complex reality, which is dynamic and impermanent. At the same time it is close to the thinking of Prigogine, who defends that in contemporaneity, the construction of scientific knowledge cannot prescind the notion of dynamic instability, associated to the notion of chaos as an element of reality. In this aspect, "the reconsideration of chaos brings a new coherence, a science that speaks not only of laws, but also of events, which is not condemned to deny the emergence of the new, which would admit a denial of its own curious activity".^{18:8}

The notion of inclusion of dynamic instability as an element of reality is parallel to the perspective of inclusion of the unique, of subjectivities, as perceptions, feelings and thoughts, of knowledge and practices. Some of the reports reveal this fundamental aspect of collective construction, as clearly shown in the following excerpt: [...] *the videography production contributed to cohesion of the group, because everyone's opinions were discussed and respected, which enriched the personal perception of the students* (G6).

Subjectivity is a plural, polyphonic phenomenon that is produced individually, collectively and institutionally. In this sense, we see VP as a vehicle of communication and instrument of subjectivation, as "the technological machines of information and communication that operate in the nucleus of human subjectivity".^{19:12}

In this movement, it is clear that the VP not only supported the collective construction of knowledge, but also the construction and inclusion of singularized subjectivities, thus making operational a fundamental principle of the psychosocial model of mental health care. For one group of students [...] *the various points of view were enriching and fundamental for the construction of the work, providing for individual and collective growth to accept and confront new challenges* (G1).

The social inclusion of the mentally-ill patient entails respect and inclusion of his or her singularities.¹⁷ This perspective, which was

initially proposed by the movements in the anti-asylum battle, is today spread throughout diverse initiatives to revitalize the humanizing principles of health care. The National Humanization Policy of the Brazilian Unified Health System reiterates the importance of inclusion of singularities and focus on groupality as strategies for the collective construction of knowledge and practices in health. The guiding axes of this policy include valuing the different subjects involved in the process of health production, the promotion of autonomy and protagonism of these subjects, the increase of level of co-responsibility in the production of health and subjects, which is put into practice through the construction of different spaces of meeting and exchange, and the construction of knowledge.²⁰

In addition to inclusion of singularities, the students consider the experience to be [...] *a space for the alternative manifestation of creativity, providing a lucid, proliferative environment of theoretical and practical knowledge* (G2). Education governed by the recreation of subjects, the capacity for self development, and reflection about the dynamic of complex and ambivalent situations implies the innovation of pedagogic strategies²¹⁻²³ in the less innocent consideration of the curriculum, as "place, space, territory and relationship of power".^{22,772} In this experience, as verified in the perception of the students, the initiative valued the creative aspect of the process of production of knowledge, strengthening subjectivity. Further, it was a space of innovation. For example, according to an excerpt from one of the reports: [...] *the proposal was innovative because it gave us the opportunity to develop our creativity* (G4).

The proposal of VP as an evaluative format fulfilled the proposition for innovation of pedagogic strategies, providing students with the opportunity of a path that was epistemological (production of knowledge) and aesthetic (art) in the process of production of knowledge. In other words, the art, as an expression of the mediating sensibility of transcendences of the spirit, was taken in its capacity to stimulate creativity, which increased understanding of the world and evoked meanings that surpassed the formalism of the teaching institutions.²²⁻²⁶

In this sense, it is highlighted that the alliance between the active methodologies of learning, especially PBL, and other strategies that promote creativity and ethical and aesthetic abstraction, can produce meanings from learning and knowledge that surpass instrumental rationality, contributing

to the formation of critical citizens and innovative health care professionals, for work in a context that is constantly changing.^{10, 23-25}

Here, we should remember the perspective of significative learning²⁶ as that which overcomes mechanical or memory learning, and advances to contribute to the reinvention of subjects from their cognitive restructuring. Mixing active methodologies and audiovisual tools, through videography production,¹⁴ allows for the development of spatial-temporal, synesthetic and creative abilities, in addition to cognitive abilities. This perspective is present in the following statement: [...] *the videography production contributed substantially to the learning process because it stimulated the development of creativity, cognition and memory* (G1).

Thus, it is accepted that audiovisual resources mediate our knowledge of the world, presenting different ways of representing reality, representing the same object in different angles and means, "through movements, scenarios and sounds, integrating the rational and affective, the deductive and inductive, space and time, the concrete and the abstract".^{15:164}

Another perception about the production of videos is that the experience supported the students to deal with the solution of problem situations and challenges, which enriched the academic routine and aggregated new methodologies of learning and evaluation. This idea was taken from the reports, which affirmed [...] *with the development of the video we perceived that learning goes beyond the classroom* [...] (G1); and *we learned to deal with problem situations, which required our capacity to solve them* (G4). It is observed that dealing with the problem situation mobilized latent abilities of the students to solve them, bringing them to content bases in a proactive manner. This attitude was empowered by the break from the everyday of the classroom and acceptance of the challenge by the group.

It is concluded that the experience provided the three requirements of significative learning²⁶: the offer of new knowledge structured in a logical manner; the existence of knowledge in the cognitive structure which made its connection with the new knowledge possible; and the explicit attitude of learning and connecting knowledge with that which it intends to absorb.

It is thus reinforced that the validity of the proposal also resides in its disruptive potential, inducing innovative and sincere responses from the students that are unviable through the traditional

methods of evaluation and learning. In the words of the students: [...] *we expressed our opinions, our anguish, and expressed what we felt, which gave our work the character of extreme sincerity* (G6).

Another aspect of significative learning, present in the statements, was the sharing of meanings of the knowledge produced by the collective, at the same time that the singularity of the interpretation of each individual is preserved. This process of construction of knowledge that articulates the human being and his/her environment, his/her self and his/her fellow humans, is what promotes autonomy, and connects the human to his/her cultural environment, situating his/her beliefs, values, feelings and attitudes.²⁷ Thus, it supports the formation of autonomous, creative, participatory subjects that are engaged with the reality in which they want to intervene, transcending the modulatory and regulatory aspects commonly instituted in processes of nursing education in Brazil.²²

Here, the affective and intellectual dimension of learning gain importance, in the perspective of the production of new knowledge, through the exercise of curiosity, intuition, emotion and responsibility, in addition to the critical capacity to observe and follow the object/objective.² The reports verify that, in this approximation with professional practice, albeit through the videos, a welcoming attitude was valued of qualified and humanized care, highlighting [...] *the role of the professionals was given to the nurse, as the welcome and propagator of qualified and humanized attention* (G4).

These perceptions reaffirmed the perspective that the teaching of mental health care should favor a comprehensive and multidimensional approach of the subjects, one that is sympathetic and respectful, in addition to being based on creativity, reflection, ethics, dynamism and innovation.²⁵ The perception that the production of the videos favored this reflection and the construction of new views/perspectives of "mental illness" is clear in the students' statements. According to the report of one of the groups, [...] *placing us in the experience of a supposed reality as actors [...] mentally-ill individuals, family members and health professionals, in addition to the entire society around us, enriched us and made us look within ourselves and at others with new views, making us comprehensive nurses that are able to discern more than what is seen* (G5).

As cognitive and creative exercises, the students put themselves in the place of the other, and constructed images, behaviors and attitudes

of professionals, family members and patients with mental disorders. In some situations, this construction reproduced stereotypical and equivocal views/perspectives, which, when exposed through dramatizations, made their identification and debate between the students and teachers possible, thus making the evaluative process an instrument of new problematizations of reality.

This movement finds resonance in the principles pursued in the module, of producing surprise, of substantiating differences in an exercise of generating alterity and inclusion of the other, who is different from the me. Here alterity is taken as a "representation of the other within us, and the capacity to coexist with the different, to proportion an interior view from the differences [...] the recognition that the other is also a subject with equal rights".^{27:574} This implies the creation of approaches that are opposed to the technical and instrumental rationality predominant in the education of health care professionals, in favor of approaches that awaken the subject's will to transcend, broadening his/her understandings and ethical possibilities of the world, and promoting his/her own interpretations and interventions.²² For such a break to occur, it is necessary that the pedagogic and evaluative activities produce other meanings of learning, leaving the automatism of ideas and practices, and producing abstractions that subvert the rigidity of norms through the expression of feelings.

Videography production as a strategy of evaluation

As an evaluation tool, VP was little mentioned in the students' reports, with only three statements that considered it a form of evaluation: [...] *different and interesting* (G3). This perspective deserves mention, since even though VP has been proposed as an evaluative tool, its evaluative character was superseded by the perception of its relevance as a tool for learning and collective construction. The reports reinforce the perception of the contribution of VP for the exercise of the inclusion of the singular, as an essential proposition of the thematic module, and as the experimentation of the emancipatory perspective of the learning evaluation.

On this point, it is inferred that as an evaluative tool that distances itself from a verificatory character of content learning, VP approaches the perspective of emancipatory evaluation as a process of description, analysis and critique of a given

reality, aiming to transform it.²⁸ It has an emancipatory nature, since knowledge, participation and the critique of reality liberates the actors from subjection to the determinants of the situations experienced, leading them to the proposition of alternative transformers in the future.

In this sense, it is possible to affirm that the evaluation through the production of videos was adequate to the dynamic adopted in the module, in the sense of articulating art, education and health, promoting a flexible and open form of conducting PBL. By stimulating the creativity of the students, from a context that afforded previous knowledge and clearly established rules and standards of results, the punitive and controlling character of the evaluations that favor cognitive aspects of learning was overcome. As an evaluative strategy, it also fulfilled the challenge of coherence between the pedagogical proposal and the methodology of evaluation of the module.

Difficulties of establishing videography production

There were seven occurrences of difficulties reported by the students which were related to transport, work with new methodologies in relation to the traditional model, inexperience and short amount of time between definition of the theme and VP: [...] *short amount of time available and the division of themes close to the presentation date made good conclusion of the work difficult* (G2).

In addition to the difficulties experienced by the students in the process of videography production, there were those perceived by the teachers who proposed the initiative. The first one was the search for a theoretical-methodological basis for this initiative. Reports of pedagogical experiences of videography production that described the stages of the process and its validity as a strategy for learning and evaluation were surveyed.

The second difficulty related to the alignment between the proposal for VP as evaluation of the module and the school's standards of learning evaluation. Careful readings of the evaluation manual were done to find normative support and conditions for reproducibility of the initiative in other modules and/or other grades. All of the stages of the process were formally registered according to the protocol of the school's learning evaluations.

The third difficulty consisted in confronting the resistance of faculty in relation to the production of videos as an evaluative format. It was observed

that the different professional trajectories, little approximation with the theme of mental health, and above all, the certain attachment to that instituted in the school as evaluative formats, kept the majority of faculty members apprehensive in regard to the results of the experience. There was effort to attain group cohesion of those who taught the thematic module, in the sense of aligning knowledge and practices during its conduction. Additionally, it was observed that many faculty members were positively affected by the adhesion and enthusiasm of the students, which helped to overcome the obstacles, attain the educational objectives of the module, and validate the experience through its emancipatory character of evaluation.

CONCLUSION

In the students' perceptions, through their encouragement of the construction of collective knowledge, group work, development of creativity and creation of a legitimate space for familiarity with singularity, the module helped the understanding and experience of the psychosocial perspective of mental health care.

The videography production was characterized as a methodological innovation that integrated the dimension of art through its aesthetic potential to explain the knowledge acquired; through the dimension of education as an epistemological resource that contributes to the production of knowledge; and the dimension of health, by promoting the production and inclusion of singularities, a principle and tool for mental health care. In this sense, the dialogue between PBL and art amplifies the potential for learning, and is useful in the training of health care professionals who are critical and reflective about reality.

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