

**IMPLEMENTATION OF ONLINE COMMUNITY THERAPY: CARE
TECHNOLOGY IN TIMES OF PANDEMIC**

**IMPLANTAÇÃO DE TERAPIA COMUNITÁRIA ONLINE: TECNOLOGIA DO
CUIDADO EM TEMPOS DE PANDEMIA**

**IMPLEMENTACIÓN DE LA TERAPIA COMUNITARIA EN LÍNEA: TECNOLOGÍA
DE ATENCIÓN EN TIEMPOS DE PANDEMIA**

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ABSTRACT: Suddenly in March 2020 we found ourselves confined and isolated in our homes, due to a global health crisis arising from a pandemic, caused by the contamination of a virus called COVID-19. This health crisis also generated a crisis in the social determinants of health, especially those related to the economy, education and culture. But it also generated another crisis, the psychosocial crisis, where populations affected by the effects of mental damage caused by the pandemic and isolation, showed important signs of stress. It is in this scenario that the Integrative Community Therapy, previously carried out in person, is renewed and reinvented. This article reports on the experience of implementing the Integrative Community Therapy online in Brazil and presents the results of the Afinando Vidas Pole in the contribution of improving the quality of life and the individual and collective mental health of the Brazilian population.

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KEYWORDS: Online integrative community therapy. Health technology. Humanized collective care. Innovation.

RESUMO: De repente em março de 2020 nos vimos confinados e isolados em nossos lares, em função uma crise sanitária global advinda de uma pandemia, causada pela contaminação de um vírus chamado COVID-19. Esta crise sanitária, gerou também, uma crise nos determinantes sociais da saúde, principalmente os ligados à economia, a educação e a cultura. Mas também gerou uma outra crise, a psicossocial, onde populações atingidas pelos efeitos dos danos mentais causados pela pandemia e situação de isolamento, apresentaram sinais importantes de estresse. É neste cenário que a Terapia Comunitária Integrativa, até então realizada presencialmente, se renova e se reinventa. Este artigo relata a experiência de implantação da Terapia Comunitária Integrativa online no Brasil e apresenta os resultados do Polo Afinando vidas na contribuição da melhoria da qualidade vida e da saúde mental individual e coletiva da população brasileira.

PALAVRAS-CHAVE: Terapia comunitária integrativa online. Tecnologia em saúde. Cuidado coletivo humanizado. Inovação.

RESUMEN: De repente en marzo de 2020 nos encontramos confinados y aislados en nuestros hogares, debido a una crisis de salud global derivada de una pandemia, provocada por la contaminación de un virus llamado COVID-19. Esta crisis de salud también generó una crisis en los determinantes sociales de la salud, especialmente los relacionados con la economía, la educación y la cultura. Pero también generó otra crisis, la psicossocial, donde las poblaciones afectadas por los efectos del daño psíquico provocado por la pandemia y el aislamiento, mostraron importantes signos de estrés. Es en este escenario donde se renueva y reinventa la Terapia Comunitaria Integrativa, previamente realizada de manera presencial. Este artículo informa sobre la experiencia de implementación de la Terapia Comunitaria Integrativa en línea en Brasil y presenta los resultados del Polo Afinando Vidas en la contribución de mejorar la calidad de vida y la salud mental individual y colectiva de la población brasileña.

PALABRAS CLAVE: Terapia comunitaria integrativa en línea. Tecnología de la Salud. Atención colectiva humanizada. Innovación.

Introduction

The world is suddenly faced with an unprecedented scenario, a pandemic, that of COVID-19, spreading and reaching most countries in immense proportions. According to Daumas *et al.* 2020 COVID-19 is an ongoing pandemic, it is a systemic disease, highly contagious, with a degree of lethality 14 times greater than that of influenza. Depending on the organizational, cultural and social variations of each continent/country, it can be devastating due to its more severe form, which is the acute respiratory (Severe Acute Respiratory Syndrome - SARS-CoV-2), this disease added to the unavailability of intensive care beds has been responsible for the high mortality rate in Brazil and other countries (DAUMAS *et al.*, 2020).

The disease was first identified in Wuhan, in the province of Hubei, People's Republic of China, on 1 December 2019, but the first case was reported on 31 December of the same year. On 12 March 2020, the World Health Organization declared a world emergency because of the outbreak and classified the health situation as a pandemic with the highest rate of public health emergency.

According to the WHO, until 31 August 2020, 25,118,689 cases of COVID-19 (264,107 new in relation to the previous day) and 844,312 deaths (5,385 new in relation to the previous day) were confirmed worldwide, being in the region of the Americas, about 13,268,684 confirmed cases and 465,206 deaths. Among the countries that lead the number of outbreaks are the United States, about 5,624,449 cases and 175,076 deaths, and Brazil, with about 3,532,330 cases and 113,358 deaths (WHO 2020).

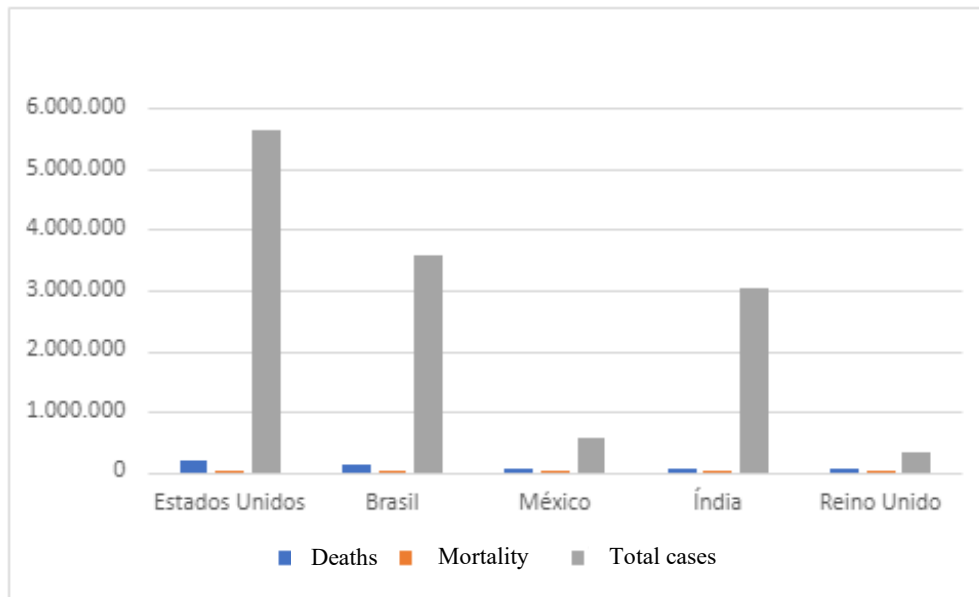
Figure 1 – Confirmed cases of coronavirus in the world are close to 20 million, and rising rapidly (graph)



Source: Johns Hopkins University (2020)⁸

⁸ Johns Hopkins University, national health agencies, data until 9 August 2020. Available: <https://www.bbc.com/portuguese/internacional-53734786>. Access: 2 Sep. 2020.

Figure 2 – Deaths worldwide chart by COVID-19 until August 2020



Source: BBC News Brasil (2020) – adapted by the authors

The history of pandemics in mankind has been recorded for a long time, but when the event presents itself, it is accompanied by the need for emergency adaptations, changes in economic, political and especially health dimensions. Historically, these events appear in biblical manuscripts and span the centuries and decades until they find us. It is usually associated with people's lack of knowledge about the impact of these diseases on social relationships.

Diseases with these characteristics can wipe out millions of people. Observing the timeline of these events, records of various contagious diseases are identified long before and after the Christian Era, namely:

Table 1 - Records of contagious diseases before and after the Christian Era

Diseases	Concept
The plague of the III century	From 251 to 266 A.D. originating in Egypt, which spread to Greece, North Africa, devastating the entire Roman Empire;
The Black Death of the 15th century	One of the most tragic in history, starting in Asia Minor through China and Mongolia, decimating one third of Europe, causing approximately 200 million deaths.
The Spanish Flu or Plague	In the 20th century, around the time of the first great war, between the years 1918 and 1919, caused by the mutation of the Influenza virus, which repeats the contamination, but with a smaller proportion, in 2009, which killed more than 50 million people;
Ebola (2013-2016)	This virus has been identified in Sudan and the Democratic Republic of Congo, being lethal in humans and animals. The epidemic outbreak occurred in 2013 in the West African region, reaching countries like Sierra Leone, Liberia and Guinea, infecting 28,454 people and killing 11,297.
SARS-Cov-2	Previously mentioned with characteristics that resemble the flu and the transmission that occurs from person to person through the contact of droplets. Although some drugs and vaccines are being tested, science has yet to discover an effective way to fight the disease worldwide.

Source: Rezende (2009), Ornell (2020) and Super Interessante (2004)

A pandemic scenario raises many reflections, as it requires changes that are not always easy or, even so, fast. Humanity has made important lessons from the pandemics of the past, this result was the improvement of science in research, in technique, safety, quality and investment in health professionals and in the performance of their actions. Although much has to be done for this status to become excellent (SANAR, 2020; ECCARD, 2018).

The isolation experience that we are living with the pandemic of COVID 19 has revealed situations that require specific care, including the maintenance of Integral Health, highlighting the importance for the prevention of quality of mental health care (SHIGEMURA *et al.*, 2020; CRISTOPH, 2010).

Current studies and health organizations have drawn attention to the impact that this pandemic has brought, including in the second pandemic - fear. Recommendations are made for confined societies to look for strategies to maintain a healthy body and minds.

The compromise in the quality of individual and collective mental health due to the pandemic

National and International Health Agencies have recommended preventive actions that collaborate with blocking the spread of COVID-19 in Brazil, avoiding the increase in deaths and worsening in the Health System. Social isolation is one of the most important global

strategies for these actions, however, social isolation has caused psychological discomfort for many people, arousing anxiety, stress and fear (SHALDERS, 2020).

To understand the psychological repercussions of a pandemic, it is based on the point that the emotions involved, such as fear and anger, must be considered and observed.

Fear is an adaptive animal defense mechanism that is critical to survival and involves several biological processes to prepare for a response to potentially threatening events. However, when it is frequent, without pauses for recovery, for homeostasis to occur, it becomes harmful and can be an essential component in the development of various psychiatric disorders. On a scale of measurement of 9-10 in a pandemic, fear increases the levels of anxiety and stress in healthy individuals and intensifies the symptoms of those with pre-existing psychiatric disorders (CORREA, 2020).

According to Correa (2020) during pandemics, the number of people whose mental health is affected tends to be greater than the number of people affected by the disease. Other tragedies that have occurred in the world have shown that the implications for mental health can last longer and have a higher prevalence than the pandemic itself (MORENS *et al.*, 2008; REARDON, 2015).

In addition to the constant experience of fear of death, the COVID-19 pandemic brought impacts and needs for adaptations in different spheres such as family organization, education, companies and public places. The demand for quick responses in the personal and work routine, combined with the need for isolation, contributes to the permanent and persistent presence of feelings of helplessness and abandonment, in addition to increasing insecurity due to the economic and social repercussions resulting from this tragedy.

For Correa (2020), fear has the basic function of preserving life, aiming to anticipate physical or psychological and also social damage, generating fight-flight or “freezing” behaviors, evidenced in the individual's paralysis, in the face of the phenomenon that awakens fear (CORREA, 2020).

Fear is also responsible for the accumulation of anxiety and stress. Anatomically our brain, facing situations that cause fear, acts as follows: All the information that enters through the senses passes through the amygdala, a very small structure of our limbic system that constitutes the oldest area of the brain, regulated exclusively by our emotions. The amygdala monitors what happens in our interior and exterior and in face of these situations, its alert system immediately activates the nervous system, so that it quickly puts into practice an answer: the fight, the flight or the freeze (CRISTOPH, 2010).

The mental impairment in the population by the pandemic of COVID -19, is not restricted only to the epicenter of the disease. The Spanish population also shared the worsening mental health experienced by the Chinese. Almost a fifth of the Spanish population interviewed was depressed, and 21% anxious (OMS, 2020).

The symptoms of stress and post-traumatic stress disorder in this population were seen in three times more people than in the general population under normal conditions (OMS, 2020). French research goes further and associates this increase in the incidence of psychiatric disorders during the SARS pandemic in 2003 with a significant increase in cases of suicide in people aged 65 and over who were in isolation at the time. However, for Almeida, to combat this mental health crisis, it is necessary to know its main signs, so that the population can receive the necessary assistance as soon as possible (ALMEIDA, 2020).

The importance of Community Therapy in times of pandemic

Integrative Community Therapy is a Brazilian therapeutic practice whose mission is to integrate scientific knowledge and popular wisdom in order to seek solutions to conflicts and human suffering. According to the author of the technique, Barreto, Integrative Community Therapy is an instrument that allows us to build solidary social networks to promote life and mobilize the resources and skills of individuals, families and communities. It seeks to raise the therapeutic dimension of the group itself, valuing the cultural heritage of our indigenous, African, European and Eastern ancestors, as well as the knowledge produced by each person's life experience (BARRETO, 2019).

The Integrative Community Therapy circle is a technique used in groups: schools, companies, communities, work teams, among others. This technique was created by the Brazilian ethnopsychiatrist Professor Dr. Adalberto Barreto and is practiced in more than 24 countries between South America, Europe and Africa. Brazil currently develops this practice out of its forty-two training centers, which teach courses and conduct circles.

Formation in Integrative Community Therapy includes practical experiences, theoretical content, systematic monitoring of students in formation (supervision), as well as reflection and appreciation on the wheels they perform, enabling them to appropriate the technique, feeling safe to perform the circles (BARRETO *et al.*, 2020).

More than 30,000 community therapists are computed across Brazil, these data are organized and provided by ABRATECOM - Brazilian Association of Integrative Community Therapy, the regulator of this practice (ABRATECOM, 2020).

Integrative Community Therapy has been part of the National Policy of Integrative and Complementary Practices (PNPIC) since 2018, working in areas such as: health, education, social assistance, communities and the private sector (BRASIL, 2018).

Also the Integrative Community Therapy was present in situations of catastrophes and socioenvironmental accidents, such as Brumadinho, by the Afinando Vidas Pole in 2019 and landslides in communities located in Baixada Santista - 2020, showing an efficient and assertive technique in welcoming people who suffered with these disasters, as well as for the employees who served these populations.

Implementation of Integrative Community Therapy Online

In February 2020, when the first case of COVID-19 appeared in the city of São Paulo, and with the announcements of the official bodies about the community transmission of the disease and the need for social isolation, some countries simultaneously and synchronously had ideas and practices of facing the world crisis situation. Belgium, and then Chile and Brazil tested the realization of Integrative Community Therapy circles in the virtual environment (ALVES, 2020).

In Brazil, the Formative Pole in Integrative Community Therapy Afinando Vidas, held its first round online on 19 March 2020. It started this action as an experiment first with its work team, its educators, in order to verify the feasibility of developing this practice, in order to contribute to the acceptance of human suffering in this context of the pandemic. After reflections and appraisals, the team described the work technique they developed and observed how much this action could be accomplished and expanded. This experience was replicated to other Formative Poles, as well as to ABRATECOM, leading to the joint creation of a protocol, which systematizes the realization of integrative community therapy circles online.

According to the WHO, Health technology is understood as a set of tools, including work tools, that set-in motion a transforming action of nature. In addition to the equipment, the knowledge and actions necessary to operate this action must be included. They are material and immaterial resources of technical acts and work procedures. The term “Technology in Health” covers, then a set of devices with the objective of promoting health, preventing and treating diseases and rehabilitating people, and is related to the intervention through equipment, procedures and relationships that seek to build a more humanized dimension in the multiple natures of the production of this work (OMS, 2020; POLITÉCNICA DE SAUDE JOAQUIM VENÂNCIO SCHOOL, 2006).

The sense of health technology unfolds between material and immaterial. Merhy classifies health technology in three aspects: Hard, Soft-hard and soft. The hard technology is related to the use of equipment, soft-hard technology is that which performs procedures and protocols and the soft technology is present in the welcoming processes, bonds and comprehensive care in health actions (COELHO; JORGE 2009; BRASIL, 2013).

One of the most important elements in the Integrative Community Therapy (ICT) circle is a space that produces bond, exchange and learning among participants, we managed to relate many conceptual elements of light technology with ICT and the construction of a humanized form of collective action that it values subjectivities and proposes autonomy and freedom.

Integrative Community Therapy online was implemented as a major challenge; to use a hard technological means such as cell phones or computers (hard technology) mediated by the construction of a protocol (soft-hard technology) to be used as a soft technology intervention that aimed to use one of the main axes of the national humanization policy; welcoming, empathetic listening, establishing links, exchanges and sharing experiences, at a time when we face global problems, where it is necessary for people to stay away so that they do not transmit, get sick or die from virus contamination.

Due to the situation of confinement, fighting against the Corona virus, or even the strangeness of this new condition, the population had to adapt, many people lost their social ties and stopped building support networks. Thus, the presence of various feelings of stress, fear, anguish, intra and interpersonal conflicts were striking and compromised the quality of mental health of many citizens, reaching the community significantly.

In addition to the performance of the circles, another fundamental point for work management was the registration of the tables in order to evaluate the work process. In this sense, a partnership was established with SisRodas⁹ (GOIS, 2020).

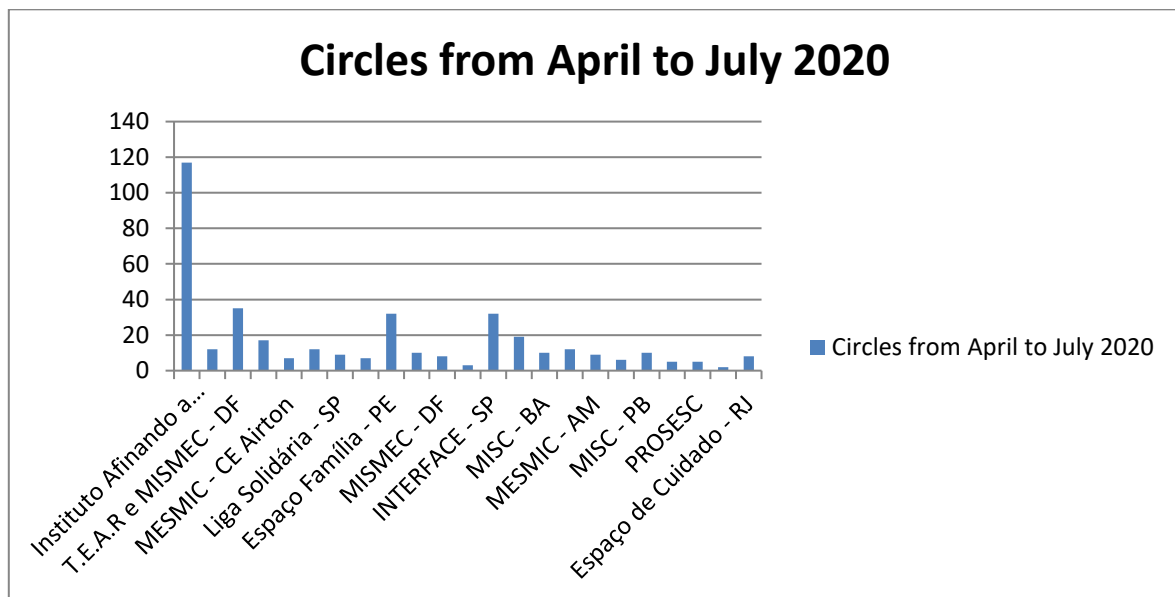
In this partnership, the *Afinando Vidas* Institute acquired the application to register its presential and virtual circles. During the months of March, April, May, June and July 2020, at the same time that the Institute was supporting the finalization of the ICT online protocol document, it also carried out exponentially online therapy circles in partnership with other formation centers, as well as proceeded with the training in community therapy adapted to the

⁹ SisRodas is a System for Registration of Integrated Community Therapy Circles that was formally presented at the 10th Brazilian Congress and VII International of Integrative Community Therapy in September 2019. As of October 2019, a testing process was initiated for those interested and in December the *Afinando Vidas* Pole entered a business-financial partnership between Polo Instituto *Afinando Vidas* and the *Acreditar e Compartilhar* Polo.

remote semi-presential format where the students in formation encouraged and supervised by their teachers also took part.

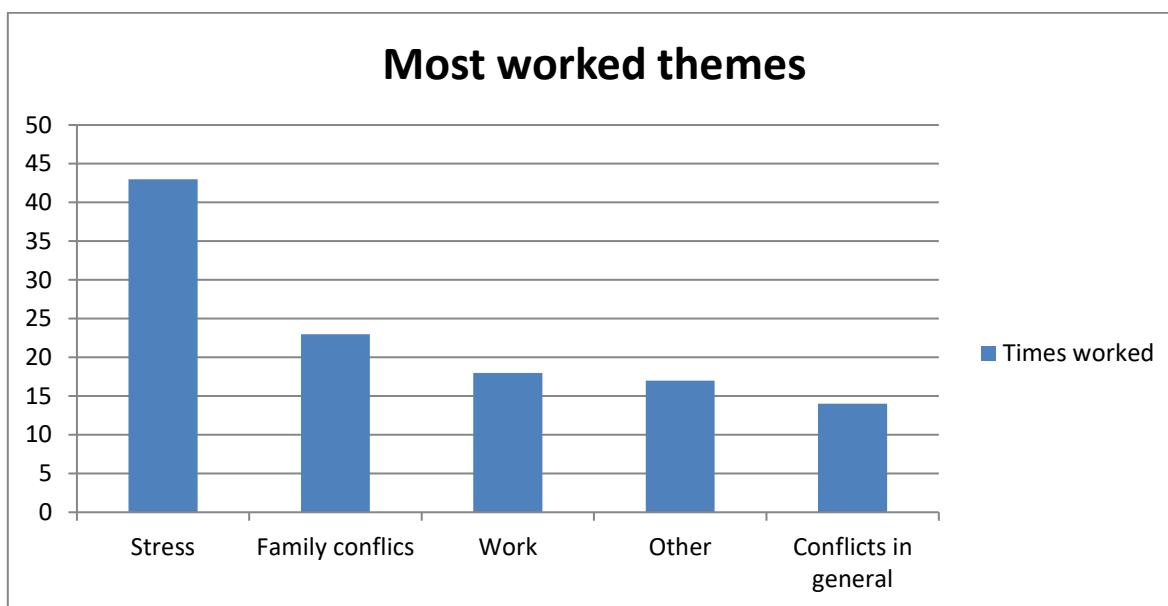
Graph 1 informs that in the period from April to July 2020, 387 ICT circles were carried out online with the participation of 9457 people, in Brazil. We highlight here the productivity of the *Afinando Vidas* Institute which carried out a total of 117 circles with 1506 participants, with an average of 13 participants per circle, it is important to highlight that the Afinando Vidas Institute has already used the System since January 2020.

Graph 1 – Graph of Circles performed from April to July 2020



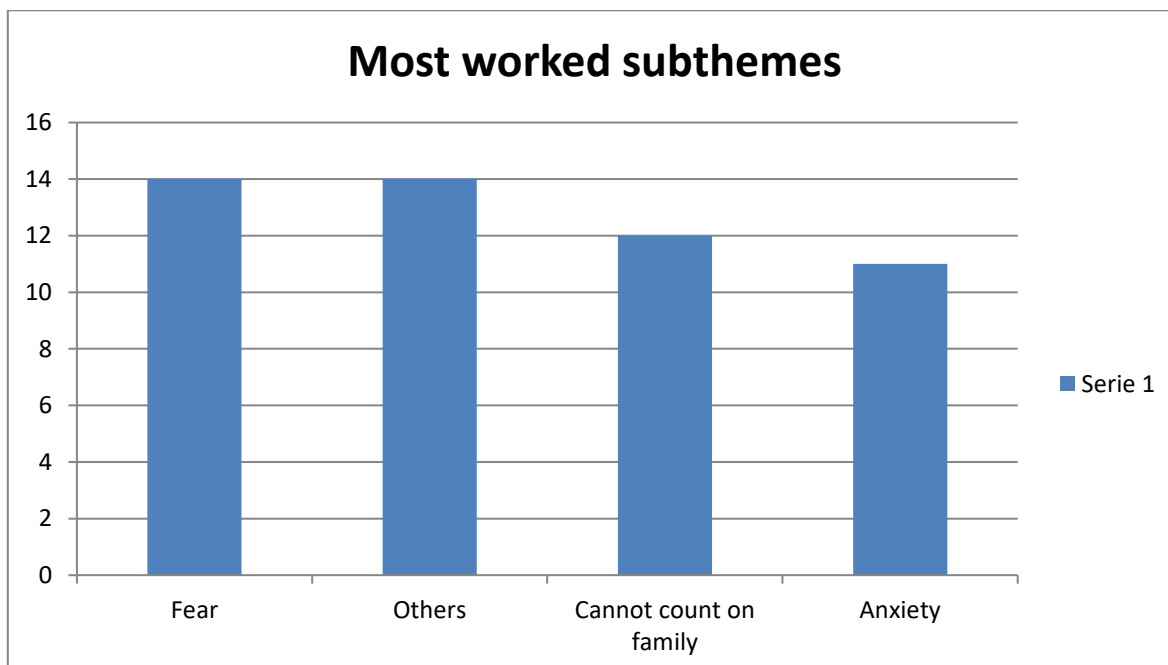
Source: Sisrodas (2020) – adapted by the authors

Graph 2 – Most worked themes



Source: Sisrodas (2020) – adapted by the authors

Graph 3 – Most worked subthemes



Source: Sisrodas (2020) – adapted by the authors

Discussion

As shown in graphs 2 and 3, it is possible to observe that the themes that stood out the most in the online community therapy circles are related to issues related to the COVID-19 pandemic and quarantine, being stress, with 43 votes, and its consequences on mental health. followed by the absorption of information, such as lack of clarity, especially related to the different levels of risk that the individual runs and concern about the duration of the pandemic.

As well as family conflicts, 23 votes, whose consequences on mental health are fear of being infected and being able to infect someone. Regarding the lack of work with 18 votes, its consequences on mental health are economic losses, in relation to jobs and adaptation to the new routine imposed by the virus, which accompanies the boredom that causes addictions such as eating disorders - excesses caused by anxiety and possible difficulty in carrying out physical activity (specifically in the beginning of the pandemic) and abuse of pre-existing addictions (legal and illegal drugs) as a way to relieve stress and anxiety.

As for the psychosocial effects caused by the pandemic, there is a radical change in lifestyle due to the need to quickly adapt to the health situation, especially with the need to reduce and distance physical contact, which for a Latin culture ends up not being easy to give up on hugs and kisses, this phenomenon of lack of physical affection also generates stress.

Therefore, the pandemic is a strong stress factor that, in turn, is a causal factor of neurophysiological imbalances. On ways to deal with protecting mental health are:

- Qualify the search for information about the disease and the pandemic.
- Stimulating the altruistic side of the individual by recognizing that isolation is part of group behavior for social benefit.
- Develop complementary physical activities and integrative practices according to health conditions.
- Caring for the balance of comprehensive health.

Regarding participation in the ICT circles, according to the participants' reports, many people report having an improvement in their general state of mood and stress when reporting their suffering and being welcomed (ROCHA, 2013).

Final considerations

The experience of the COVID-19 pandemic has contributed to new perceptions in the life of world society, many aspects such as human vulnerability have made us reflect on our way of living considering the historical, social, political dimension and advances and challenges in integral health and specifically considering mental health, often neglected. The efforts of national and international health agencies, at the beginning of the pandemic process in Brazil, pointed to the crossing of the difficult moment that society would go through, and the commitment to integral health would be at stake, paying attention to the search for strategies involving technology and collective reception.

The online Integrative Community Therapy that was implemented early in the pandemic collaborated to transform social isolation into emotional reception, uniting light technology and the principles of the national humanization policy so that groups that met in the virtual environment could share their emotional and find solutions from other people's experiences.

From the themes brought by the participants, we list which overcoming strategies this group has been seeking to overcome their difficulties and sufferings, they are: daily physical exercises at home, breathing exercises, such as meditation, yoga, working the land, for those who have it at home.

Participating in community therapy circles online, according to testimonials, has given participants the feeling that they are not alone in their homes. It is observed that some people participate practically every day on wheels online, they claim that they are encouraged to face the difficulties of everyday life and to endure confinement, in addition to declaring hopeful and confident that everything will be fine.

For Barreto *et al.* (2020), the fear that threatens us and turns into anxiety, especially when we see or experience catastrophes, can be transformed, especially when we vent tensions with pleasurable activities, when we talk about emotions with friends and family, as well as when we participate community therapy circles because it is known and proven that “When the mouth shuts the body speaks, and when the mouth speaks the body heals” (BARRETO *et al.*, 2020, our translation).

The social isolation caused by the COVID-19 pandemic has presented important challenges and has had a major impact on the decrease in the quality of individual and collective mental health in society, especially in certain population groups such as health professionals, impacting on the main social determinants in health, jeopardizing their own protection, promotion, prevention and recovery.

Great needs move many knowledges in times of challenges like the one we have seen, if in the past the discovery of fire provided comfort, security and survival to the people who lived in the cave, the collective meetings held through ICT online provide emotional comfort, security and creativity in the new normal. We live in an era of global problems and it is necessary that efforts reveal a collective mobilization that results in an ethics focused on protagonism and collective care.

ICT online has been collaborating with the social strengthening of human and affective relationships, increasing the internal individual and collective disposition necessary to cross this unique moment in the history of world public health.

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