

Contributions of Autonomous Medication Management in the co-management of medication treatment for nursing students

Contribuições da Gestão Autônoma da Medicação na cogestão do tratamento medicamentoso de acadêmicos de enfermagem

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ABSTRACT

This study aimed to analyze the contributions of Autonomous Medication Management (GAM) in the co-management of medication treatment for nursing students. Conducted in April 2021, this descriptive, exploratory, and qualitative study involved three students within a Mental Health Program linked to the Student Assistance Service of a public university in the central region of the country. Data were collected through an operative group subsidized by the GAM Guide, recorded in video format via Google Meet, and subjected to content analysis by Bardin. The contributions of GAM included strengthening autonomy, awakening curiosity, increasing knowledge, co-responsibility, active participation in treatment, self-care, and self-awareness. The group intervention, guided by the GAM Guide with nursing students, promoted safer drug therapy practices, more participatory action in treatment, and the development of skills about the use of psychotropic drugs.

Keywords: Personal autonomy. Nursing. Nursing students. Psychotropics. Student health.

RESUMO

Este trabalho teve por objetivo analisar as contribuições da Gestão Autônoma da Medicação (GAM) na cogestão do tratamento medicamentoso de acadêmicos de enfermagem. Trata-se de estudo descritivo, exploratório e qualitativo realizado em um Programa de Saúde Mental vinculado ao Serviço de Assistência Estudantil de uma universidade pública da região central do país em abril de 2021, com três acadêmicos. Os dados foram coletados por meio de Grupo Operativo subsidiado pelo Guia GAM, registrados em formato de vídeo pelo aplicativo *Google Meet* e submetidos à análise de conteúdo de Bardin. As contribuições da GAM foram: fortalecimento da autonomia, despertar da curiosidade, aumento do conhecimento, corresponsabilização, participação ativa no tratamento, autocuidado e autoconhecimento. A intervenção grupal norteada pelo Guia GAM junto aos acadêmicos favoreceu práticas de terapia medicamentosa mais seguras, atuação mais participativa diante do tratamento e desenvolvimento de competências sobre o uso de psicofármacos.

Palavras-chave: Autonomia pessoal. Enfermagem. Estudantes de enfermagem. Psicotrópicos. Saúde do estudante.

INTRODUCTION

The use of psychotropic drugs among nursing professionals is well-documented. A study involving 56 individuals from this sector, including technical assistants and nurses, revealed that 28.6% use this class of medication, with higher usage reported among women, married individuals, and those with a higher weekly workload. The leading causes identified for this behavior were anxiety, stress, and insomnia¹.

Moreover, scientific evidence indicates that nursing students also use psychotropic substances². Research has shown that the main side effects associated with these substances include behavioral changes, weight fluctuations, urinary issues, and neurological alterations³. Consequently, one effective approach to ensuring the safe use of these substances is through the comanagement of their medication treatment, facilitated by Autonomous Medication Management (GAM).

GAM was developed in Quebec, Canada, in 1990. Diverse stakeholders and movements within the mental health and human rights fields shaped its framework and standardization. The process was propelled by intensive debates and inquiries into the role of psychotropic drugs in treatment and their impacts on the body and individuals' lives. These discussions culminated in the creation of a comprehensive guide that outlines methodologies for working with individuals who use these pharmaceuticals⁴⁻⁶.

GAM emerged from the initiative of a group of users, underscoring the importance and uniqueness of medication usage. The collective nature of its development by individuals and groups from alternative and community mental health services in Quebec strengthens this strategy. It aimed to question the relationship of individuals with their treatment, the medications they use, and the effects of these on various aspects of their lives⁶.

In addition to Brazil, the GAM model has been promisingly applied in Spain, focusing on constructing care agreements to develop users' autonomy, thereby enabling their active participation in decision-making processes concerning medication use⁷. A fundamental aspect of GAM is the quality of the concrete experience and the monitoring of its effects. It does not seek to reduce or withdraw the number of drugs consumed but instead emphasizes observation by the user, using tools that aid in self-assessment regarding aspects of quality of life, which sometimes leads to the adjustment or withdrawal of medication⁸. In other words, it encourages users to observe themselves and be present in their treatment, mindful of what they feel and how they experience it.

GAM is founded on the principle of user autonomy, which does not imply self-sufficiency, isolation, free will, or dependence. Instead, GAM is understood to promote a level of individual autonomy that involves knowledge and selfobservation, participation in treatment decisions, and the exchange of experiences between the user and healthcare professionals about the unique use of medications and their effects⁸.

To address the issue of excessive prescription of psychotropic drugs within the Psychosocial Care Network (RAPS), it is essential to develop effective and ethical care and management strategies under public mental health policies. These strategies should prioritize critical approaches to medication abuse and emphasize the importance of autonomy, active participation, and the protection of the rights of diagnosed individuals. Numerous care and technologies management and strategies, including the concept of GAM, are currently under research and implementation⁴.

The application of GAM in executing health strategies has significantly public contributed to expanding the range of available fostering processes care options, independence and empowerment, promoting inclusion in health services, and maintaining approaches8. community-based treatment Although GAM continues to expand, its theoretical framework remains limited as the methodology is relatively new in the field of mental health⁹.

It is also noteworthy that much of the research on this topic has been operationalized in community mental health services¹⁰⁻¹⁴. This highlights the importance of expanding to other settings to better understand this phenomenon from different perspectives, as the situational

diagnosis of medication selection and consumption within university contexts is a strategy that promotes health¹⁵.

Given the above, the objective of this work is to analyze the contributions of Autonomous Medication Management (GAM) in the co-management of medication treatment for nursing students.

METHODOLOGY

This descriptive and exploratory study of a qualitative nature adhered to the Consolidated Criteria for Reporting Qualitative Research (COREQ) guidelines to support the description of the research report¹⁶. Initiated in April 2021, the study was conducted at the Student Assistance Service, which is part of a program focused on mental health assistance for the academic community, linked to the Office of Student Affairs (PRAE) at a public university in the central region of Brazil.

Initially, the management of the Student Assistance Program provided a list of names, emails, and telephone numbers of individuals who met the inclusion criteria for the research: undergraduates regularly enrolled in any health area course offered by the program and who were using psychotropic drugs prescribed by qualified professionals. Students who were away from the Student Assistance Service activities were excluded.

During the data collection, the university offered courses in Biomedicine, Physical Education (Bachelor and Teaching Degree), Nursing, Pharmacy, Physiotherapy, Medicine, Nutrition, and Dentistry. Out of 28 individuals identified, 13 responded to the contact; among these, six were not undergraduates in the health area, and three nursing students agreed to participate in the study. They signed the Informed Consent Form, indicating their agreement with the proposal.

The data collection process utilized the Operative Group (GO) technique and occurred during the COVID-19 pandemic. To prevent contagion, avoid the spread of the virus, and ensure the safety of all involved, the meetings were conducted remotely using technology.

The operation of the Operative Group (GO) was facilitated by employing methods outlined in the GAM User's Guide and the GAM Moderator's Guide. The GAM Guide serves as a practical and useful tool, providing not only technical information but also broad and openended questions about personal experiences and the significance of using specific medications, as well as other factors that assess the appropriateness of the treatment¹⁷.

Meetings were conducted using Google Meet, which offers audio and video communication services. Over four months, nine meetings were held, each on Monday and lasting one hour. All sessions were recorded and transcribed in full, totaling nine hours of material.

The analysis adhered to the steps of content analysis¹⁸: 1) Pre-analysis involved organizing the material to be examined and conducting a floating reading of the data to construct initial hypotheses; 2) Exploration of the material included coding the data by identifying the units of record and context to develop the cores of meaning; 3) Treatment of the results involved inference and interpretation, which consisted of grouping and regrouping the cores of meaning by similarity for the categorization of the data.

The Research Ethics Committee of the Clinical Hospital of the Federal University of [information suppressed] approved the research under opinion number 4.940.543 and CAAE number 40669520.1.0000.5083. The study followed the recommendations of Resolution number 466/201219. To ensure confidentiality, the students were assigned fictitious names (Cega Machado, Ipê, and Flamboyant).

RESULTS

The study population consisted of three undergraduate nursing students from a public university in the central region of Brazil, aged between 20 and 28 years, comprising one male and two females. The content analysis process led to the emergence of the category "Contributions of GAM in the co-management of nursing students' treatment," which elucidated the repercussions of the intervention, as illustrated in the coding tree (Figure 1).



Figure 1.Coding tree of the study category. Source: the authors (2021).

One participant highlighted the empowerment aspect of GAM in their medication therapy, stating:

After our meetings, I feel more secure in admitting I do use medications, and that's normal because I need them at this moment to feel better. Now I understand more about the medications I take and the way they can affect my daily life through side effects. (Ipê)

Another significant positive outcome of GAM among nursing students was the shared responsibility in treatment, as demonstrated by the following comments.

Our meetings coincided with a follow-up visit of mine, and there I managed to discuss with the doctor the medication I take and inquire about how much longer I need to continue it and the reasons for it. (Cega Machado)

After our meetings, I often realized that I thought the medication was no longer effective, but in fact, it was my own interference with the treatment. I forgot to take it, or I adjusted the dose on my own, and ultimately, I was the one who suffered the consequences. I now recognize that I have a responsibility concerning my treatment, and adhering to the recommendations is essential. (Ipê)

Nursing students explicitly mentioned other contributions of GAM, such as increasing knowledge about medications and their effects on the body, as well as greater safety in decisionmaking through acquired knowledge:

I managed to understand more about the medications I take and the way they help me. (Cega Machado)

Today, I can confidently say that I understand much more about my treatment, not just the medication itself, but also how everything around me can influence my relationship with it. (Flamboyant)

Participants also reported that GAM enabled them to participate more actively in their medication treatment by awakening their curiosity:

I have always been curious and had already researched the mechanism of action of the medication I use. But here in the group, I felt more secure discussing it, even with the doctor who prescribes it. (Flamboyant)

I started participating in the group out of curiosity. I thought, 'What is this GAM?' I had never heard of it before. But after the first meeting, I really wanted to participate, and it was very beneficial for me. Thank you sincerely! I think everyone should know about it and be part of these groups. (Cega Machado)

In addition to addressing medicationrelated issues, GAM also provided students with moments of self-care through group meetings, facilitating the development of self-knowledge.

I've always been interested in participating in scientific research, and when I received the invitation to join this study, I thought, 'Look, that's interesting, I don't know what it's about, but let's go!' I'm glad I made that decision. This experience was transformative. With each question from the Guide and each activity, my interest grew. I spent days thinking about my answers and their reasons. I swear I counted the days and hours until the next meeting, and I didn't notice the time passing when we were together in our virtual room. I learned so much, not only about the medication but also about myself, the environment I live in, the people I relate to, and those I can count on. It was a unique and very significant experience. I also believe that everyone should have access to GAM, especially those who use medications and are going through a period of mental suffering. Thank you so much! (Flamboyant)

I only have to thank you for the opportunity to participate in this group; it really helped me a lot. I was feeling very lonely and believed no one could understand what I was feeling, not even myself. Being able to talk here about my feelings helped me immensely! I leave a very different person from when I entered, but it's for the better, you see?" [laughs] (Ipê)

DISCUSSION

Strengthening autonomy and shared responsibility in treatment are among the contributions of GAM to the co-management of care in the context of medication therapy for nursing students. A qualitative study analyzing the effects of an educational intervention by nurses using the GAM Guide for 27 users at a Psychosocial Care Center (CAPS) demonstrated that the intervention could generate greater empowerment, thus favoring co-management of treatment20. This promotes shared responsibility, which involves a partnership among various social actors in the healthcare process, aimed at improving the quality of life for $people^{21}$.

Another contribution of GAM for nursing students is increasing knowledge about the effects of medications they use. A study conducted in a major Brazilian urban center with CAPS users assessed the impact of using the GAM Guide on their relationships with their treatments and their participation in using the Guide. Participants noted a tension between the perception of an identity based on illness and the validation of their experiences. Thev acknowledged unique increased knowledge about the medications they consumed and recognized expertise in their use, including the need for treatment adjustments²².

The active involvement in more treatment that includes medications was highlighted as a valuable contribution of GAM. It is crucial to note that such behavior, which aims at the safety of care, presents challenges. The patient is crucial in preventing safety issues and should be at the center of the care $process^{23}$. pharmacological Therefore, despite their knowledge, nursing students must form partnerships with other social actors involved in their medication therapy. These collaborations are crucial to developing treatments that are not only effective but also specifically address their needs. Additionally, such partnerships help keep students informed about potential side effects and necessary adjustments to their medication.

The curiosity that emerged was another positive aspect of GAM mentioned by the nursing students. This trait should be encouraged as it fosters discovery; when stimulated, it promotes the development of intelligence in individuals in training. Remember, the desire to learn is fundamentally based on curiosity²⁴; hence, being curious about the benefits and side effects of medications is a crucial tool for minimizing incidents and adverse events.

Decision-making based on the knowledge acquired through the intervention was another key contribution of GAM, promoting care centered on the individual rather than solely on the prescriber, such as medical professionals. This empowers patients to make informed decisions after considering the technical advice and recommendations of the medical professionals involved. Ultimately, the final decision rests with the patients, who take into account medical advice alongside their reflections, considering their social circumstances, concerns, and emotional and spiritual well-being²⁵.

Additionally, group meetings focused on GAM facilitated the development of selfknowledge among nursing students. Research on the role of self-knowledge in nurse training found that role-playing, classroom discussions, and group discussions were effective didactic strategies for enhancing this skill. Specifically, role-playing was cited by 83.9% of participants, classroom discussions by 85.2%, and group discussions by 82.3% as beneficial for fostering self-knowledge²⁶. Given that GAM is inherently a group intervention, these discussions are particularly valuable for promoting self-awareness among participants.

The also intervention created opportunities for self-care among the students. A qualitative case study involving 11 nursing students from a university in the north of Santa Catarina, Brazil, supported these findings. It noted that while students recognize the importance of self-care, they believe it requires further exploration and involves essential activities like spending time with family and engaging in physical exercise. Furthermore, the study identified a link between stress and selfcare, underscoring the necessity for health and educational institutions to establish support groups for caregivers. This approach not only strengthens the relationship between clients and caregivers²⁷ but also fosters learning and the practice of mental health preventive measures.

Research on the prevalence of stress among nursing students underscored the need for focused attention on this group, given their specific sociodemographic and academic profiles. This highlights the importance of developing effective coping strategies, such as discussion groups, training sessions, and university followup services, to enhance experience sharing. Such strategies enhance dialogue among students and help in sharing the challenges associated with professional nursing training, thereby fostering mutual²⁸ support and the creation of support networks.

Given the numerous stressors that nursing students confront both within and outside the university setting, which often lead them to use medications, this research demonstrated that group interventions guided by the GAM Guide are potent tools for developing autonomy among these students during their medication therapy. This approach not only makes the practice safer but also has the potential to be replicated in other universities with students from various disciplines.

CONCLUSION

This study demonstrated that the group intervention with nursing students made several significant contributions, including strengthening autonomy, awakening curiosity, increasing knowledge, shared responsibility, more active participation in treatment, self-care, and selfawareness. These factors contribute to safer medication therapy practices, more participatory action in treatment, and the development of competencies (knowledge, skills, and attitudes) necessary for the co-management of the use of psychotropic drugs.

However, implementing the study with only three nursing students represents a limitation, as including students from additional health areas as well as those from humanities and exact sciences would provide a more comprehensive discussion of the topic. This limitation highlights the need for further research.

Most studies on GAM have been conducted with users of community mental health services. Therefore, exploring this theme with a different audience, such as nursing students, represents a novel contribution to understanding this phenomenon in another context. Group interventions guided by the GAM Guide can enhance safety and increase user involvement in the treatment of psychotropic drugs. Furthermore, an important aspect to note is that GAM can be effectively utilized in specialized health services for students.

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