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Corresponding author



Rebeca Ishii Munhoz Guerra
E-mail: rebecaimguerra@outlook.com

Therapeutic group for the development of emotional skills in a mental health service: an experience report

Grupo terapêutico para desenvolvimento de habilidades emocionais em serviço de saúde mental: relato de experiência

Grupo terapéutico para el desarrollo de habilidades emocionales en un servicio de salud mental: relato de experiencia

Rebeca Ishii Munhoz Guerra ¹ ORCID: 0000-0003-0163-1122

Adriana Aparecida Garcia ¹ ORCID: 0009-0004-5853-861X

Maria Valeria Napolitano ¹ ORCID: 0009-0007-1246-1129

Isaac Cardoso Vieira ¹ ORCID: 0009-0009-6062-285X

¹ Hub de Cuidados em crack e outras drogas. São Paulo, São Paulo, Brazil.

^{II} Hospital Cantareira. São Paulo, São Paulo, Brazil.

ABSTRACT

Objective: To present the implementation of an Emotional Skills Therapeutic Group coordinated by nurses in a public psychiatric hospital and to discuss the implications of group activities in mental health.

Results: The implementation took place in a female ward of a public psychiatric hospital with the aim of promoting and facilitating access to emotions, self-knowledge, and the identification of triggering thoughts, encouraging protagonism in the interpretation of life experiences and the development of self-knowledge and reflection skills. For this report, the experience of nine sessions was considered, with an average duration of 60 minutes, with variation in the number of participants, setting, and group dynamics strategies. The Therapeutic Group demonstrated broad benefits for the women, constituting a space for sharing life experiences, communication, and the development of emotional awareness skills. For the coordinating nurses, it expanded the possibility of assessing emotional status, providing qualified listening, and collecting relevant information, contributing to the adequacy of therapy and the Nursing Process, through the identification of predominant needs. **Final considerations:** The coordination of therapeutic groups by nurses specialized in mental health constitutes a promising approach, contributing to effective, humanized, and decentralized clinical practice. It is suggested that mental health services encourage the implementation of Therapeutic Groups.

Descriptors: Mental health; Group therapy; Emotional regulation; Mental health services; Psychiatric nursing.

RESUMO

Objetivo: apresentar a implementação de um Grupo Terapêutico de Habilidades Emocionais coordenado por enfermeiras em um hospital público psiquiátrico e discutir as implicações de atividades grupais na saúde mental. **Resultados:** A implementação ocorreu em uma ala feminina de um hospital público psiquiátrico com objetivo de promover e facilitar o acesso às emoções, ao autoconhecimento, identificação de pensamentos gatilhos, incentivando o protagonismo na interpretação das experiências de vida, desenvolvimento de habilidades de autoconhecimento e reflexão. Para este relato foi considerada a experiência de nove encontros, com duração média de 60 minutos, variação do número de participantes, local e estratégias de dinâmicas grupais. O Grupo Terapêutico demonstrou amplos benefícios para as mulheres, constituiu espaço de compartilhamento de experiências de vida, comunicação e desenvolvimento de habilidades de consciência emocional. Para as enfermeiras coordenadoras, ampliou a possibilidade de avaliação do estado emocional, escuta qualificada e coleta de informações relevantes, contribuindo para a adequação da terapêutica e do Processo de Enfermagem, ao serem identificadas necessidades predominantes. **Considerações finais:** A coordenação de grupos terapêuticos por enfermeiros especialista em saúde mental configura uma abordagem promissora, contribuindo à prática clínica eficaz, humanizada e descentralizada. Sugere-se que os serviços de saúde mental incentivem a prática de Grupos Terapêuticos. **Descritores:** Saúde mental; Terapia de grupo; Regulação emocional; Serviços de saúde mental; Enfermagem psiquiátrica.

RESUMEN

Objetivo: Presentar la implementación de un Grupo Terapéutico de Habilidades Emocionales coordinado por enfermeras en un hospital público psiquiátrico y discutir las implicaciones de las actividades grupales en la salud mental. **Resultados:** La implementación se llevó a cabo en una unidad femenina de un hospital público psiquiátrico, con el objetivo de promover y facilitar el acceso a las emociones, al autoconocimiento y a la identificación de pensamientos desencadenantes, incentivando el protagonismo en la interpretación de las experiencias de vida y el desarrollo de habilidades de autoconocimiento y reflexión. Para este relato se consideró la experiencia de nueve encuentros, con una duración promedio de 60 minutos, variación en el número de participantes, en el lugar de realización y en las estrategias de dinámicas grupales. El Grupo Terapéutico demostró amplos beneficios para las mujeres, constituyéndose en un espacio para el intercambio de experiencias de vida, la comunicación y el desarrollo de habilidades de conciencia emocional. Para las enfermeras coordinadoras, amplió la posibilidad de evaluar el estado emocional, realizar una escucha cualificada y obtener información relevante, contribuyendo a la adecuación de la terapéutica y del Proceso de Enfermería, a partir de la identificación de las necesidades predominantes. **Consideraciones finales:** La coordinación de grupos terapéuticos por enfermeros especialistas en salud mental constituye una estrategia prometedora que contribuye a una práctica clínica eficaz, humanizada y descentralizada. Se sugiere que los servicios de salud mental fomenten la práctica de los Grupos Terapéuticos. **Descriptores:** Salud mental; Terapia de grupo; Regulación emocional; Servicios de salud mental; enfermería psiquiátrica.

INTRODUCTION

According to data from the World Health Organization, the prevalence of mental disorders worldwide is steadily increasing. Recent estimates indicate that more than 1 billion people worldwide have a psychiatric disorder, underscoring the substantial need to adapt mental health services and make appropriate investments⁽¹⁾.

Since the Psychiatric Reform movement in Brazil began in the mid-1970s, the limitations of the traditional biomedical model, centered on disease and pharmacological intervention, have been widely discussed. However, mental health care is complex and encompasses biological, psychological, social, and spiritual dimensions. Therefore, the need to restructure

care systems and implement approaches based on the biopsychosocial model, with a focus on comprehensive health care, has become increasingly evident⁽²⁾.

In the context of this process of decentralization and reorganization of care, therapeutic groups have emerged as a potentially strategic relational technology for the care of people with mental disorders. As a low-cost strategy that is accessible to healthcare providers, they provide a valuable space for qualified listening, the sharing of experiences in an environment free of stigma and prejudice, self-knowledge, emotional regulation, the development of empathy, the exchange of experiences, and learning⁽³⁾.

Studies demonstrate the clinical relevance of conducting therapeutic groups focused on the development of emotional skills, showing significant results regarding their therapeutic potential and the improvement of the functioning and self-efficacy of people with mental disorders, in addition to fostering the development and expansion of communication skills and emotional awareness^(4,5).

As a member of the multiprofessional team, and based on the competencies established in COFEN Resolution No. 678/2021⁽⁶⁾, which provides for group practices coordinated by nurses, the nurse specializing in Mental Health plays an important role in the care of people with mental disorders and contributes significantly to their treatment by conducting therapeutic groups and employing competencies that go beyond clinical and pharmacological management, such as therapeutic presence, observational skills, bond formation, therapeutic communication and listening, the ability to build interpersonal relationships, and practice grounded in technical knowledge and ethical principles⁽⁷⁾.

Considering the impact and relevance of conducting therapeutic groups for people with mental disorders, this experience report aimed to present the implementation of an Emotional Skills Therapeutic Group (GTHE), coordinated by nurses in a public psychiatric hospital, and to discuss the implications of this group activity for mental health care.

METHODS

This is a descriptive study of the experience report type, conducted with women undergoing treatment at a mental health institution from April to August 2025.

The study describes the development of a therapeutic group aimed at strengthening emotional self-management, as a complement to non-pharmacological therapy in the context of hospital treatment, called the Emotional Skills Therapeutic Group (GTHE). The group was designed and implemented by the nursing supervision team and staff nurses, with the support of nursing technicians. Its objectives were to encourage the recognition, understanding, and regulation of emotions, foster self-knowledge and reflection, identify thoughts that trigger emotional responses, expand strategies for coping with crises, and strengthen interpersonal relationships.

The methodological framework adopted was Pichon-Rivière's theory⁽⁸⁾, which supports the dialectic of therapeutic groups as a process through which members evolve as they reflect on their own conflicts. This theory conceives of the human being as a subject embedded in a concrete reality, with the capacity to transform it through active adaptation involving action and creation⁽⁸⁾.

The GTHE sessions were held in different settings within the institution, including the ward's common area, the meeting room, the hospital gardens, and the medical consultation office, in order to promote the participants' engagement and comfort. Different strategies were employed to develop the activities, such as the use of music and videos, the creation of a dream map, the application of guiding questions, and the facilitation of directed discussions, with a view to stimulating the expression of feelings, reflection, and group interaction.

In each session, the sample was selected by convenience. However, women with severe psychotic symptoms, psychomotor agitation, or a high risk of aggressive behavior were not included in the activity, as they did not present adequate psychobehavioral conditions to participate at that time. Nevertheless, non-inclusion in a given session did not preclude participation in subsequent sessions, provided that the women presented more favorable psychological conditions.

As this is an experience report, without identification of the participants and without systematic data collection, the study was not submitted to a Research Ethics Committee, in accordance with the guidelines established by Resolution No. 510/2016.

RESULTS AND DISCUSSION

For this report, the experiences gained over the course of nine sessions of the Emotional Skills Therapeutic Group (GTHE), each with a mean duration of 60 minutes, were considered, as presented in Table 1. Each session was planned based on the Emotional Intelligence skills model⁽⁹⁾, encompassing activities aimed at the recognition, understanding, and regulation of emotions, as well as the use of emotional information to promote reflection, decision-making, and psychosocial adaptation.

At the end of each session, a field diary was prepared with records of the experiences during the group activity, serving as an instrument for reflection on the positive aspects, weaknesses, and difficulties encountered, in addition to supporting the development of new strategies for subsequent sessions.

Initially, one of the objectives of the GTHE was to serve the largest possible number of women. However, as the sessions progressed and the nurses gained experience in coordinating the group, they observed that the participants benefited more from the activities when they were invited according to their psychobehavioral conditions. This strategy fostered greater engagement, participation, and quality in the group discussions.

Another aspect that directly influenced the development of the GTHE was the choice of setting for the activities. More secluded spaces, with fewer external stimuli and greater environmental predictability, were found to favor concentration, participation, and the sharing of experiences, positively reflecting on the quality of the sessions.

Over the course of the GTHE, the nurses' perception of the participants became more sensitive and comprehensive. Their attention became increasingly focused on the different ways the women responded to the proposed stimuli, how they engaged during the activities, the quality of their participation, the emotional responses expressed throughout each session, and the effects observed after its conclusion.

Behavioral changes, greater emotional sensitivity, enhanced expression of feelings, improved access to emotions and communication, and moments of reflective withdrawal at the end of the activities were identified. These perceptions are consistent with findings from other studies demonstrating the benefits of therapeutic groups for the development of emotional awareness, interpersonal communication, and the functioning of people with mental disorders^(4,5).

Some women refused to participate in the GTHE because it was a proposal centered on the exploration of emotions. However, this refusal was also understood as an important element of assessment, as it revealed that certain themes or approach strategies evoked memories of delicate or emotionally painful experiences. In light of Pichon-Rivière's theory⁽⁸⁾, the attentive observation afforded by the therapeutic group makes it possible to attribute meaning to the different patterns of behavior presented by the participants, whether through active participation or through manifestations of affective blunting, withdrawal, or seclusion.

Table 1 - Description of the activities conducted in the GTHE. São Paulo – SP, 2025.

Activity theme	n	Objectives	Strategies used	Considerations
Song: "A lenda"	14	Evoke memories, emotions, and interaction	Musical stimulus, recording (written/drawing), and sharing	Held in the female ward; good engagement and exchange of experiences
Song: "Autor da vida"	19	Reflect on choices, emotions, and coping strategies	Musical stimulus with identification of emotions and discussion	Good participation and involvement in the ward
Dream map	16	Reflect on life projects and planning	Completion of a thematic instrument (life, health, work)	Spontaneous participation; noise hindered deeper discussion
Anxiety	21	Recognize anxiety and its impact on decisions	Guided discussion with visual aids	Promoted self-recognition and reflection on reactions
Sadness	12	Identify emotions and coping strategies	Video and directed discussion	Welcoming environment; active participation and meaningful exchanges
Anger	15	Recognize and manage anger	Video, discussion, recording, and guided relaxation	Good adherence; the relaxation technique stood out
Nostalgia	12	Reflect on the past and its meanings	Video and directed discussion	Initial conceptual difficulty; fostered positive memories
Karaoke	14	Stimulate emotional expression and interaction	Selection and singing of songs with personal meaning	Participation limited by agitation and the environment
Shame	8	Understand its impact on relationships	Video and reflective discussion	Sensitive topic; promoted the sharing of experiences

Although the coordination of therapeutic groups is a competency established for nurses specializing in Mental Health and Psychiatry, the implementation of the GTHE revealed weaknesses related to the mastery of the competencies required to conduct group dynamics. In contrast, the nurses developed self-learning skills, deepened their knowledge of the mental status examination, sought new tools for conducting groups, and incorporated strategies that fostered the participants' engagement.

Technical grounding in group dynamics, self-knowledge, and professional training are essential to ensure the quality of the coordination of these activities⁽¹⁰⁾ and reinforce the competencies expected of nurses working in mental health care⁽⁷⁾.

Professional insecurity, often perceived as an obstacle to the coordination of therapeutic groups, is also described in the literature. Menezes⁽¹¹⁾ reports that nurses working in psycho-social care experience feelings of unpreparedness, resulting from insufficient training during undergraduate and specialization education, in addition to difficulties related to the conduct and continuity of group activities.

The commitment, persistence, and motivation of the nurses responsible for coordinating the sessions, as well as their role as reference professionals in the care of the women, stood out as facilitating factors for the implementation of the GTHE. These aspects fostered the strengthening of the therapeutic bond, considered one of the pillars of effective mental health treatment.

FINAL CONSIDERATIONS

The Emotional Skills Therapeutic Group (GTHE) demonstrated relevant benefits for the participating women, providing a space for sharing life experiences, strengthening communication, and developing emotional awareness skills. For the coordinating nurses, the group expanded the possibilities for assessing the participants' emotional status, fostered qualified listening, and enabled the collection of relevant information, which was subsequently shared with the multiprofessional team. This information contributed to the planning and adjustment of therapy, as well as to the refinement of the Nursing Process through the identification of the participants' predominant care needs.

The effectiveness of the GTHE was directly related to the quality of the therapeutic bond established between the nurses and the participants, which fostered access to emotions and the sharing of painful experiences. In this context, nurses often serve as figures of trust and safety for people experiencing psychological distress, fostering the development of therapeutic relationships and strengthening the care process. Furthermore, the influence of the environment on the quality of therapeutic group facilitation became evident. More secluded settings, with less interference from external stimuli and clearly defined objectives for each session, promoted participation, reflection, and the sharing of experiences, representing a fundamental aspect to be considered in the planning and implementation of this care modality.

Therefore, the coordination of therapeutic groups by nurses working in mental health services is a promising complementary strategy that contributes to more humanized, comprehensive clinical practice centered on the needs of people with mental disorders. It also fosters the development of emotional skills, strengthens the therapeutic bond, expands the possibilities for clinical assessment, and enhances nursing care in the mental health setting.

Finally, this experience report reinforces the need to invest in the training and continuing education of nurses to conduct therapeutic groups, as well as in the creation of institutional conditions that support the implementation and continuity of these practices. Future studies are recommended to investigate the effects of this intervention and psycho-emotional care modality in greater depth.

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