

* **New writings and mediations in health**

Interview with Ricardo Peret

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An Audiovisual Meeting: Doralice in the rise of "TV Pinel"

Doralice Araújo was the creator of a rather groundbreaking video project in a mental hospital. She belonged to the original founder of "TV Pinel" and walked away after a few diatribes and much success in this venture. Her recent loss gives us the task of gathering memories and search it through. Ricardo Peret was the director of Philippe *Pinel* Institute, mental hospital, Rio de Janeiro, for seven years (1990-1997). It was during his administration that the creation of TV Pinel happened from the full support given to Dora's idea. This TV, video producer and audiovisual creation, which was consolidated as an instrument for cultural intervention and had as start the Brazilian Psychiatric Reform, can be understood from the meeting of a psychologist, also a visual artist and photographer, with a psychiatrist endowed with sensitivity for the area of ??Social Communication. Great friend, supporter and admirer of Doralice Araújo, Peret highlights her talent and says that one cannot speak of TV Pinel without mentioning *Dora*. In this interview, he tells us a bit of his experience, work with Doralice and the story of TV Pinel. It is a chronicle of the Brazilian psychiatric reform.

Tell us a little bit of your history with TV Pinel.

I need to start a moment earlier, before the work in Hospital Pinel. In 1987, I was invited to work in the State of Bahia, in the management of the Governor at the time, Waldir Pires. During this period, I managed the Instituto de Radiodifusão Educativa of Bahia. I was the vice-executive director.

Even though being a psychiatrist?

Yes, but I worked with a sociologist who has greatly influenced me. This Institute owned the TV Educativa, TVE of the Government, two educational radios and a center for educational production planning. I spent two and a half years of my life basically working with advertisers and journalists. We used to do all kinds of television programs. It was there that I learned about the importance of communication, and understood what it was.

You had an unusual path for your formation. To what do you attribute this choice?

When I was invited to go to Bahia I was convinced I didn't want to be in the Secretary of Health, especially because during the internship in Instituto Pinel, I took a course with Carlos Enrique Escobar. It was about the epistemology of communication at the School of Communication at UFRJ - in fact, where I met my first wife... At that time, I had a great interest in the area and even after I married a journalist with many journalist friends, anyway...

Did you know Doralice Araújo at that time?

Yes, I did. She was a psychologist in Pinel and I was always at Pinel, although once and a while I had to leave to take a position. When I returned from Bahia, in 1990, there was an election in Instituto Pinel and I was elected director. I took the position and then begin the transformation process - we worked, removing all the grids. We also removed the grid of the infirmary and from the entrance door of the hospital, which began to stay open. The rooms were now double or triple with private bathrooms. We used to say: "*Now no one will try to escape from Pinel, because no one is locked in here, the doors will stay open! Whoever wishes to leave will leave, and then the family will get that person back*". We ended up with this business of nursing staff and security guards grabbing patients. It was an empowering process.

So this was the institutional environment...

Yes. Exactly.

How was the adaptation of these patients to this transition? Was it quick and easy, or was there an increase of patients escaping from the hospital? Many problems?

They loved it, there was freedom. The behavior changed dramatically from the moment that people were not locked up anymore. The doors of the Institute started to close from 8pm to protect patients and staff only, as the door of any home. During the day, people would leave, walk around where they wanted and wearing the clothes they wanted. There was no more differentiating who was who, according to the uniform of a closed institution, a correctional facility. People went out and returned, eventually brought by the family. But anyway, escapes dropped dramatically. Before that, eventually, people got through the open door and went running and I was scared that they were run over in front of Pinel, in that avenue full of cars. From that moment of opening, every guard that started working with us should attend a course on the basic concepts of health and mental illness to learn to deal with those people and to understand that he was not there to hold them, but to protect them.

How was the partnership with Doralice in that period?

Doralice did works with photography. She had the habit of photographing the children of the Institute, dedicated herself to this often, so amateurishly. She was an exceptional photographer, did some exhibitions. Such a sensitive person. I remember that she acted within the Assistance Center for Autistic and Psychotic Children - NAICAP, keeping interest in psychoanalysis, art, culture. I had a huge affection for her work, which incidentally touched me very much. One day I was requested to buy a video camera...

Doralice realized the need to film, in addition to taking photos ...

Maybe.

How did you get the equipment, which was hard to get at that time?

My experience as manager pointed the way. I contacted the IRS to negotiate the donation of equipment seized and we received two cameras and other equipments that were donated to Pinel. From there on, Dora began filming children incessantly. An important aspect is that she started recording the clinical evolution of those kids and teenagers. Such monitoring made me think about how much material we would be able to gather over a short period, which should be edited, and that would mean hours of payment for the use of the editing room.

How did you and Dora untangled this new obstacle?

We started thinking that if we had an editing room, we could not only edit all the material that we produced, but also begin to professionalize our users, especially those who were in the psychosocial care center, who came every day to the hospital. They could learn to shoot, to edit, and that would be a way to professionalize those people. Taking this scenario as our horizon, we hired a professional - called Amador - who began teaching courses of filming and editing for patients, technicians and professionals.

What was the year?

1995, a period even before TV Pinel. At that time, each day the need for an editing room became clearer. So I asked Amador to make a specification of the state-of-the-art equipment. But the main question was clearly how to get money to buy an editing room. Imagine asking for the purchase of this equipment for a psychiatric hospital - they would think I was crazy!

And how did you have this problem solved?

During this period, Pinel was in the media almost every week, in Brazil and even outside of Brazil. Pinel appeared as a model of reform in psychiatry, being visited by people from different places. That put us in a very good position and gave me great governance - we were a model, an international reference. During this period, the hospital facilities had just become ready, the wards were colorful, the hospital was decorated with pictures of artists, some famous ones, who painted there in the hospital. So, I took this opportune moment and asked the Secretary of the General Administration of the Ministry of Health, responsible for administering the budget of the Ministry at the time, Neilton Days, to make a visit to the Institute. We walked through the hospital and he was delighted, I let the visit to the core of autistic children for last and he walked out of there obviously thrilled. In this context, I mentioned the work that Dora was developing, filming the progress of much compromised patients, the importance of monitoring and the need for an editing room so we could work with this material.

And he agreed?

He agreed, asked how much it would cost. Then I called CCE and Sony and got the quote. I don't remember now how much it cost. I only remember I called him and said: "Nilton, it's this much." He said that was a deal and the budget would go to the hospital. It was irresistible to work with

children, he was delighted with the hospital, he saw the Ministry using well its resources. He showed to be a very sensitive person. He handed over the money and we immediately bought the editing room. At the time, I thought "cool ... we're training users in editing and we have people starting to make a little money doing parties and weddings". People began to have something more in life, let's say, something more like the lives of others, with work, friends, a social circle, not only from other patients.

We can say it was an odd encounter between you. Because you had a journalistic vein and Dora had an artistic vein.

Absolutely, and we had a passion for each other. Doralice was one of the most talented people I ever met. Whenever I speak of TV Pinel I have to mention Doralice. We built that together and without her I never would have thought of TV Pinel.

How was the choice of name and format for TV Pinel?

Dora showed me that there were works like that in the community TV in Nova Iguaçu, RJ, and we also got in touch with a guy whose name I do not remember, that was doing TV Sala de Espera, in Belo Horizonte, MG. She knew well these two experiments due to her photography work and her interest in that area. However, Dora and I wanted something very different from what was merely technical, designed to be spent in the waiting room of public hospitals and clinics. We wanted to do something closer to the context of the Institute and also of Psychiatric Reform underway. The model of community TV had nothing to do with the users of mental health service. And our business was just that. So I started thinking, and I thought of the importance of the media. I thought we needed to create a television to work on the social image of craziness and that could be an instrument of cultural intervention, where we could show to society that madness is a human experience and it should be accepted. I believe we were in tune with each other.

And that's when the name came out?

It was in this context that Dora suggested the name TV Pinel. She had very strong opinions. Amazing ideas. Earlier I resisted a little to that name, there was prejudice on my part. I said "No, Dora! Not Crazy TV! It's going to be a bizarre thing". But Dora convinced me and it was fantastic, because now I cannot imagine a better name.

What people talked about the name Dora gave to it? Did they have the same reaction as yours?

The first interview I had as director of Pinel with TV Pinel already established, was to Elaine Rodriguez, a health reporter for O Globo newspaper. She asked me if I did not intend to change the name of TV Pinel to any other name, after all, Pinel was such a damned name, kind of crazy ... I said: "well, you certainly know the joke about the guy who was betrayed on the sofa in his house, and decides to take the sofa out, but the woman is still cheating on him. With the word Pinel, it is exactly like that". Today the name "Pinel" is almost as famous as Coca-Cola, for example, there is Pinel in Bahia, Amazonas, everywhere in Brazil. There's Banda Pinel and the word is even included in dictionary Aurélio, a Brazilian dictionary, which defined it as an adjective to madness. That legacy is forever, we had to do that to associate the brand with something good.

Wow! Did you get that answer at that time to the reporter?

Just like that! It came out in a snap, an insight. Actually, I think I had quite some prejudice with the name TV Pinel. But I surrendered myself absolutely, fortunately and thanks to the charms of Dora. We decided to create TV Pinel with this exact name.

Tell us how it was to assemble the structure of a TV in a psychiatric hospital.

We needed many professionals who knew television, because we had no expertise in that. So I was a friend of Claudius - a cartoonist - who was director of Center for the Creation of Popular Image. I talked to him about our idea - mine and Dora's - to create a TV. It was well received. Soon we established a partnership between CECIP and Pinel. Who went to work directly with us was Valter Filé, Rosano (our great intellectual of TV Pinel) and Noali Tojá, who works on TV Pinel until today. That was a team with CECIP professionals and some patients, who have become employed. TV Pinel began in 1996 and quickly became something innovative, because at that moment there was no similar initiative, the closest was a cooperative in Italy made by users of mental health, but it was basically a producer TV.

Dora, you and others built TV Pinel in a period with lesser technological equipment, such as mobile phones and photo cameras that film, video editing applications, etc. We're talking a short time ago, but another decade, a world saturated by images and video. This causes, in fact, that what they did is very innovative...

I had not thought of that.

You and Dora must have struggled to build this structure of Pinel TV. Any episode that you recall especially?

I don't recall anything in particular. It was somehow like this: people bought the idea so enthusiastically that the first show was already a success. We had a good reception. It started being aired on health channels of Fiocruz, for example. Arlindo, superintendent of the Health Channel, made the first program. He even gave an interview.

Do you remember the first show?

I do and watch it fondly, from time to time. It's so different when you look at the production today, after 15 years. I personally prefer the more crafted ones.

Is there a program that has a special meaning to you?

Some attractions are in my mind, I mention the compact of the first five shows, which I find particularly beautiful. Actually, I wasn't at Pinel anymore, I left a year later, in 1997. I thought I had been seven years ahead of Pinel, so my ability of inventing was a bit exhausted, I was already felling a bureaucrat... Some patients called me Dr. Pinel. They did not know who Louis Philippe Pinel was. I stayed there all day and was mistaken with the guy being honored by the hospital's name. I left Pinel because I had played my part. I also felt that my relationship with the psychiatric reform had much to do with leaving psychiatry once in a while and participating in community life.

How was the first program? Was Dora making the scripts? Who gave the initial ideas in the scripts? Tell us a little bit about that.

That show was an entirely collective production, made by CECIP, by employees and users. When the program was ready, I invited some people to watch the work in the editing room. Also, Dora, me, and one or two guests were always present. Something funny was always happening. People asked: "This seems to be technical now, user or professional?", and I replied: "Viva! If you don't know that's because this program is doing its job, which is to call attention to the relativity of this differentiation, unless you know who is who, this means that the work is already a success". We scheduled the first presentation in the Pinel auditorium, which was crowded with people - family, clients, employees, guests and the media. We ended up with a lot of people crying, it was very exciting. We were on Jornal Nacional, a national news broadcast, during the 10th National Health Conference, held this year (1996). Pinel was the star, we won awards in Japan, in the One Minute Festival in France, among others.

The shows had an interview format?

They were comedy shows, kind of like Casseta & Planeta, with sketches and interviews. The programs are very intelligent, humorous and sometimes even ridiculing traditional psychiatry, in addition to working on the deconstruction of this heavy belief. Even a few days ago, I was watching TV - I think it was the show Fantástico, - when a sketch with people talking inside a heart. I immediately remembered that TV Pinel did one just like that 15 years ago.

Was it possible to notice any change in the behavior of patients who participated in this work?

Yes. It is also interesting because many were seriously ill patients, with a long history of hospitalization in psychiatric wards. These people had the opportunity to give a new dimension to life that I find amazing, an incredible turnaround of their own lost life in a mental home. I think that Dora never imagined this. When we thought of this project, we knew that it was a path, but we had no idea about the dimension of the impact it could have, not only to those people, but also to the social imaginary. TV Pinel is one of the devices for psychiatric reform. It can thus be seen as that, because we spent 10 years debating the law throughout Brazil. I don't know of other law that has been so discussed. All this contributed enough to the scenery of change in posture.

Where is the collection of TV Pinel and how is it being protected?

This collection has dual institutional insertion. The collection is partly here in Manguinhos Library (Haity Moussatché Pavilion) and on TV Pinel with the current Philippe Pinel Institute (Rio de Janeiro, RJ). The network of libraries of Fiocruz, under ICICT/FIOCRUZ, has practice, mission and expertise associated with the health memory in Brazil.

How do you see the Ministry of Health as responsible for a cultural heritage, as there are criticisms of specialists?

I see no problem. I think it's great that the Ministry of Health is responsible for these collections, because many times we work more directly with culture than with health, especially because culture is inter sectoral. Here in LAPS (ENSP/Fiocruz), for instance, our main agreements are signed with the Ministry of Culture, Human Rights Secretariat of the Presidency. The culture certainly permeates all spheres.

This collection would be the living proof of the birth and development of TV Pinel...

It is an important historical record. Just as speaking about Doralice right now means to bring out a fragment of a forgotten memory, but that will be around forever in the history of TV Pinel. I think that little is said about Dora...