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INTRAFAMILY VIOLENCE AGAINST PREGNANT ADOLESCENTS AND NURSING CONSULTATIONS AS A MEANS OF INTERVENTION IN THESE CASES.

Giuliana Denise Rodrigues de Andrade
Felipe Renato Castro Rodrigues Eduarda
Luiza Oliveira Monteiro Ítalo José Silva
Damasceno
Roberta Ventura Neves

SUMMARY
Intrafamily violence against pregnant teenagers constitutes a serious public health problem and is manifested from an unequal relationship of power, due to the violent ways of relating perpetuated from generation to generation. The repercussions of intra-family violence on the health of the mother-baby binomial are serious, and may become more serious as they are teenagers, due to the peculiar transformations inherent to this stage of life, nursing care during the routine of pre- -natal care within the scope of primary care, can be a space that allows the identification of signs of violence and interventions supported by law, so that the child is removed from this harmful scenario.
Key words: intrafamily violence, teenage pregnancy, prenatal care, primary care.

INTRODUCTION

Violence in its entirety, in addition to being recognized as a serious social problem in Brazil, has also been gaining relevance in the context of public health, due to its harmful effects that cause imbalance in physical and mental well-being. This complex phenomenon, present since the first civilizations, triggered by multifactorial issues, directly interferes with the deterioration of society's quality of life and public spending (MENDONÇA, et al., 2018).

In this sense, intra-family violence is discussed, which is practiced by one or more perpetrators with family, marital, kinship or emotional ties, having a violent power relationship, regardless of gender. Intrafamily violence has different forms of manifestation, such as physical aggression, sexual and psychological abuse, neglect, abandonment and mistreatment (MACHADO, et al., 2014).

Thus, bringing the dynamics of intrafamily violence into a scenario of early pregnancy, the negative impact of the phenomenon harms the adequate development of the health of the mother-baby binomial, characterizing the fact as a serious public health problem (AGUIAR and GOMES, 2021).

The emergence of an early pregnancy makes the family the main support agent, so that this pregnancy develops in a healthy way, in addition to being indispensable in the resumption and adaptation of the adolescent's activities. However, for the most part, the revelation of the news causes feelings of disgust on the part of family members, triggering episodes of violence that in turn cause negative impacts on the pregnancy (MACEDO et al., 2018).

The guidelines and stratifications of gestational risk indicate that pregnant teenagers inserted in a scenario of intrafamily violence would present an intermediate risk classification, in addition to the factors of age and low education. However, the development of pregnancy must be monitored until the last trimester, given the possibility of changes in the clinical picture due to its social context, which may influence the emergence of pathologies with a potential risk of compromising the adequate evolution of the pregnancy, increasing the risk of maternal and fetal death (BRAZIL, 2019).

Therefore, within this violent family scenario in which the pregnant teenager is inserted; makes it more predisposed to progressing to a spontaneous abortion, placental abruption, premature labor, complications due to trauma, infections, hemorrhages, psychological damage, lack of affection for the child and maternal death (BARROS, et al. , 2021).

In this context, health professionals occupy a privileged position for identifying adolescents in situations of intrafamily violence, and are often the first to be informed about episodes of violence (MACHADO, et al., 2014).

In the scope of primary care, nursing care during prenatal consultations for pregnant adolescents who are victims of intrafamily violence can be a strategic means of identifying signs

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physical and behavioral indicators of violence. However, given the complexity that this type of violence encompasses, it becomes a challenge to bring public what is in the private sphere (LORDELLO and COSTA, 2020).

In this way, it is understood that the dynamics of intrafamily violence, among its various forms of manifestation, not only affects health, but also segregates the exercise of rights guaranteed by the statute of children and adolescents (ECA).

Given the exposed scenario, the research aimed to explain the dynamics and relationship of intra-family violence against pregnant teenagers, and how nursing consultations during prenatal care in PHC can be a means of intervention in these cases.

METHODOLOGY

This is a bibliographical review of an explanatory nature, where the research was based on works by other authors who presented results achieved, in addition to aiming to explain the phenomenon addressed.

The data collection was carried out in 5 stages: delimitation of the theme; time frame; bibliographic research; selection of studies based on inclusion and exclusion criteria; analysis and synthesis of results.

The bibliographic survey was carried out between September 2022 and May 2023, within the Virtual Health Library (VHL) website, where articles indexed in the LILACS, BDENF and MEDLINE databases were selected, in addition to a search also on the platform Academic Google.

The inclusion criteria were: works within the thematic axis published between 2002 and 2022 and that were available in Portuguese. Articles outside the topic covered, time frame and only available in a foreign language, books, chapters, reviews, technical reports, dissertations and monographs were excluded.

RESULTS AND DISCUSSIONS

In its entirety, violence committed by parents and guardians against adolescents has harmful effects that can interfere with adulthood, since they should play an affective role in the lives of these young people (VIEIRA, et al., 2019).

With this in mind, pregnant teenagers who suffer constant aggression resulting from this classification of violence are twice as harmed compared to an adult woman in this scenario, due to their physical and cognitive immaturity, in addition to their vulnerability to society (BRAZIL, 2006).

Within the context of the consequence, pregnancy is the result of intra-family violence, as many families have a model of upbringing that, in addition to being filled with physical and psychological aggression, also has a certain rigidity in the face of the behavior required of their children, generating a lack of openness to a relationship based on dialogue and trust, thus revealing another problem which would be the omission of sexual education, an extremely important tool, since adolescents tend to have their first intimate relationship at this stage, which is a risk factor for early pregnancy (MOTA, et al., 2013).

For many girls subjected to abusive relationships within the family environment, pregnancy presents itself as an alternative to leaving their parents' home, as they believe that in this way they will be able to obtain unconditional affection, family and reaffirm their role as a woman (SULLCA and SCHIRMER, 2006).

Teenage pregnancy can also be a result of sexual violence, which is an aspect of intra-family violence. For the most part, the act is carried out by members of the family itself, where the largest number of cases is found, carried out by males (father, brother, uncle, etc.), in addition Lordello and Costa add “[. ..] Considering the cases in which pregnancy results from intra-family sexual violence, the gestational dynamics evidence repulsion and ambivalence when revealed.' (LORDELLO and COSTA apud RAKOVIC-FELSER, 2016, p. 96).

In the context of the cause, the disclosure of early pregnancy in some cases can trigger rape. intrafamily lence. In a survey carried out with pregnant teenagers, it revealed that the discovery of pregnancy was the starting point for the manifestation of violence, through physical, psychological and verbal aggression, even induction of abortion, thus, this scenario highlights non-acceptance of the situation generating conflicts, feelings of shame and hurt (MONTEIRO, et al,.2007).

Another very common way in which intra-family violence manifests itself after the announcement of pregnancy is through negligence, which can also be the reason for the emergence of pregnancy in the context of the aforementioned consequence. Therefore, the act of negligence is defined as attitudes of failure to provide care and protection against

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preventable problems such as dangerous situations, illnesses, food, hygiene and even pregnancy itself (BRASIL, 2002).

In view of this, it is worth highlighting that negligence as an aspect of the violence described has a strong influence on prenatal care and consequently hinders not only the development of the binomial's health, but also the possible identification of this cycle of violence. For pregnant women subjected to this violent scenario, there is greater late adherence to prenatal care, thus compromising the quality of care provided (MACEDO, et al., 2018).

Within this context, prenatal care appears to be an opportune moment for the recognition and identification of cases of violence, since during this period visits to the health service become more frequent. However, many cases do not demonstrate typical signs of violence, which makes it difficult to identify, therefore it is necessary for the nursing professional to have a holistic view of each case (MARTINS, et al.,2022)

Violence in a teenager's pregnancy cycle takes on worrying features because it involves two lives, in addition to the increased risks due to anatomical, physiological and psychological immaturity. Therefore, it is extremely important that the nurse working in this type of assistance is trained and attentive to detect signs and symptoms presented in pregnant adolescents, such as phobias, signs that refer to depression, anxiety and late adherence to prenatal care (DEFELLIPO; CHAGAS; RIBEIRO, 2020).

Given this scenario, it is also necessary to pay attention to social conditions, given their contribution to the emergence of violence within the family. Factors such as low education of both parents, low income, history of abusive use of illicit and legal drugs, ethnicity and daughters of women with a history of violence committed by an intimate partner need to be taken into consideration for screening (ANTUNES; MACHADO; MALTA, 2020).

In the context of primary care, nurses have a strategic position when it comes to identifying cases of intra-family violence against pregnant teenagers. Bearing in mind that, in addition to the unit where they work being the gateway to the single health system, it is also located in the same territory as the victim and often the professional nurse is the one who will make the first contact with this young woman when starting the prenatal care (COSTA, et al,.2015).

Another point that highlights the relevance of nursing consultations in the context of prenatal care for elucidating cases is the appreciation and greater adherence to them by pregnant patients due to the positive characteristics of the profession. Nursing assistance during consultations is recognized as a space that promotes welcoming and dialogue, allowing free expression of doubts; sharing of feelings and experiences, in addition to the fact that, when the consultation is carried out by a nurse, the fact that both are women further influences adherence to consultations, as support and active listening further qualify the service (RAMOS, et al ., 2018).

Still within this panorama, it is clear that one of the ways that enables the quality of care provided is the competence of professionals in making appropriate use of nursing protocols. However, despite its importance, this fact does not negate the need for professional nurses to be aware of the peculiarities of each pregnant woman since the effectiveness of prenatal care goes beyond what is standardized, highlighting the need for a holistic and humanized approach (AMORIM, et al., 2022).

In contrast to the favorable scenario that the space promotes to bring these cases to light and intervene, some obstacles reflect on the implementation of notifications. The fear of reprisal by the victim's aggressor combined with the lack of preparation of professionals by health institutions are some of the factors that contribute to underreporting (SILVA,2021).

In other cases, the obstacles are caused by the unethical attitude of some professionals who provide hostile and rude treatment through abuse and threats, breach of confidentiality; blaming and humiliation that contribute to the evasion of adolescents from the health service (MARANHÃO; VIEIRA; MONTEIRO, 2012).

FINAL CONSIDERATIONS

With the analysis of the articles, it became clear how intra-family violence committed against pregnant teenagers is related in such a way that pregnancy can be the trigger for the beginning of different forms of manifestations of intra-family violence, or it can be the consequence of a scenario where the violence was already taking root.

The studies eligible for this work showed the fact that pregnant teenagers are more

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vulnerable to harmful impacts on the health of the mother-baby binomial, due to the position they occupy within society. Early pregnancy in itself presents a high risk, therefore, combined with routine violence perpetrated by family members, this pregnant woman could soon worsen her clinical condition.

The importance of nursing consultations during prenatal care in PHC became evident as a potential path for intervention in the cycle of intrafamily violence. Research shows that the frequency of consultations together with the characteristics of humanized care attributed to the nursing profession can be factors that facilitate the identification of victims, and consequently lead to the notification of cases to the competent bodies.

Violence, although not a typically medical problem, is based on the social environment, and is still considered a serious public health problem. Therefore, there is a need to provide training by health services aimed at implementing care protocols in order to strengthen and expand the knowledge of all professionals in situations of violence experienced by these young women, enabling a favorable outcome for the victims. .

As limitations, the scarce number of works within this thematic section addressed in this research is indicated. It is recommended that further studies within the researched section can be carried out in an applied manner with both pregnant teenagers and nursing professionals, as well as other categories providing prenatal care and other levels of health care.

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