

RESEARCH ARTICLE

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## NURSES PERFORMANCE FRONT CHILD VIOLENCE: AN INTEGRATIVE REVIEW OF THE LITERATURE

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### ARTICLE INFO

#### Article History:

Received 03<sup>rd</sup> May, 2019  
Received in revised form  
21<sup>st</sup> June, 2019  
Accepted 11<sup>th</sup> July, 2019  
Published online 28<sup>th</sup> August, 2019

#### Key Words:

Child Violence; Child and behavior;  
Nursing care.

### ABSTRACT

**Objective:** to identify through evidence in the literature the nurses' performance in front of a child victim of violence for children. **Method:** This is a descriptive study with a qualitative approach, Integrative Literature Review type (RIL), SCIELO databases, BIREME and LILACS, including article published during the period from 2010 to 2016. After the selection of the sample presented-if categories from reading, to be discussed. Results: to 16 articles, emerged 2 categories, the nursing consultation in relation to the cases of child violence; Challenges in the role of the Nurse. Proved to be the conduct of a nurse in front of child violence, but emphasized that there are barriers to the appropriate assistance. **Conclusion:** it was possible to identify how the Nurse should promote careful front child violence, as also met challenges and lack of knowledge which prevent the appropriate assistance. Thus the permanent and continuous education is essential to qualify the Nurse for expert assistance.

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Citation: Annália de Paula Gesta Santos, Dayara de Nazaré Rosa de Carvalho et al. 2019. "Nurses performance front child violence: an integrative review of the literature", *International Journal of Development Research*, 09, (08), 29036-29040.

### INTRODUCTION

Child violence represents a public health problem that affects various forms all walks of the world, the International Labour Organization data point to a rate of 53000 children killed every year in the world, are victims and 133 million 275 million have witnessed some kind of violence at home.

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Violence is any situation that threatens or violates the rights of the child or adolescent, as a result of the action or omission of the parents or guardians, of society or the State, or even in the face of the your own behavior, is the abandonment, neglect of family, living with people who are abusing alcohol and other drugs (Egry et al., 2017). Violence against children and adolescents is universal and known by the World Health Organization (WHO) as a great and serious public health problem in the world, and that hits every year millions of

children and adolescents, where the perpetrator acts intentionally and aggressively using the mechanical strength and imposing power over the helpless victim, data from the mortality information system (SIM) and the unified health system (SUS), indicate that in the year 2012 the external causes were identified as the major indexes of mortalities in children of 1 to 10 years differentiating race (Rates *et al.*, 2015). According to the International Labour Organization (ILO), 1.8 million children and adolescents are sexually abused in the world each year. In Brazil, a hundred thousand boys and girls are victims of sexual exploitation, hunger and malnutrition, about 6 million children die each year by your immune system weakness caused by hunger and malnutrition, which makes them unable to overcome diseases curable infectious, like diarrhea, measles and malaria (OIT, 2013). An estimated 18.000 children are victims of beating in Brazil, accidents, or unintentional injuries, 53.000 children killed every year for manslaughter in the world. The fear of denouncing the perpetrators of violence is what makes the violence continue hiding in schools, at home, on the streets and hospitals (Martins, 2010). Through the above, it is believed that the nurse has theoretical and practical preparation and needs to exercise continuous and global health promotion, in order to remedy or reduce the consequences of physical, psychological, structural, cultural and even educational during your consultation, existing through anamnesis, physical examination, during the pre- and post-hospital services and assistance in monitoring the case, making the population as to the existence of specific organs of child raped and targeting the (BRASIL, 2010). Whereas in nursing has a social function that the profession and relevant values for the use of all necessary means to solve the difficulty that affects the patient, there is no denying the your duty to communicate to the competent authority to practice or the suspicion of violence, the occurrence of ill-treatment or even the suspicion of occurrence implies the need to take measures to protect the child or adolescent victims of some kind of violence (Cocco *et al.*, 2010). The non-notification of the occurrence of these cases by the professionals is from the lack of qualification of the same in relation to children's violence. The Pro notifies these occurrences through the information system and harms your breakup may determine the SINAN and preventing other cases of abuse or the own cycle happens (Silva *et al.*, 2015). Given this context, formulated the following question: what is the guiding role of the nurse in the face of a victim of violence. Therefore, this study aims to identify through evidence in the literature the role of the Nurse in front of victim of child violence.

## METHODOLOGY

This is a descriptive study with a qualitative approach of type integrative literature review (RIL). Second Soares *et al.* (2014) the RIL is intended to identify and analyze the literature findings on the subject under discussion and has six steps. This study has formulated the following question: what is the guiding role of the nurse in the face of a victim of violence. The data were collected through the consultation and publication of authors of reference in the field and after the critical reading of titles and the abstracts as a criterion for the inclusion of references, published works were used in Portuguese language, in the following databases: SCIELO, BIREME and LILACS. After consulting the DeCs were defined the present descriptors "violence"; "child and

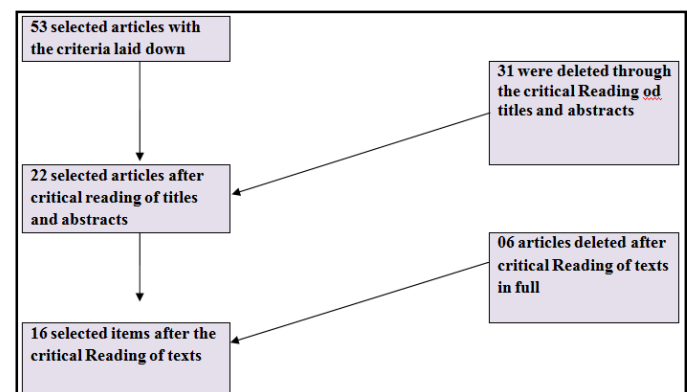
behavior" and the following keywords: nursing care, prevention and conduct of the nurse.

The results of this step is present in the table below.

**Table 1. Articles found during the period from 2010 to 2016, as the use of descriptors separately in databases**

Database	DeSC Violence	Child AND Child	Beauvoir AND Child	TOTAL
SCIELO		317	493	810
BIREME		24.604	150.407	175.011
LILACS		1.716	5.674	7.390
TOTAL		26.637	156.574	183.211

For the characterization of instrument was used Ursi and Gavão, (2006) adapted for analysis that covers the following information: identification of the article, titles, authors, journal name, year of publication, method, number, purpose, performance considerations of the nurse, the nurse's performance and challenges conduct according to the study. Thus 53 articles were the object of analysis in the first time, where they were passed to reading their titles and abstracts, to analyze the titles and abstracts, 22 papers were selected to be read in full. After carefully reading the articles, 16 texts remained as a source of data for this research as shows Figure 1 below:



**Figure made in databases SCIELO, BIREME e LILACS**

## RESULTS AND DISCUSSION

After the selection of the 16 articles, deepened on intense reading with the aim of listing the categories being discussed. Following are the results of this research through the display of tables and discussion of the results. To better complete the results analyzed in articles found in the literature, were drawn up two (02) categories arranged as follows:

**CATEGORY 1- The nursing consultation in relation to the cases of child violence:** On performance in nursing care provided to children and adolescents, it is necessary that the nurse has a holistic view to identify the problem, knowing the history of families and children. Doing the sorting judiciously, it is possible to reach an accurate diagnosis, therefore, it is important that the professional necessary practices, adopting effective measures for the prevention and treatment of cases and harms of violence. For Nunes and Sales, (2016) nursing teams should be able to face the situations of violence and for this it is necessary to expand the ability to detect problems that allow the building of support networks and coping of cases of child violence.

Table 1. Sample Information, title, author, year, and databases

No	TITLE	AUTHOR	DATABASE	YEAR	METHOD
1	Look of the management on the implementation of the notification record of domestic violence, sexual and other violence in a metropolis of Brazil	LIMA. J.S; DESLANDE, S.F	BIREME	2015	Exploratory
2	Understanding child neglect in gender perspective: Study in a small town and municipality	EGRY <i>et al.</i>	BIREME	2015	Quantitative and exploratory
3	Challenges of attention to domestic violence against children and adolescents in the family health program in medium-sized town in the State of Rio de Janeiro Brazil	LOBATO, G.R; MORAES, C. L. NAS	BIREME	2012	Qualitative
4	Studies on violence against children in basic health unit of the city of São Paulo Brazil.	NASCIMENTO, M.C RAMOS, M. L.C.O. SILVA, A.L	BIREME	2011	It is a qualitative research study conducted by means of interview.
5	The face of death: the law in conflict with your teen	GIMENEZ, L. FRASSETO, F.A.	BIREME	2015	Quantitative
6	Child abuse: a rescue in history and protection policies	MARTINS, C. B.G. JORJE, M.H.P.M.	SCIELO	2010	Bibliographical study
7	Notification of rights violated according to the information system for children and adolescents (SIPIA) in northeastern Brazil	PORDEUS <i>et al</i>	BIREME	2011	Descriptive quantitative in nature.
8	Family violence against children and the prospect of intervention by the family health program: the experience of the PMF/Niterói (RJ, Brazil).	ROCHA, P. C. X. MORAES, C. L.	LILACS	2011	Descriptive study of systematic sampling.
9	Professional basic health care in the face of the identification and notification of juvenile violence.	LIMA <i>et al</i>	LILACS	2011	This is an exploratory study with random approach.
10	Performance of nursing in front of sexual violence against children and adolescents.	SILVA, M.P. FERRIANI, M.G.C. SILVA, M.A.L.	LILACS	2011	Bibliographical study
11	Evaluation of the national programmer for integrated actions and references (PAIR) to the fight against sexual violence against children and adolescents in feira de Santana, Bahia	COSTA <i>et al.</i>	BIREME	2015	Cross-sectional and descriptive studies.
12	Children's and social rupture your inference in representations of tutelary advisors	GARBIN <i>et al.</i>	SCIELO	2016	Exploratory and qualitative.
13	Bulling, victimization by staff and depression relationship with emotional engagement.	VALLE <i>et al</i>	SCIELO	2015	Quantitative and exploratory
14	The possibilities for combating child violence in systematic nursing consultation	APOSTOLICO, M.R.HINO P; EGRY E, Y.	LILACS	2012	Descriptive study of qualitative approach of type case studies.
15	Profile of the care the children and adolescents victim of external causes of morbidity and mortality, 2000-2006.	SILVA <i>et al</i>	SCIELO	2010	Descriptive and transversal study of quantitative nature
16	Ill-treatment against children and adolescents in the State of São Paulo in 2009.	GAMARYSZEWKI <i>et al.</i>	BIREME	2012	Quantitative

The pediatric nurse and the nurse in the family play a vital role in the care of abused children. This service is provided in child advocacy centers, as well as in children's hospitals and outpatient hospitalization. Often they see patients in multiple settings and have multiple roles, working as part of multidisciplinary teams, usually providing care alongside child abuse pediatricians (Santos *et al.*, 2017). The performance of nursing, the vulnerabilities that involve childhood require a systematic and routine assistance, which can be reached through the nursing consultation, given your strong educational component and capability to strengthen the bond between users (child and family) and professionals. The systematization of the nursing consultation, for your time, assigns the scientific character, enabling act not only in individual assistance as well as promoting changes in the family environment and in the epidemiological frame of a given community (Apostólico, Hino and Eгры, 2013). Child violence, based on two publications can be connected directly in social relations, in which has been built inside the mind, so cannot be treated or analysed outside the society that produces it, considering your specificity and still your internal historical peculiarity. During the consultation of nursing nurses have the opportunity to identify, engage and even report child sexual abuse, as well as providing assistance to the victim and the family. The way to identify children and adolescents sexual abuse victim is through the collection of data (anamnesis and physical examination) during the consultations of nursing and

by the case of situation involving silence Pact, the nurse in addition to possess skills to nursing process, must possess the competence and communication skills in knowing how to deal with the victims (Tapia, Antoniassi and Aquino, 2014). The conduct of the nurse on suspicion of child victim of violence should include the completion of the anamnesis and physical examination, the repair of injuries, and mainly perform the prophylaxis against sexually transmitted Infections (STI), the contraception emergency and the STI/HIV testing, and achievement of notification through the notification/Individual Research (FNI) of domestic violence, Sexual and/or Other Violence. Perform routing to the psychologist, to promote measures of strengthening the victims of violence, helping them cope with the problems arising from the situation experienced. And trigger the tutelary council and childhood stick (Galindo *et al.*, 2017). In this context the single health system (SUS) plays an important role in the prevention and combating of violence and comprehensive care to people who have experienced violence. So in 2010, the Ministry of Health launched the care Line for the Integral attention to the health of children, adolescents and their families in situation of violence: that subsidiaries for managers and health professionals the ideal conduct, regarding: Greeting, service, notification and Follow-up on the network of care and Social protection, following the important standards that guide the care of children and adolescents who suffer violence (BRASIL, 2010).

## CATEGORY 2- Challenges in the role of the nurse

In order to computerize the cases of violence, scientific studies show that the basic health units (UBS) already sheltering in your electronic chart system facilitating the accessibility in basic network, from that system becomes more noticeable the existence the safety net for children and adolescents who are in situations of risk, and aims to act in preventing tracking of projective form the child violence cases. Identifying through notifications instruments such as: inclusion in social programs, team discussion until the occurrence is made and fired the tutelary council (Egry, Apostolico and Morais, 2018). In a study by Pereira, (2016), showed that the lack of training, workshops and permanent and continuing education courses, are factors that lead to the inability to meet adequate and legal conduct to be taken. So the professionals did not feel prepared to meet suitable front child violence, which is a challenge faced by nurses for a qualified assistance. It is worth mentioning that the situations of violence involve hierarchical relationships of power and domination on the part of the offender, whether the age difference, influence or authority and the episodes of violence can be "camouflaged" in family settings and, apparently, out of suspicion. These situations constitute major challenges to the Nursing Professional, since hinder access to children in situations of violence still with respect to the challenges for nursing, the difficulty in the detection of cases of violence and the implementation of prevention strategies in the context of the health units are conditions that hinder the implementation of effective actions (Borges, 2014).

## Conclusion

Was possible in this study to describe the role of the nurse in front of child violence, including identification of cases, the nursing consultation, and legal action. This study showed that Nurses are not trained professionals to meet qualified child victim of violence, as was evidenced in some studies that lack permanent and continuing education brings about the lack of knowledge and inadequate management in this situation. Describe the role of the nurse in front of child violence, provides for literature information based on scientific evidence on the subject, with the aim of promoting the health of the child, because once the nurses know the appropriate conduct, how to identify the cases, notify, and etc. may guarantee the quality of your service and be able to apply this in your daily life, reflecting directly on child health and protection. Highlights that the educational activities, short courses, talks and lectures, wheels are essential to expand on the topic, for professionals and community, thus impacting the reality and making an impact on child health promotion. So one should invest in these actions, in order to minimize the cases of child violence that are not identified in the nursing consultation, as well as perform the appropriate conduct in the face of child violence.

## REFERENCES

Apostólico, Máira R., Hino, P. and Egry, E. Y. 2013. 'As possibilidades de enfrentamento da violência infantil na consulta de enfermagem sistematizada', *Rev Esc Enferm USP*, 4(2), pp. 320–327. Available at: <http://www.scielo.br/pdf/reeusp/v47n2/07.pdf>.

- Borges, J. P. A. 2014. 'Violência na Infância : perspectivas e desafios para a Enfermagem', *Rev Soc Bras Enferm Ped*, 14(2), pp. 154–158.
- BRASIL, M. da saúde 2010. 'Linha de Cuidado para a Atenção Integral a Saúde de Crianças, Adolescentes e suas Famílias em Situação de Violências Orientação para Gestores e Profissionais de Saúd', Secretaria de Atenção à Saúde Departamento de Ações Programáticas e Estratégicas Linha, 1(2), p. 104. doi: 10.1007/s11295-013-0655-3.
- Cocco, M. et al. 2010. 'Violência contra crianças: dimensões apreendidas nas falas de professoras de educação infantil e a articulação com o setor saúde', *Revista Mineira de Enfermagem*. *Revista Mineira de Enfermagem*, 14(4), pp. 539–547. doi: s1415-27622010000400012.
- Egry, E. Y. et al. 2017. 'Enfrentar a violência infantil na Atenção Básica: como os profissionais percebem?', *Revista Brasileira de Enfermagem*, 70(1), pp. 119–125. doi: 10.1590/0034-7167-2016-0009.
- Egry, E. Y., Apostolico, M. R. and Morais, T. C. P. 2018. 'Notificação da violência infantil, fluxos de atenção e processo de trabalho dos profissionais da Atenção Primária em Saúde', *Ciência & Saúde Coletiva*. *ABRASCO - Associação Brasileira de Saúde Coletiva*, 23(1), pp. 83–92. doi: 10.1590/1413-81232018231.22062017.
- Galindo, N. A. de L. et al. 2017. 'Violência Infanto-Juvenil Sob a Ótica Da Enfermagem', *J Nurs UFPE on line*, 11(3), pp. 1420–1429. doi: 10.5205/reuol.10263-91568-1-RV.1103sup201714.
- Martins, C. B. de G. 2010. 'Maus tratos contra crianças e adolescentes', *Revista Brasileira de Enfermagem*. *Associação Brasileira de Enfermagem*, 63(4), pp. 660–665. doi: 10.1590/S0034-71672010000400024.
- Nunes, A. J. and Sales, M. C. V. 2016. 'Violência contra crianças no cenário brasileiro', *Ciência & Saúde Coletiva*. *Associação Brasileira de Saúde Coletiva*, 21(3), pp. 871–880. doi: 10.1590/1413-81232015213.08182014.
- OIT, O. I. do T. 2013. *Desafios para erradicar o trabalho infantil*, International Labour Organization. Available at: [https://www.ilo.org/global/docs/WCMS\\_244033/lang--en/index.htm](https://www.ilo.org/global/docs/WCMS_244033/lang--en/index.htm) (Accessed: 27 July 2019).
- Pereira, L. E. M. 2016. 'A percepção dos enfermeiros quanto ai enfrentamento do abuso sexual contra criança e adolescentes na capital paraense', *Dissertação (Pós-Graduação em Enfermagem UFPA)*, 1(2), pp. 1–91.
- Rates, S. M. M. et al. 2015. 'Violence against children: an analysis of mandatory reporting of violence, Brazil 2011', *Ciência & Saúde Coletiva*. *ABRASCO - Associação Brasileira de Saúde Coletiva*, 20(3), pp. 655–665. doi: 10.1590/1413-81232015203.15242014.
- Santos, M. de F. O. dos et al. 2017. 'Assistência de Enfermagem à criança vítima de abuso sexual Nursing care for child victims of sexual abuse Asistencia de Enfermería al niño victima de abuso sexual', *REAS Revista Eletrônica Acervo Saúde*, 9(1), pp. 995–1002.
- Silva, P. A. da et al. 2015. 'Notificação da violência intrafamiliar contra crianças e adolescentes por profissionais de saúde no Brasil', *Avances en Enfermería*. *Universidad Nacional de Colombia*, 33(1), pp. 142–150. doi: 10.15446/av.enferm.v33n1.40585.
- Soares, C. et al. 2014. 'Integrative review: concepts and methods used in nursing descriptors', *Rev Esc Enferm USP*, 48(2), pp. 329–39. doi: 10.1590/S0080-623420140000200020.

Tapia, C. E. V., Antoniassi, L. J. and Aquino, J. P. de 2014. 'Papelo do Enfermeiro frente ao abuso sexual de crianças e adolescentes', *Revista Saúde em Foco*, 1(1), pp. 1–9.

Ursi, E. S. and Gavão, C. M. 2006. 'Prevenção de lesões de pele no perioperatório: revisão integrativa da literatura', *Rev Latino-Am Enfermagem*, 14(1), pp. 124–131. doi: 10.1590/S0104-11692006000100017.

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