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Medeiros, A.C.L.V.; Ramos, W.T.; Andrade, M.M.; Santos, H.; Araújo, M.S.; Santos, G.S.; Sexuality in adolescence and the importance of health education in school: experience report

DOI: https://doi.org/10.36489/saudecoletiva.2021v11i66p6587-6598

Sexuality in adolescence and the importance of health education in school: experience report

La sexualidad en la adolescencia y la importancia de la educación para la salud en la escuela: informe de experiencia A sexualidade na adolescência e a importância da educação em saúde na escola: relato de experiência

ABSTRACT

Aim to report an experience about the importance of health education on awareness about adolescence's sexuality. Method: a qualitative, descriptive and experience report study developed by physiotherapy students of the Sergipe Federal University in a school of Lagarto (SE), based on the method of the Charles Magueréz Arch and the School Health Program, with support from the school and reference health team. We used guiding questions to construct a collective poster, presentations, videos, anatomical pieces and a play to talk about sexual and reproductive health, sexuality and sexual abuse and/or sexual violence. With the study, it was observed that the adolescents reflected and evaluated their conceptions about sexuality, facing it with more care and respect, favoring a change in their reality. Physiotherapy students made it possible to understand the importance of this theme in health education, favoring a broader view of their professional practice. Thus, it can be concluded that such an approach contributes to effective changes in the lives of adolescents and demonstrates the need for the development of more actions and studies on sexuality by health professionals, preparing them to act close to the needs of society.

DESCRIPTORS: Adolescent; Sexuality; Child Abuse, Sexual; Health Education.

RESUMEN

El objetivo es relatar una experiencia sobre la importancia de la educación en salud para concienciar sobre la sexualidad en la adolescencia. Se trata de un estudio cualitativo, descriptivo, formato de relato de experiencia, de estudiantes de fisioterapia de la Universidad Federal de Sergipe en un colegio de Lagarto (SE), basado en el método del Arco de Carlos Magueréz y el Programa Salud en la Escuela, con el apoyo de la escuela y un equipo de salud de referencia. Se utilizaron preguntas orientadoras con la construcción de un cartel colectivo, presentaciones, videos, obras de teatro anatómicas y una obra de teatro para abordar la salud sexual y reproductiva, la sexualidad y el abuso y / o violencia sexual. Con el estudio se observó que las adolescentes reflexionaron y evaluaron sus concepciones sobre la sexualidad, enfrentándola con más cuidado y respeto, favoreciendo un cambio en su realidad. Los estudiantes de fisioterapia permitieron comprender la importancia de este tema en la educación para la salud, favoreciendo una visión más amplia de su práctica profesional. Así, se puede concluir que tal abordaje contribuye a cambios efectivos en la vida de los adolescentes y demuestra la necesidad de desarrollar más acciones y estudios sobre sexualidad por parte de los profesionales de la salud, preparándolos para actuar cerca de las necesidades de la sociedad.

DESCRIPTORES: Adolescente; Sexualidad; Abuso Sexual Infantil; Educación en Salud.

RESUMO

Objetiva-se relatar uma experiência sobre a importância da educação em saúde para conscientização da sexualidade na adolescência. Trata-se de um estudo qualitativo, descritivo, formato relato de experiência, de acadêmicos de fisioterapia da Universidade Federal de Sergipe em uma escola de Lagarto (SE), baseando-se no método do Arco de Charles Magueréz e no Programa Saúde na Escola, com apoio da escola e equipe de saúde de referência. Foram utilizadas questões norteadoras com a construção de cartaz coletivo, apresentações, vídeos, peças anatômicas e peça teatral para abordar a saúde sexual e reprodutiva, a sexualidade e abuso e/ou violência sexual. Com o estudo, observou-se que os adolescentes refletiram e avaliaram suas concepções sobre a sexualidade, encarando-a com mais cuidado e respeito, favorecendo uma mudança em sua realidade. Aos acadêmicos da fisioterapia possibilitou entender a importância dessa temática na educação em saúde, favorecendo uma ampliação do olhar em sua prática profissional. Assim, pode-se concluir que tal abordagem contribui para mudanças efetivas na vida dos adolescentes e demonstra a necessidade do desenvolvimento de mais ações e estudos acerca da sexualidade pelos profissionais de saúde, preparando-os para atuar próximos às necessidades da sociedade.

DESCRITORES: Adolescente; Sexualidade; Abuso Sexual na Infância; Educação em Saúde.

RECEIVED ON: 01/30/2021 **APPROVED ON:** 03/01/2021

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he 1988 constitution establishes several rights for the Brazilian population, including the right to health and education. Another historic achievement, the result of the struggle for citizenship and Human Rights, recognized in national laws and international documents, are the rights to sexual and reproductive health. With the emergence and strengthening of the Unified Health System (SUS), several strategies have been created to ensure the health of the population. 12

Linked to this, an increasingly important discussion, worldwide, is the need to integrate health into the school. This interaction provides a way to avoid injuries and promote health and quality of life, as the school provides important elements to enable the citizen to live a healthy life. It is a space of relationships and critical and political development that go beyond its borders and thus, a privileged place for health promotion, prevention and education practices. In spite of this, building these pedagogical practices is a great challenge in the face of the demands that scho-

ols face and, therefore, a health program must be implemented at the school, with support from the Family Health teams, inserted and integrated into the school's daily life and culture, going beyond the limits of the school. ¹

To this end, the Health at School Program (PSE - Programa Saúde na Escola) was created in 2007, targeting children, adolescents and young people in the school environment and acting in an intersectoral manner, following SUS principles and guidelines, promoting the articulation of knowledge and participation of students, parents, the school community and society in general when treating health and education in an integral way. The health actions provided for in the PSE involve attention, promotion, prevention and assistance, and should plan with schools, the inclusion of health education themes in their political pedagogical project so that they are focused on the right to life. Among the themes that must be addressed are actions to promote sexual and reproductive health. 3

Sexuality is constitutive of the subjects since childhood when it comes to adolescence, it demands care and attention, as it is a complex and dynamic phase from 10 to 19 years old and that involves physical and emotional changes that start to be accentuated, especially by the hormonal process, through the body, behavior and social interaction and that can affect the personality and the way of acting in society. In adolescence, sexuality is related to a field of discoveries and experiences that imply decision-making, requiring responsibility and the exercise of autonomy. ⁴

It is at this stage that cases of sexual abuse and / or violence may occur, which is a violation of an individual's sexual rights, without his or her consent and therefore, needs a lot of attention on the part of organizations that promote the wellbeing of the child and the adolescent, it is estimated that, for every eight young people in the world, one has a report of sexual violence. In Brazil, according to the 2015 National School Health Survey (PeNSE), it is the second most frequent type of violence and 4% of the child and youth population has already suffered sexual violence, with or without physical contact, with a higher prevalence among the female gender (10-20%). 5

Knowing that the sexual education

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process occurs, informally, from the relations with the environment, having the family as a reference, and formally, as a pedagogical practice, in schools and social institutions. Despite advances in the area, society still has prejudice and sexuality remains considered a taboo. Parents often find it difficult to approach this subject, either due to resistance due to culture or religion or lack of information on the subject, and the school becomes a privileged place to guarantee these sexual and reproductive rights. ^{6,7}

Defended in the Law of Guidelines and Bases of National Education (LDB - Lei de Diretrizes e Bases), sexuality must permeate all disciplines, with a broad view, respecting the cultural, social and historical character, so that students develop and exercise their sexuality with pleasure, health and responsibility. Despite this, the realization and effectiveness of these practices are still questioned, as research on adolescent sexual behavior shows that this public has put their health at risk. Thus, it considers the school as favorable for health promotion and debates on sexuality should be held jointly by educators, parents and health professionals, as the lack of information on the topic contributes to the vulnerability of young people, increasing the chance of risky sex behaviors. 7,8,9

Thus, health education is a differentiated and dynamic performance strategy for the production of subjects' autonomy, and when integrated with the health team and the school, it brings adolescents closer to the theme, trains teachers in this knowledge gap and prepares health professionals to act close to the social reality. For this, it must be carried out with content programmed for the inserted social environment, with respect to cultural peculiarities, enabling self-knowledge, acquisition of grounded information and current and long-term improvements in the health of these adolescents. ^{8,9,10}

Thus, the PSE becomes an important means to achieve these goals, by integrating school and health team and bringing the family to the debate and care related to

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the main issues that directly affect the lifestyle and quality of life of these students. When articulated with the University and its academics, it allows to extrapolate the "walls" between it and the community, strengthening its role as a trainer of social actors in reality. The following question then fell: What strategies can the health professional, in particular the physiotherapist, use in the PSE to address sexuality, abuse and sexual violence? Based on this, this study aims to report an experience about the importance of health education at school for raising awareness of sexuality in adolescence.

METHOD

Qualitative, descriptive study and experience report, of physiotherapy students, in the Practice of Inserting Physiotherapy in Community I (PIFISIO I), of the Federal University of Sergipe (UFS), Campus Lagarto (SE), which has an institutional agreement with the municipality for carry out their practices and therefore, there was no application of the Free and Informed Consent Term (ICF), but the ethical principles of RESOLUTION No. 466/2012 and RESOLUTION No. 510/2016 of the National Health Council - CNS were respected.

The Charles Maguerez Arch method (observation of reality, key points, theorization, solution hypotheses and application to reality) was used in PIFISIO I and aims to generate autonomy for those involved, with critical and reflective knowledge, preparing them to carry out interventions aimed at the need of a given territory, its subjects and social actors, enabling change in this reality. ¹¹ To record the steps taken, the field diary in the Integrated System for the Management of Academic Activities (SIGAA) at UFS.

EXPERIENCE REPORT

All stages of this report took place in the 2018.1 academic period, between October and November 2018. For the initial stage of the arch, observation of reality and elaboration of the key points, a dialogue was held with a municipal school in the urban region of the municipality of Lagarto (SE) and a reference health team, respecting the pillars recommended by the PSE and the public with the greatest impact was delimited. After the dialogue, the public of the 6th year of elementary school I was identified, and the problem: teenage pregnancy and sexual violence. With the purpose of deepening the theme and supporting the knowledge of the academics (theorizing and hypotheses of solution), a search was carried out in the database of the Virtual Health Library (VHL), based on the descriptors: "Educação em Saúde"; "Serviços de Saúde Escolar" and "Saúde sexual e reprodutiva", advanced search, title, summary and subject. For the selection, we observed if the articles were in accordance with the theme in that order: 1st title, 2nd abstract, 3rd article and during the search it was sought to identify studies that would help in associating the theme with Physiotherapy, since there was a need for association with the practice of teaching physiotherapy in the community.

Following the steps of the arc (hypotheses of solution and application to reality), two interventions were planned, with intervals for evaluation, discussion and dialogue with the school and the health team. Participated in the interventions, 29 students of elementary school I, from the 6th year, from 12 to 14 years old. The subjects covered were: anatomy of the reproductive system, stages of body development, sexuality, risk factors for teenage pregnancy and how to identify and prevent sexual violence. Thus, the construction of resources and teaching materials began to be used in the two interventions. The first in order to provide knowledge and respect about the body and its physiological changes and the second to avoid cases of sexual abuse and/or violence, promoting a culture of respect and care for the other.

In the first intervention, with the room previously organized by the physiotherapy students, a welcoming and presentation dynamic was held on the reason for the presence of everyone on that occasion. It was proposed to build a collective poster, using magazines, newspapers, cards, glue and scissors, based on guiding questions, in order to have access to students' prior knowledge about the concepts of sexuality, abuse and sexual violence, if they were topics discussed at school, at home or with colleagues, if there were differences between men and women and if they had already done research on the internet on the themes.

The class was divided into two groups, with the help of the facilitators (academics and physiotherapy teachers), they built their posters and at the end, they elected a representative from each group to explain them, while everyone was interacting. Then, the academics and the responsible teacher summarized the points placed on the posters; used slides in powerpoint * and anatomical pieces, from the male and female reproductive systems, from the morphofunctional anatomy laboratory at UFS to address the theme of sexuality and the biological evolution of the body of the child, adolescent and adult, and presented videos that addressed the importance care and respect for the body and its self-care. During the presentations and the debate, it was noted that many students had doubts on the subject and it was suggested that they write on paper curiosities generated to be worked on at the next meeting.

For the second moment, then, the previous intervention was debated and a play was planned to demonstrate everyday situations, through forms and types of sexual abuse, showing how to ask for help and information on protection laws in favor of children and adolescents: (1st) two teenagers who had sexual intercourse without a condom leading to an early pregnancy, (2nd) sexual harassment at school by a classmate and (3rd) teacher explaining laws and ways to report the abuser. In addition, videos on prevention, risks and problems of sexual violence and debate about the experience were used. At the end of the intervention, an attempt was made to assess the two days of intervention and what these experiences had generated in their lives.

RESULTS AND DISCUSSION

At the time of the construction of the collective poster and presentation of the students' previous knowledge, many curiosities and different views about sexuality were observed, but most associated it with the term "sex", in this context, restricted to the sexual act itself, disregarding the different aspects of sexuality. Many reported differences in dealing with sexuality between "men and women" and prejudices about who can and cannot do something and the sexual choice of colleagues. It was noticed that the majority consulted colleagues and were ashamed to use the internet to research their doubts about the theme. In addition, they reported shame or lack of "freedom" on the subject to talk to their family members. Within the school, few teachers approached the theme, they reported only a specific action by a biology teacher, but many were left with doubts. During the abuse and violence debate, they identified situations in their communities, which demonstrates the need to institute public policies aimed at this audience and strengthen this debate.

During the first meeting, it was noted that many students had doubts about the nomenclature and functioning of the reproductive systems, about care and prevention and respect for others and their bodies, and behaviors of "shame" and "prejudices" about the theme that they showed themselves through their bodily expressions or speeches. Something still important was the presence of a discriminatory view regarding the sexual choices of some students, which may be something individual or caused by the institution, because many times teachers or other employees may have a discriminatory conduct, although no speech was reported in this sense. These prejudices can be caused by the lack of information, since among the themes presented at the end of this meeting were: types of relationships, sexual choices and how to identify and act in cases of sexual abuse and violence.

These findings make it important to have "what they know" and "what they

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can do" as a starting point, developing in each the ability to interpret daily life and act in a way to incorporate appropriate attitudes and/or behaviors to improve quality of life. ³ This starting point is fundamental, as it also highlights what was seen in other studies that bring in their findings some taboos, whether by students, family members and even at school, about sexuality, self-care, sexual health, pregnancy prevention and STI/AIDS and bring old stereotypes and beliefs about sexuality and STI/AIDS. ^{6,8,9}

It can be said that most people understand sexuality as synonymous with sexual intercourse. However, other factors that make up sexuality must be considered, such as psychic, social and cultural aspects, moving away from biological reductionism. 4,12 In addition, the belief that talking about the topic stimulates curiosity and can anticipate sexual practices, must be overcome, sexuality must be worked from a socio-historical perspective, reframing current norms and standards of gender and identity, to foster respect, guarantee of sexual rights and the extinction of situations of prejudice and violence. These actions should aim at a space for dialogue, clarification and problematization of issues, favoring the reflection and reframing of information, emotions and values, especially in the school environment. 13

With regard to parents, these issues are still rarely addressed by families, often due to the difficulty of talking about the subject, either due to resistance due to culture or religion or due to lack of information. It brings an even greater challenge to teachers, as this "taboo" can hinder dialogue, plus the lack of training and incentives by institutions to work on the topic, it can lead to the use of strategies that increase the risk of repressive, punitive and discriminatory religious conduct and still marks a neglect of schools in relation to the approach to this theme. And it can be seen in the studies, as well as in this one, that it is rarely addressed. 6,7,8,9,14

This fact demonstrates the need to address the theme at school, as the findings

confirm the fact that adolescence is involved by the absence of adequate information and neglect in the search for this knowledge. Coupled with the lack of information, sexual practices or sexual relations begin before adulthood, maturity of knowledge, without the use of condoms and, consequently, can cause sexually transmitted infections, first sexual intercourse by peer pressure and the non-recognition of situations of abuse, violence and sexual harassment. ¹⁵

Another important fact according to the National School Health Survey (PeNSE), 2009, of 9th grade students, is that 30,5% had already had some sexual relationship, larger and earlier in public schools, and twice as much for male individuals. This data becomes important, since the age of the first relationship is one of the most used indicators to analyze the risks to sexual and reproductive health. 4 For this reason, debates about sexuality should be held with educators, parents and health professionals, reducing vulnerability and risky sexual behaviors. Some studies in this approach, which bring health education, showed improvement in several aspects related to sexuality, effectiveness in decreasing the occurrence and recurrence of pregnancy in adolescence and prevention of Sexually Transmitted Diseases (STD). 9

In general, in the studies, the activities developed on the theme of sexuality are characterized by temporary interventions, carried out by professionals who do not belong to the school. These activities affect only a part of the school population, concentrating 75% of the actions in elementary education (5th to 9th grade) ⁷, as in the case in our study, in which the 6th year was chosen by the institution, as they consider it to have the greatest impact on the theme and was a theme built by physiotherapy students, from outside the PSE, despite being in debate with the school and health team.

During all stages of the arch, there was a lack of preparation to address this issue, either by the school or by health professionals who reported a lack of training on the subject. About health professionals, this early insertion in primary care is essential, to give them the security to lead and manage health promotion activities and to establish a link and responsibility for the empowerment of students, teachers and school staff, due to the impact that they can bring to the health of the community. ¹⁶

During the second meeting, there was a certain silence in the room and fixation in the eyes of the students in the characters presented, with perceptible emotion and surprise. When asked about the stories, some identified the scenes in their realities as the fact that some boys lack respect and space limits, against girls within the school environment. This and other reports were used to address the importance of respecting sexuality.

This observation corroborates with the data on the notification of violence against adolescents from the Information System for Notifiable Diseases, from 2011 to 2017, present in 75,4% of the municipalities, prevailing in females (10 to 14 years old) and neglect in males (10 to 14 years old). 17 International studies point out that sexual violence is a worldwide phenomenon and the impacts caused are diverse and affect, even in the long term, the lives of survivors, being negative to their mental, physical, sexual and reproductive health. Thus, approaching the topic and discussing it widely in all spheres of society is a way of mobilizing, sensitizing and instrumentalizing the collective, demystifying the subject and drawing attention to this important social issue. 18

At the end of the intervention, the students reported "freedom" to discuss the topic, this relevance provided by the problematization methodology enabled the autonomy and protagonism of those involved in the construction, mediation and participation of knowledge about the themes and was an opportunity to develop a critical and reflective sense. In this way, knowledge enables the formation of social actors aware of their roles of responsibility towards society and how they can react in relation to sexuality. ¹⁶

It can be said that the school can prepare adolescents for living in the social environment, and for this reason, it is necessary to analyze the adolescents' perceptions about sexual and reproductive law, types of violence, abuse and sexual harassment, to support a construction based on in the reflection of the adolescent's autonomy and protagonism, using educational actions focused on the aspects that facilitate education on this paradigm, generating knowledge multiplier agents and critical citizens through the exercise of rights and duties, capable of

controlling their health conditions and quality of life, with a choice for healthier attitudes. ^{19,3}

CONCLUSION

The intervention provided an awareness of sexuality and care against sexual abuse and/or violence in school adolescents, allowing a break of paradigms and "prejudices", embedding in them the importance of taking care of their bodies and respecting each other and creating multiplying agents capable of generating

a new perspective of knowledge about the theme.

For physiotherapy students, the teaching and learning strategy used enabled reflection, stimulated creativity and the ability to act by dynamically increasing the understanding of the theme, expanding the scope of the profession and, when interacting with the health team and the Programa Saúde na Escola (PSE) made the actions performed play a significant role in addressing themes of a socio-cultural nature and that generate changes in social reality.

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