

Assistance implications on prenatal in the brazilian prison system

Implicações assistenciais sobre o pré-natal no sistema prisional brasileiro

Implicaciones de la atención prenatal en el sistema penitenciario brasileño

RESUMO

Caracterizar a produção científica, no âmbito nacional e internacional, sobre as implicações assistenciais relacionadas ao pré-natal no sistema prisional brasileiro. Metodologia: Trata-se de uma revisão integrativa da literatura, realizada nos meses de janeiro a março de 2022, utilizando o cruzamento dos descritores: Gravidez; Prisões; Enfermagem; Gestantes; Pré-Natal; com o operador booleano "AND" nas bases de dados Literatura Latino-Americana e do Caribe em Ciências da Saúde, por meio da Biblioteca Virtual em Saúde. Foram encontrados 34 artigos que após aplicar critérios de inclusão e exclusão resultaram em uma amostra de oito artigos. Resultados e discussão: Dentre as fragilidades no sistema prisional relacionado a assistência no pré-natal destacam-se o descaso na assistência pré-natal, oferta insuficiente de serviços, atendimento desqualificado e por vezes desumano. Identificaram-se ainda falta de orientações acerca dos cuidados durante o período pré-natal, aleitamento materno e cuidados com as mamas. Considerações: Conclui-se que as mulheres que vivenciam a maternidade no cárcere recebem uma assistência insuficiente e desqualificada devido ao acompanhamento inadequado dos programas de pré-natal.

DESCRITORES: Sistema Prisional; Gestante; Pré-Natal.

ABSTRACT

To characterize the scientific production, nationally and internationally, on the care implications related to prenatal care in the Brazilian prison system. Methodology: This is an integrative literature review, carried out from January to March 2022, using the crossing of the descriptors: Pregnancy; Prisons; Nursing; pregnant women; Prenatal; Prisons; with the Boolean operator "AND" in the Latin American and Caribbean Literature on Health Sciences databases, through the Virtual Health Library. We found 34 articles that, after applying inclusion and exclusion criteria, resulted in a sample of eight articles. Results and discussion: Among the weaknesses in the prison system related to prenatal care, we highlight the neglect of prenatal care, insufficient supply of services, disqualified and sometimes inhumane care. There was also a lack of guidance on care during the prenatal period, breastfeeding and breast care. Considerations: It is concluded that women who experience motherhood in prison receive insufficient and disqualified assistance due to inadequate monitoring of prenatal programs.

DESCRIPTORS: Prison System; Pregnant; Prenatal.

RESUMEN

Caracterizar la producción científica, nacional e internacional, sobre las implicaciones del cuidado relacionado con la atención prenatal en el sistema penitenciario brasileño. Metodología: Se trata de una revisión integradora de la literatura, realizada de enero a marzo de 2022, mediante el cruce de los descriptores: Embarazo; Prisiones; Enfermería; Mujeres embarazadas; Prenatal; con el operador booleano "Y" en las bases de datos de Literatura Latinoamericana y del Caribe en Ciencias de la Salud, a través de la Biblioteca Virtual en Salud, se encontraron 34 artículos que, luego de aplicar criterios de inclusión y exclusión, dieron como resultado una muestra de ocho artículos. Resultados y discusión: Entre las debilidades del sistema penitenciario relacionadas con la atención prenatal se destacan la falta de atención en el control prenatal, la insuficiente prestación de servicios y la atención no calificada y en ocasiones inhumana. También se identificó falta de orientación en cuanto a los cuidados durante el período prenatal, lactancia materna y cuidado de los senos. Consideraciones: Se concluye que las mujeres que viven la maternidad en prisión reciben una asistencia insuficiente y no calificada debido a un inadecuado seguimiento de los programas prenatales.

PALABRAS CLAVE: Sistema Penitenciario; Embarazada; Prenatal.

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Revisão de Literatura EN

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INTRODUCTION

The National Policy for Comprehensive Health Care for Persons Deprived of Liberty in the Prison System (PNAISP), was established by Interministerial Ordinance No. 1, of January 2nd, 2014, and regulated the forms of integration between the Unified Health System (SUS) and the Prison System, with the purpose of guaranteeing conditions that ensure people deprived of liberty have universal and equal access to health actions and services, from their promotion, protection and recovery, without any distinction and prejudice¹.

Prenatal care comprises a set of preventive, educational, health-promoting, diagnostic and curative health services and actions, aiming to monitor and achieve a good pregnancy outco-

me for the woman and her child, thus contributing to reducing maternal and child mortality.²

According to Andrade and Gonçalves³, Brazilian penitentiaries have an inadequate environment for the development of a pregnancy, due to precarious hygiene conditions, scarcity of materials and limited resources, since the assistance offered falls short of that recommended by public health policies, which reflects the lack of preparation of the Brazilian prison system, violating human rights, which should be guaranteed to these women by the Federal Constitution.

The lack of structure is one of the most relevant aspects within the prison system. It is worth noting that structurally, penitentiaries were not designed for women and the few prisons that have suitable cells for these women are

still insufficient, due to overcrowding in the prison system.⁴

Pregnant women deprived of liberty face several barriers in their daily lives, ranging from inadequate physical facilities to the minimum essential conditions for human survival. They have a scenario full of vulnerabilities and have difficulties accessing health services, in which, at times, prenatal programs are inaccessible or practically non-existent, which shows a disregard for the mother-baby binomial.

Given the relevance of this topic, there is a need to know more about this problem, and understand the real difficulties presented by these women within the prison system. Which leads to the following guiding question of this study: What are the care implications related to prenatal care in the Brazilian prison system? Therefore, with the

aim of expanding and contributing to discussions on this topic in Brazil, the present study aimed to characterize scientific production, at national and international levels, on the assistance implications related to prenatal care in the Brazilian prison system.

METHOD

The study is an integrative review of the literature, in which articles available in the literature were analyzed to identify scientific production at the national level, on the assistance implications related to prenatal care in the Brazilian prison system. The steps adopted to prepare this study were comprised of six phases: 1) identification of the theme and definition of the research question; 2) establishment of study inclusion and exclusion criteria; 3) definition of the information to be extracted; 4) careful evaluation of the studies included in the integrative review; 5) interpretation of the investigated results; 6) presentation of the synthesis of knowledge 5. The elaboration of the guiding question of this research resulted in the following question: What are the care implications related to prenatal care in the Brazilian prison system?

The literature review took place in the municipality of João Pessoa, Paraíba, between January and March 2022, the search was carried out based on studies available in the Virtual Health Library (VHL) in the Latin American and Caribbean Literature in Health Sciences (LILACS) database. To locate publications, Health Sciences Descriptors (DECs) were used, with the help of the Boolean operator AND. To this end, two alternating crosses were carried out: “Pregnancy” AND “Prisons” AND “Nursing” and “Pregnant women” AND “Pre-Natal” AND “Prisons”. This strategy was adopted due to the scarcity of studies in the respective research area.

The inclusion criteria adopted for investigation were: articles published in Portuguese and English relating to the

topic in question, available free of charge on the platforms and published between January 2012 and March 2022. The exclusion criteria were: studies published in languages other than Portuguese and English, studies that did not address the topic, articles that require payment, available only as abstracts, duplicate studies, theses and dissertations.

The search resulted in thirty-four (34) articles in general. After filtering according to the inclusion criteria, twelve (12) studies were excluded. Obtaining twenty-two 22 articles for analysis by reading the title and summary, of these, fourteen (14) articles were excluded because they did not match the proposed theme, among them six (6) were not available in full, thus totaling eight (8) articles selected in accordance with the specifications of this research.

RESULTS

Through interpretation and synthesis of the 22 articles investigated, collecting

the sample for this research resulted in the inclusion of a total of eight articles, as shown in figure 1.

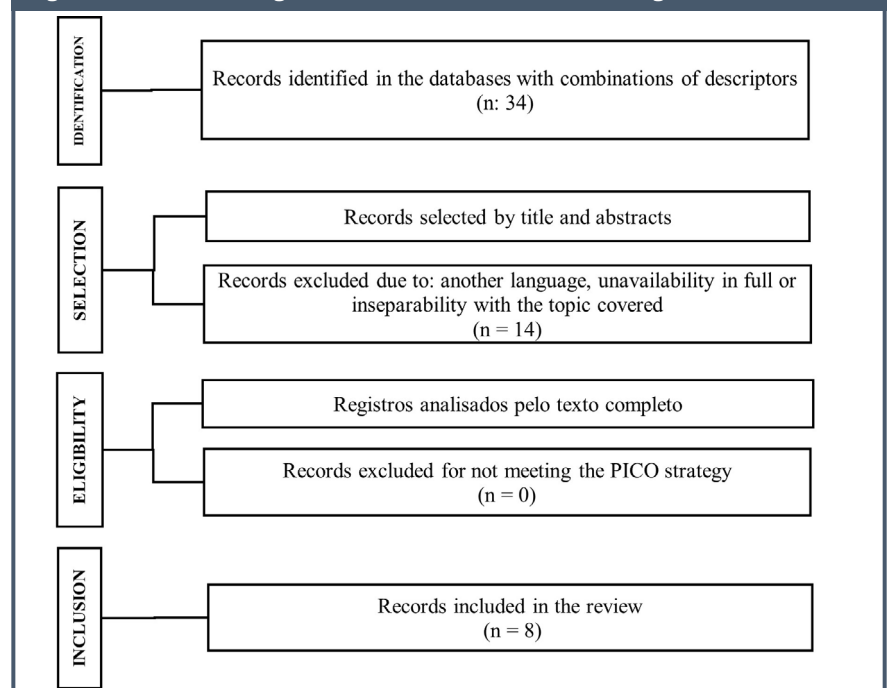
Table I discusses the information on the articles that make up the present sample of this study, according to the title of the study, author, database, periodical, year of publication and methodology used.

Through the analysis carried out with the sample and its characteristics in Table I, it was observed that in relation to the database, LILACS is the predominant base on the topic, with eight articles in the database. As for the journal, Revista Baiana de Enfermagem stood out, where it presented a frequency of three articles in this review. Regarding the years of such publications, the year 2017 stood out with three articles, respectively.

Table II describes important issues identified in the selected studies related to the implications of pregnant women's access to prenatal care in the Brazilian prison system.

After analyzing the studies, it was possible to identify that prenatal care within

Figure 01- PRISMA diagram of studies included in the integrative review



Source: Research Data, 2022.

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the prison system does not occur as effectively as recommended by public health policies. Pregnant women deprived of liberty experience various difficulties in

their daily lives in accessing prenatal consultations. For a better understanding and discussion of the results, the following two (2) thematic categories were listed:

Weaknesses in the prison system related to prenatal care; Difficulties in accessing the health care network for pregnant women deprived of their liberty.

Table 1: Synthesis of articles according to database, author, title, periodical, year of publication and research methodology, João Pessoa, Paraíba, Brazil, 2022. (n = 08).

Nº	DATABASE	AUTHOR	TITLE	JOURNAL	YEAR	RESEARCH METHODOLOGY
1	LILACS	GALVÃO, MCB. <i>et al</i> ; ⁶	Lack of Assistance to Pregnant Women in Prison Situations	Cogitare Enfermagem	2013	Qualitative study
2	LILACS	SALES, AC <i>et al</i> ; ⁷	Health Care for Pregnant Women Deprived of Liberty: Integrative Review	Revista Baiana de Enfermagem	2021	Qualitative study
3	LILACS	PÍCOLE, RP <i>et al</i> ; ⁸	Pregnancy and Postpartum in Prison: Descriptive Study of Health Care	Revista Baiana de Saúde Pública	2014	Cross-sectional, observational study
4	LILACS	SANTANA, AT <i>et al</i> ; ⁴	Mothers in Prison: Experiences of Pregnant Women Facing Prenatal Care	Revista Baiana de Saúde Pública	2016	Descriptive exploratory study with qualitative design
5	LILACS	SILVA, JB <i>et al</i> ; ⁹	Women Deprived of Liberty: Narratives of Obstetric Dis(assistance)	Rev. min. enferm	2020	Qualitative study
6	LILACS	FERREIRA, LS <i>et al</i> ; ¹⁰	Perception of Inmates on Maternal Health Care in a Women's Penitentiary.	Rev. cuba. enferm	2017	Qualitative study
7	LILACS	DOMINGUES, RMSM <i>et al</i> ; ¹¹	Prevalence of Syphilis And HIV Infection During Pregnancy in Incarcerated Women and the Incidence of Congenital Syphilis in Births in Prison in Brazil.	Cadernos de Saúde Pública	2017	Incidence study / Prevalence study / Screening study
8	LILACS	FOCHI, MCS <i>et al</i> ; ¹²	Experiences of Pregnant Women in Prison Situations	Rev. eletrônica enferm.	2017	Descriptive qualitative study

Source: Research Data, 2022.

Table 2: Care implications related to prenatal care in the Brazilian prison system. João Pessoa-PB, Brazil, 2022.

No.	WHAT ARE THE CARE IMPLICATIONS RELATED TO PRENATAL CARE IN THE BRAZILIAN PRISON SYSTEM?
A01	Deficient and precarious assistance, and, at times, there is a lack of assistance; The precarious living conditions stand out.
A02	Lack of monitoring during pregnancy and lack of resources and medicines necessary for health care.
A03	Inadequacy of assistance, insufficient oncotic smear test and provision of guidance regarding breast preparation for breastfeeding.
A04	Technicality in prenatal consultations and lack of nursing assistance during prenatal care.
A05	Restricted access to exams and pharmacological treatments, pointing to the lack of prenatal care.
A06	They considered that the assistance was bad, as they were treated inhumanely.
A07	Inadequate health care provided in prisons, with low access to serological diagnosis of sexually transmitted infections, and low rate of implementation of preventive measures.
A08	It highlights the non-compliance with the right to health, due to overcrowding and precariousness in prisons, which is a serious public health problem.

Source: Research Data, 2022.

DISCUSSION

Weaknesses in the Prison System Related to Prenatal Care

In the studies analyzed, the profile of women deprived of liberty who experienced motherhood in the prison system was observed. Most of them have a profile occupied by young women, of childbearing age, with low education and low socioeconomic status. These factors constitute conditions for prenatal care, especially to analyze the vulnerabilities to which these women are being exposed.^{6,7,8,9,10,14}

Prenatal care is comprised of a set of strategies and behaviors that ensure adequate monitoring of gestational development, being considered an action of great relevance for maternal and child care. Inadequate provision of this assistance can lead to unfavorable outcomes for the mother and baby, therefore, the objective is to welcome the woman as early as possible, guaranteeing the health and well-being of the mother and her child until the end of pregnancy, through qualified and humanized care, minimizing inefficient conduct, through at least six consulta-

tions alternated by medical professionals and/or nurses.^{6,7,8,9,10,14}

Despite the importance of prenatal consultations, among the issues most highlighted in the studies in this review, the neglect of prenatal care stands out. Penitentiaries have prenatal programs that are practically non-existent and when they do have this service, they offer insufficient, unqualified and sometimes inhumane care, they start consultations late and have inadequate monitoring.^{11,12,13,14}

The study of Galvão and Davim⁶ shows that many women reported having had an average of only two consultations during their gestational period and the majority (77.8%) stated that they did not have a prenatal consultation during pregnancy. Despite the limitation of studies on this respective topic, this data is consistent with other studies, which highlight limitations in the number of prenatal consultations carried out in the prison system.

Fochi *et al.*⁷ corroborates by highlighting that some pregnant women had a reduced number of appointments for reasons of institutional security. In the study, it was found that which pregnant women would be taken for prenatal consultation were defined, criteria adopted according to the gestational risk and the severity of the criminal offense. This attitude is considered unacceptable and disrespects the rights of women in prison. Women in the prison system only do not have the right to freedom and all other rights must be guaranteed to them.

Difficulties in accessing pregnant women deprived of their freedom in the Health Care Network

Limited access to health services is one of the main factors present in the studies, which implies the lack of monitoring during pregnancy. Given the lack of health care, women start consultations late and inappropriately and report a lack of guidance on care during the prenatal period, breastfeeding and

breast care.⁷

It was possible to identify that women present major obstacles to scheduling appointments, whether with a doctor or nurse. They also face challenges in scheduling exams and carrying out rapid tests, such as the pregnancy diagnostic exam itself, this obstacle prevents the confirmation and early start of pregnancy during prenatal care, and presents difficulties in accessing the necessary medications during this period.¹⁰

A study shows that when women suspected they were pregnant, when they requested a diagnostic test, it was not available in the prison and it only arrived after a few months. In fact, some women even asked their family members for the exam. It is noteworthy that the delay in confirming pregnancy makes it difficult for women to access health programs, since a positive diagnosis of pregnancy is a prerequisite for transferring women to the special cell intended for pregnant women, women who have recently given birth and newborns.¹⁰

Demarchi *et al.* (2020), show that laboratory tests carried out during preg-

nancy were performed on 78.9% of the sample, but no results were received in a timely manner. Among pregnant women, 94.7% were vaccinated during pregnancy, but more than half did not use folic acid and ferrous sulfate. This highlights the lack of assistance that encompasses women in a comprehensive manner. The pregnant women also reported that the consultation was limited only to measuring the uterine height and listening to the fetal heartbeat.

The literature shows that the lack of police escort is a major obstacle to medical care in hospitals and public health centers. This limitation is emphasized due to the lack of staff necessary for the service to function properly. With the absence, precariousness and delay of this escort, vehicles and resources to meet the penitentiary administration's requests, emergency occurrences and scheduled appointments are jeopardized⁶.

CONCLUSION

It is concluded that women deprived of liberty often experience several limitations within the penitentiary system, mainly with regard to complete access

to health and dignified conditions for human survival. Inserted within a scenario that ignores their real basic and gender-related needs, they have inadequate environments for their accommodation, precarious food and difficulties in accessing health services. It was possible to identify that women who experience motherhood in prison receive insufficient and unqualified assistance, due to inadequate monitoring of prenatal programs.

The present study aims to awaken the eyes of society and the responsible authorities towards this public that lives at the mercy of invisibility, as well as contributing to better implementation of assistance through knowledge of the real implications that prevent the implementation of this assistance in an adequate manner. However, it is necessary to carry out studies that enable better investigation of the respective topic.

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