Health education in the community: knowing about the vulnerability in adolescents

ABSTRACT
Objective: to analyze the knowledge about risks and vulnerable situations among adolescents in community living. Method: this was an exploratory study with a qualitative approach, with 30 adolescents, from July to December of 2012, in the municipality of Santa Cruz/RN. The data analysis was anchored in the Categorical Analysis Theme. The study was approved by the Research Ethics Committee, under the protocol CAAE 0215.0.051.000-11. Results: two categories emerged after the analysis: 1) Vulnerability during adolescence: risks and fragilities in the community; and 2) Potentiality and fragilities during youth. Conclusion: the adolescents know the risks they are exposed to. However, there are major fragilities in their lives that can lead them to take risks.

Descriptors: Adolescents; Vulnerability; Primary Nursing.

RESUMO

Descritores: Adolescente; Vulnerabilidade; Enfermagem Primária.

RESUMEN
Objetivo: analizar el conocimiento sobre los riesgos y las situaciones de vulnerabilidad de los adolescentes en la vida comunitaria. Método: estudio exploratorio con un enfoque cualitativo, con 30 adolescentes, en el periodo de julio a diciembre de 2012, en el municipio de Santa Cruz/RN. El análisis de datos se ancló en el Tema de Análisis Categorial. El estudio fue aprobado por el Comité de Ética en Investigación, CAAE 0215.0.051.000-11. Resultados: dos categorías surgieron tras el proceso de análisis: 1) vulnerabilidad en los adolescentes: riesgos y fragilidades en la comunidad, y 2) los potenciales y las fragilidades de la juventud. Conclusión: los adolescentes conocen los riesgos que están expuestos, pero existen debilidades importantes en sus vidas que les llevan a los riesgos.

Descritores: Adolescentes; Vulnerabilidad; Enfermería Primaria.

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INTRODUCTION

The everyday situations experienced by society are numerous, reflecting directly on human relations, contributing significantly to their strengthening or not; especially within the family context. Adolescents deserve to be featured in this scenario because they have increasingly incorporated changes in behaviors and habits into their reality. Thus, policies and practices of attention for this clientele are needed because adolescence is a stage of life filled with inaccuracies and questions and a transitional period to maturity, which is defined as a link between childhood and adulthood.1-2

The Child and Adolescent Statute3 defines as adolescents those aged between twelve and incomplete eighteen years old. However, about the fulfillment of socio-educational measures, that law is applied to persons between eighteen and twenty-one years of age. During this phase, the following characteristics occur: search for identity, group tendency behavior, development of conceptual thoughts, singular lifestyle, acceleration and deceleration of physical growth, body composition changes, hormonal changes involving sex hormones, and evolution to sexual maturity accompanied by the development of male and female secondary sexual characters.1-2

The sociocultural construction of the adolescent category is characterized by a trajectory in the imaginary social context in which the adolescent is no longer a child but also not an adult yet. Sometimes, his childish behavior is expected, docile and easy going; other times, adult maturity, good judgment, and rationality are expected. Adolescents make up a portion of the population in greater vulnerability, especially those living under socio-economic risks.4

Based on the concept that vulnerable people are unable to protect their interests by not having attributes indispensable for the purpose such as power, intelligence, education, and resources, it is noticed that the adolescent is in an unfavorable position. We highlight that access to the media, education, and availability to face cultural barriers are important components to evaluate the condition of greater or lesser social vulnerability of an individual or a collective group.5

Vulnerability could be a result of different modes of insertion or exclusion to which children and adolescents are subjected, i.e., the problem is not restricted to a matter of social exclusion, but of socialization/individualization because it comes to respect adolescents and considering what institutions and forms of sociability they are capable of producing6. Thus, we felt the need to analyze the knowledge regarding risks and situations of vulnerability among adolescents in community living.

METHOD

This was an exploratory and evaluative study with a qualitative approach. A total of thirty adolescents, tended at the Nursing Clinic Salvando Vidas in Santa Cruz/RN, were randomly and based on accessibility, selected to participate in the study. The inclusion criteria were to be regularly enrolled in a State school from the municipality of Santa Cruz/RN, and within the age range between 12 to 18 years old.

A semi-structured form was used for data collection between July and December of 2012; the Technique of Content Analysis was used within the Categorical Analysis Theme.

Two thematic categories emerged after analysis and interpretation of the data: 1) Vulnerability during adolescence: risks and fragilities in the community; and 2) Potentiality and fragilities during youth. In regards to ethical aspects, the adolescents voluntarily participated in the study after signing an Informed Consent explained by the person responsible for all subjects selected in the sample.

The anonymity of the participants was protected by replacing their names with names of flowers. This study was evaluated by the Research Ethics Committee (CEP) from the Federal University of Rio Grande do Norte (UFRN) and approved under the protocol CAAE (Certificate of Presentation for Ethical Assessment) number 0215.0.51.000-11.

RESULTS AND DISCUSSION

Two thematic categories emerged after analysis and interpretation of the data: Vulnerability during adolescence: risks and fragilities in the community and Potentiality and fragilities during youth.

♦ Vulnerability during adolescence: risks and fragilities in the community

Vulnerability in children and adolescents is linked to social practices. About their interaction within family and community, they are often beaten by parents, suffer embarrassment on the part of teachers, and/or are disrespected by neighbors. In addition, many of the spaces founded with the purpose of protecting them, end up becoming reference sites for scandals and violation of...
Adolescents are vulnerable because of the transformations through which they pass between childhood and adulthood; they envision possibilities of power and self-control over their lifetime.

In relation to homeless children and adolescents, they use this space as a strategy for ensuring survival, being constantly exposed to potential social and personal risks characteristic of this environment. Once on the streets, young people experience its instabilities. Relationship sustained by violence, use of illicit substances, development of strategies for obtaining food and money, establishment of groups, use of social equipment, establishment of affective and sexual relations, among others, characterize the daily life and are also marked by gender relations.

In the following speech, the thoughts of the adolescents participating in the study about what living in the streets means is observed:

There are lots of parties, and the person may lose his life by mistake, he can be stuck in a fight even though we didn't have anything to do with it, if someone is sworn to die near you, you can pay for it. (CARNATION)

The social impact generated in these subjects shows the marks of the process of vulnerability experienced by adolescents and their families such as: unemployment, deprivation of basic aspects of survival, such as food and good housing conditions, violence, lack of social support, and prejudice are recurring issues in the speech of young people and can directly influence the ability of these families to carry out the functions of socializing elements for their children and of providing affective and material support.

About violence, it is known that it represents a problem expressed in various contexts and societies by inserting the individual into situations of social vulnerability. In the account of the participants, the aspects related to lack of security in their neighborhoods involve not only young people but the entire population.

There are thieves because of the lack of security; my school is messy, too much violence, nobody can go out alone after eleven o'clock pm because the bums are bad. (PANSY)
There are many thieves, a lot of bad people, also for being too much unstructured; I live here with a lot of fear and mistrust. (SUNFLOWER)

There is a lot of violence, theft, death. (TULIP)

Adolescents present the need for insertion into a group that provides emotional support to confront the uncertainties and inner conflicts that are common to this phase. In the absence of such support, associated with the factor of social inequality, the development of violent behaviors included in individual vulnerability is observed.11

♦ Potentiality and fragilities during youth

The implementation of public policies aimed at adolescents and their families promotes broad transformations of social and economic aspect for those involved in this process. These policies provide access to formal education, health services, recreational activities, development of talents and vocations, and work opportunities because situations with social lack of protection often deprive the adolescent of such access. 12

The school is an important place to work knowledge, skills, and behavior changes because it is a place where the adolescent remains the longest time of his day. Therefore, it becomes a place conducive and suitable for the development of educational activities, acting as such, in the different areas of human knowledge.1

This ideology is ratified by the respondents’ descriptions about the access that they have regarding education, leisure, and other situations experienced in their daily life.

The school is the most important […] I like talking to my friends, receive care from my parents because they are all in our lives. (TULIP)

I go to school, study a lot, I play, I read, I help my mother in the afternoon, I watch a movie when I come from school, and I go out to visit my relatives in the evening. (ROSEMARY)

I like to play a lot, I'm very fond of music, and also coming to school […] to study in college, to help my mom. (LILY)

I Study and play ball; it is very good. (NARCISSUS)

I do a bit of everything, walk, play, and go everywhere and I like being a teenager. (JASMINE)

In the context of homogenizing behaviors and lifestyles that characterize the contemporary society, to be ‘young’ means more than an age demarcation. To be young is to be new and innovative, designed for the future; youth is beauty, lightness, humor, responsibility, courage, boldness, and sex.13

When asked about this definition, the adolescents exposed, in the present study, what it is like to be young for them:

I play with my friends and then I go to school to study to become someone in life. (HYDRANGEA)

I love to go out […] there are parties […] walk in the squares, spend the weekend at my friends’ houses, go to the beach on vacation, it is always nice to enjoy life. (ROSE)

I play with my friends, also study […] I love myself, and I like being an adolescent, and I like the other adolescents […] I really like my school […] I love to play […] and to go to parties too […] like the affection of my mother, and also from my friends. (VIOLET)

The concept of youth is not presented as the same to all young people because information diffuses differently by social strata and are made contextually, making the idea of youth set from their experiences in particular ways in the various groups. 13 As observed in the following speech:

It is a little bad because adolescents sell and use many drugs, alcohol; there are lots of fights in the parties, […] it is very dangerous. (ROSE)

The fragilities present in the recreational types of activities offered to the community in the city in which the adolescents reside were questioned in this study. The difficulties to access leisure activities were observed after the analysis of speeches. In addition to this, the aggravation of vulnerability in which adolescents are inserted was understood in the following speech:

There are no playgrounds for sports in the neighborhood of paradise, public gyms, police station, and squares. (DAHLIA)

The situation of social inequality, poor income distribution, poverty and extreme poverty to which thousands of Brazilian families are subjected place them in the zone of vulnerability, hindering the construction of values in young people and adolescents. It is in this context of deprivation of economic and social order that adolescents living in the streets develop and build their history permeated by power relations marked by inequality.10

The family sets up as one of the aspects that make up the axis of the relational insertion in determining the form of the social existence of their children and adolescents. However, in the Brazilian context, marked by extreme social inequality and bad distribution of income, families have found difficulties to fulfill these basic tasks to its members as a

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result of the situations of vulnerability in which they find themselves.10

The sexual and social identity of each one of us is built based on the family, through worldview and values that we inherit from our parents.1 This influence is seen in the following speech:

The mother of the person is giving advice to her daughter to stay away from drugs, and if the daughter go party and have sex, she should tell the mother. (DAISY)

The social construction of the adolescent today is based on the process of individualization with peculiar dynamics according to the social segment considered. Although dependent on the parents or family members, due to the stretching of the schooling process and difficulties of insertion in the labor market, young people today begin to acquire autonomy increasingly early14; however, there is a social representation of youth as “irresponsible”, which leads to discrimination against many simply for being young. The distrust from adults on their capacity often lowers their self-esteem, making them feel disrespected and mistreated.7

The events involving “fights between brothers (sisters)” and “arguments with friends” are frequent for children and adolescents, which demonstrate difficulties in the relationship with peers5. As it can be observed in the following:

I don’t like my brother; he is very irritating. (HYDRANGEA)

I don’t like some people here at school because they are false, they pretend to be your friend but they are false behind your back. (VIOLET)

Arguments with parents, siblings, and friends are part of the transition from childhood to adulthood in which young people are passing, usually identified as a phase of rebellion. This somehow becomes important for their learning and personal growth.

Some life events can be stressful such as changes in family composition and transitions at school and with peers, however, in general, they constitute expected events in the human life cycle. These events can cause adverse effects to health and the social and psychological well-being of children and adolescents.9

CONCLUSION

On approaching vulnerability of children and adolescents, the tendency is to perceive them as victims, as people with needs that need to be tended. This condition throws the responsibility of forming active individuals who co-participate in the life of the community on the family, society, and State. Thus, the needs for investments to be applied in reducing situations of vulnerability that may threaten their welfare are outstanding.

The planning and development of health actions directed to adolescents who make the streets their privileged space of life pervades the understanding of the living conditions of thousands of marginalized in the social structure.

Health and education strategies favor the interaction between the educator and the learner through group dynamics aiming at shared learning and collective formulation of knowledge seeking, too, the acquisition of autonomy by adolescents in the care of their physical, mental, and emotional health.

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3117

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