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ORIGINAL ARTICLE

LIMITS AND POSSIBILITIES IN COPING VIOLENCE AGAINST CHILDREN AND TEENS

LIMITES E POSSIBILIDADES NO ENFRENTAMENTO DA VIOLÊNCIA CONTRA CRIANÇAS E ADOLESCENTES

LÍMITES Y POSIBILIDADES EN LA LUCHA CONTRA LA VIOLENCIA HACIA LOS NIÑOS Y ADOLESCENTES

Roberta Laíse Gomes Leite Morais[1], Zenilda Nogueira Sales[2], Vanda Palmarella Rodrigues[3]

ABSTRACT

Objective: analyzing the factors that affect the work of professional care network for children and adolescents in situations of violence. ***Method:*** this is a qualitative study, carried out in the Guardian Council, Specialized Reference Center for Social Assistance, Police Specializing in Assisting Women and Family Health Units in Jequié/BA, with 29 professionals of these services. The data were produced through interviews and analyzed by Content Analysis technique after approval of the research project by the Research Ethics Committee, CAAE: 00043.0.454.000-11. ***Results:*** structural inadequacy of services, insufficient and lack of professional training, lack of investment in public management, motivation of staff to provide friendly environment; emotional involvement of professionals, fear of reprisals. ***Conclusion:*** specific actions with lack of integration between the institutions and difficulties in referrals, requiring investment of public administration, professional training and intersectoral coordination in addressing violence against children and adolescents. ***Descriptors:*** Violence; Child; Adolescent; Defense of Children and Adolescents; Public Policies.

RESUMO

***Objetivo*:** analisar os fatores que interferem no trabalho de profissionais da rede de atenção a crianças e adolescentes em situação de violência. ***Método*:** estudo qualitativo, desenvolvido no Conselho Tutelar, Centro de Referência Especializada em Assistência Social, Delegacia Especializada no Atendimento à Mulher e Unidades de Saúde da Família em Jequié/BA, com 29 profissionais destes serviços. Os dados foram produzidos por meio de entrevistas e analisados pela Técnica de Análise de conteúdo após a aprovação do projeto de pesquisa pelo Comitê de Ética em Pesquisa, CAAE: 00043.0.454.000-11. ***Resultados*:** inadequação estrutural dos serviços, número insuficiente e falta de capacitação profissionais, falta de investimentos da gestão pública, motivação dos profissionais para propiciar ambiente acolhedor; envolvimento emocional de profissionais, medo de represálias. ***Conclusão*:** ações pontuais, com falta de integração entre as instituições e dificuldades nos encaminhamentos, requerendo investimento da gestão pública, capacitação de profissionais e articulação intersetorial no enfrentamento da violência contra crianças e adolescentes. ***Descritores*:** Violência; Criança; Adolescente; Defesa da Criança e do Adolescente; Políticas Públicas.

RESUMEN

Objetivo: analizar los factores que afectan el trabajo de la red de atención profesional para los niños y adolescentes en situación de violencia. ***Método:*** es un estudio cualitativo realizado en el Consejo de Guardianes, Centro de Referencia Especializada en la Asistencia Social, la Policía Especializada en ayudar a las mujeres y las Unidades de Salud de la Familia en Jequié/BA, con 29 profesionales de estos servicios. Los datos fueron producidos a través de entrevistas y analizados por la técnica de Análisis de Contenido después de la aprobación del proyecto de investigación por el Comité de Ética en la Investigación, CAAE: 00043.0.454.000-11. ***Resultados:*** inadecuación estructural de los servicios, numero insuficiente y la falta de formación profesional, la falta de inversión en la gestión pública, la motivación del personal para proporcionar un ambiente acogedor; la implicación emocional de los profesionales, el miedo a las represalias. ***Conclusión:*** acciones específicas, con la falta de integración entre las instituciones y las dificultades de referencias, requieren una inversión de la administración pública, la capacitación profesional y la coordinación intersectorial para abordar la violencia contra los niños, niñas y adolescentes. ***Descriptores:*** Violencia; Niño; Adolescentes; Defensa de los Niños, Niñas y Adolescentes; Políticas Públicas.

[1]Nurse, Master Teacher of Nursing and Health, Graduate Program in Nursing, State University of Southwest Bahia/UESB - Campus Jequié. Jequié (BA), Brazil. Email: robertalaise@bol.com.br; [2]Nurse, Nursing Doctorate, Professor, Graduate Program in Nursing, State University of Southwest Bahia/UESB - Campus Jequié. Jequié (BA), Brazil. Email: zenysalles@gmail.com; [3]Nurse, Master Teacher of Public Health, Graduate Program in Nursing, State University of Southwest Bahia/UESB - Campus Jequié. Jequié (BA), Brazil. Email: vprodrigues@uesb.edu.br

INTRODUCTION

In Brazil, violence is constituted as the third cause of death in the general population and the main for the deaths of individuals up to 39 years old. In addition to the large increase which causes mortality, violence appears as a public health problem because of the large magnitude, severity and social impact this has on the individual and collective health.[1]

While anyone can do or suffer a violent act, the most affected are women, children, young, old, gay and disabled people, usually caused by social relations that are established inequality, power, discrimination, prejudice and dependence.[2]

This research aims to approach about the violence affecting children and adolescents, although they have their rights guaranteed in specific legislation, suffer serious consequences when the violation of these rights, discussing the limits and possibilities for developing the work of professionals network attention in fighting violence.

The Violence Surveillance System and Accidents (VIVA) of the Ministry of Health reported in 2008, 8.766 cases of violence, of which 2,075 have referred to children and 2.389 adolescents, noting that the most affected people in these age groups were the women (63% and 75%, respectively).[3]

Based on the data recorded in the Notifiable Diseases Information System (SINAN) in 2011, it is clear that violence against children occurs most often at home, with the primary aggressor parents (39,1%). Regarding the type of violence prevailed notification of physical violence (40,5%), followed by sexual violence (20%).[4]

The Federal Constitution from 1988, in its Article 227, established the rights of children and adolescents, which underpinned the creation of the Child and Adolescent (ECA), created by Law No. 8069 of July 13rd, 1990. this Statute deals with the right to life and health of children and adolescents as well as evidence that no child or adolescent may be subjected to any form of negligence, discrimination, exploitation, violence, cruelty and should be punished according to the law, any attack, whether by action or omission, of their fundamental rights.[5]

Among the main consequences of violence for children and adolescents are the social, emotional and psychological problems manifested through the adoption of health risk behaviors such as alcohol and other drugs, prostitution, teenage pregnancy and mental health problems such as anxiety, depressive disorder, aggressive behavior and even suicide attempt.[6]

Violence against children can have devastating consequences for those who suffer, traumatizing and leaving deep scars, since the experiences these phases form the basis for adulthood.

The fighting violence against children and adolescents requires the joint action of various professionals and various sectors of society. In this sense, we can say that working with violence is influenced by several factors, which involves emotional issues from the people involved, to broader issues related to public policies.

Another highlight is the need for addressing some challenges for the prevention and control of violence against children and adolescents. One such challenge is to raise awareness and training of professionals, it is important that they can understand the meaning, manifestations and consequences of violence in this age group and are able to diagnose and refer the cases treated. Another challenge is the need for coordination and training partnerships between the various sectors that work with children and youth[7], which is the formation of a network of protection and assistance.

For the construction of the network is essential to the restructuring of services and the training and motivation of professional services that deal with violence in order to increase its carrying capacity, listening, guidance and treatment of persons in situations of violence.[8]

This study provides practical contributions to raise the reflections of professionals who deal with protection and assistance of children and adolescents in situations of violence, to the development of a networking with a view to ensure the security of the recommended provisions in legislation and protection systems force.

It is also intended with this study, raise awareness among health professionals, education, social development and assistance agencies and protection for the need to develop prevention and control of violence against children and adolescents, in partnership and network, prioritizing dialogue in conflict resolution, and public managers of health, education, security, justice, defense of human rights and social movements, emphasizing the (re) targeting public policies for prevention and promotion, which help to prevent and contain violence, from actions that promote equality and the exercise of human rights.

Given these considerations this study aims to:

- Analyzing the factors that affect the work of professional care network for children and adolescents in situations of violence.

METHOD

This study was extracted from the Master's thesis "Violence against children and adolescents: the professionals' perception", presented to the Postgraduate Program in Nursing and Health of the State University of Southwest Bahia, Jequie - BA, 2012. Is it a qualitative research, with descriptive and exploratory approach, held in Jequie, Bahia, in the following services that work with the assistance and/or protection of children and adolescents in situations of violence: the Guardian Council, the Center of Reference of Specialized Social Assistance (CREAS), the Specialized Police for Assistance to Women (DEAM) and four Family Health Units (USF). The DEAM was included, considering that the municipality does not have a special division to meet the cases of violence against children and adolescents, which are served in that body.

During the research, the said municipality had 18 FHUs, but some were adopted inclusion criteria to define those that would be part of the study. Thus, the following criteria were established: complete skeleton staff, according to the criteria recommended by the Ministry of Health; teams with less than six months of experience; FHU with 80% to 100% of registered and accompanied by families, with only one team in the urban area and where it had no reports of work on violence against children and adolescents. Based on these criteria, were then selected four FHUs.

Study participants were 29 professionals from multidisciplinary teams of protection and assistance, as follows: three members of the Guardian Council; a social worker, two psychologists and a lawyer of CREAS; two police investigators, a clerk, a delegate and a psychologist, the DEAM; four nurses, a doctor, two dentists, two nursing technicians and eight Community Health Agents (ACS) of the FHU. The choice of these informants was made intentionally, based on the objective and the interest and availability of professionals.

Seeking to guarantee the anonymity of the participants, the identification of the lines in the text was done by the letter E followed by the number corresponding to the interview (E1, E2, E3 ...).

To collect data, semi-structured interview was conducted randomly and individually, with the aid of a tape recorder, after the project was approved by the Research Ethics Committee of the State University of Southwest Bahia, under the protocol number 064/2011 and prior signing of the Informed Consent Form (ICF) by the interviewees, fulfilling all the ethical principles established by Resolution 196/96 of the National Health Council, applies to the period of the research.

Then the units of meaning abstracted from speeches of the subjects were analyzed. The raw data received treatment based on the content analysis, more specifically thematic analysis.

Thematic analysis is to discover the communication of meaning, whose presence or appearance frequency means something to the desired analytical objective, usually used to examine opinions of motivations, attitudes, values and beliefs.[9]

For the organization and processing of data we attempted to follow the following steps:[9] pre-analysis, exploration of the material and the processing of results, inference, interpretation.

In the pre-analysis was performed the organization itself, by building the corpus, floating reading and preparation of all materials. In this study, the corpus consisted of 29 interviews.

In the operation phase a more exhaustive reading of the interviews was carried out to seek what it showed more significant, and preparing them for the next steps. We chose to use the theme for delimitation of units of meaning, which were cut by word, sentence or paragraph, as semantic criteria. There followed, then the grouping and classification of thematic units, as well as their number. Thus, the material was grouped into three categories, from semantically equivalent units: organizational structure, psycho-emotional factors and networking, analyzed and discussed based on authors who deal with the issue.

RESULTS AND DISCUSSION

Violence against children is not a simple management, but rather, is a complex task that is influenced by factors that can promote or hinder its development. In this study, the report of professionals allowed the identification of three major groups of these factors: organizational structure, psycho-emotional factors and networking.

♦ *Organizational structure*

The services that work with the phenomenon of violence need to be provided with adequate organizational structure, offering physical resources, materials, sufficient financial and human so that they can develop an effective work.

In this category, respondents reported not having this structure, highlighting lack of material, human and financial resources.

> *[...] structure. [...] When we talk about structure, everyone speaks of human structure, everyone speaks of equipment [...] are nine professionals about the State to meet a population of 160 000 inhabitants [...]. (E1, E2).*
>
> *[...] doesn't have that own feature to make this trip. [...] This issue is the same financial issue, the resource. (E11).*
>
> *Another issue that disturbs and hurts too much is the large flow of work really and the amount that is too small. [...] We work with [...] an extremely low frame. [...] the demand really is too large. (E26).*

The reports show that the lack of an appropriate structure and the reduced quantitative of professionals can hinder the development of the work of the health care network in fighting violence against children and adolescents.

The literature attests to the lack of infrastructure of services that deal with violence, pointing issues such as work overload due to the great demand on the quantitative small professionals, lack of budgetary resources, poor material, and the lack of facilities physical and low pay, as a limiting factor of their actions, thus confirming the findings of this study.[10-13]

Another negative aspect reported by study participants referred to the lack of support from the government, evidenced by the failure of social projects for children and adolescents and the small number of shelters and day care centers in the city. These issues not only act harming the prevention and protection, but can also promote or set up new forms of violence.

> *Today we only have a shelter. [...] It would take another, because the demand of child violence is too large. [...]. (E10).*
>
> *[...] the issue of executive power, which I think should propitiate, longer with us, looks more to that side. [...] the municipality would have to make more actions [...]. Matter of also have more designs. [...] We only have a shelter. Matter of nurseries also, I think it's needed [...]. (E11).*
>
> *[...] absence of public power, [...] the town doesn't have a foster home at the lowest, the factor of children who are attacked by parents, family members, does not have a specific place to take the kids. (E27).*

It can be seen from the reports that the lack of investment in public policies for addressing violence against children and adolescents, appears as a limiting factor to support the work of professionals in the care network.

A study conducted in the city of Feira de Santana (BA), assessed the implementation of the actions of the National Program of Integrated and Referential Actions on the political and institutional integration and the role of healthcare network for victims of sexual violence, pointing out the lack of support from public policy as one of the main difficulties[11] Not only in some municipalities, but in Brazil as a whole, there is a lack of effective public policies that support the creation and especially the maintenance of preventive and treatment programs necessary to promote improvement and development of effective techniques to face this problem.[14: 144]

In addition to these factors, the lack of specific training of professionals who assist children and adolescents in situations of violence has also been reported significantly.

> *[...] lack of training of professionals [...] because work on the CREAS isn't working anywhere. [...] should more attentively the qualification of its professionals. (E24).*
>
> *Violence against children is a violence that requires, in a way, a right treat with care the child, not just anyone can answer a child thus has to have certain training. (E27).*

The care for children and adolescents in situations of violence requires specific knowledge, which normally is not part of vocational training, reaffirming the need for training of professionals in this context.

Studies are consistent with the findings of this research by highlighting that professionals also reported not feeling prepared to deal with the problem of violence against children and adolescents, thus reinforcing the need to invest in training.[10,15]

Several other authors claim the unprepared professionals to identify and resolve cases of violence, lack of training, causing these often a feeling of helplessness and frustration.[11-13,16-20]

It is noteworthy that when these capabilities exist, are punctual, uncontinuous and not conducted specific groups, preventing the occurrence impact on professional conduct.[21] To be effective in its implementation, it is important to consider

the existing knowledge and such knowledge gaps[17], and thus act trying to undo them.

It is important to include this issue in the training of professionals who work directly or indirectly with children and adolescents[22], because then they will be better prepared to contribute to the prevention, diagnosis and treatment of violence against children and adolescents. More than that, it is ethical, moral and legal obligation of all be qualified professional to act early, preventing the recurrence and the increase of the consequences caused by aggression.[18]

A study in Campo Grande (MS) reveals that professionals feel the need not only to have a physically organized work structure, but a structure that encourages the exchange of experiences and the exposure of feelings that arise during the work with violence.[19]

Despite all the reported structural deficiencies, respondents seek to overcome the difficulties, through the availability and motivation, turning your desktop into a warm and cozy place, which is very important to work with violence.

> *We try to be the most suitable environment possible, [...] made a toy library, [...] tries to make the station a more welcoming space [...] both the professionals and the space itself, we take care to leave as pleasant as possible. (E3, E27).*
>
> *[...] the factor that helps is goodwill here coordination, [...] I think human resources here from CREAS, specifically, have a good time and seeing this goodwill colleagues, [...] I think this is a motivating factor. (E24).*
>
> *[...]We have some professionals that, somehow, they welcome and embrace the cause [...]. (E10).*
>
> *The issue of team that we have here [...] a very good communication [...] stay favorable environment to work for us. (E11).*

The reports show that the creation of a playroom at the station aimed to make the cozy atmosphere, in addition, goodwill, involvement and team communication are initiatives and actions taken by the professionals who assist children and adolescents in situations of violence in order to minimize the difficulties experienced in the developed actions and provide a more welcoming assistance.

♦ *Psychoemotional factors*

The phenomenon of violence is able to produce different feelings both in those who experience it as those who deal with people in situations of violence. It should be noted that the experience with violence in contemporary life generates mixed feelings of attraction, repulsion, fascination and fear.[23] Other sensations like hatred, shame, guilt may also arise, requiring the person who deals with violence take a humanized posture; Moreover, the violence is not something that most professionals like to come across.[20]

Psycho-emotional factors have a strong influence on protective actions for children and adolescents in situations of violence. The following units of analysis showed some feelings generated by work with violence:

> *I think she is pretty strong. [...] We get, sometimes even half shocked, half amazed. (E2, E24).*
>
> *It is very sad [...] very sad really. It is horrible. It's a very sad thing [...]. It's really sad. (E8, E10, E12, E21).*
>
> *Can't mention enough hurts in my heart, I don't. (E19).*

The participants noted that are emotionally shaken, with sorrow to deal with situations of violence against children and adolescents, demonstrating emotional involvement with the problem.

The reports also showed that professionals may suffer reprisals from attackers and / or your family, generating great sense of fear. This can be further compounded by the lack of support and security by the relevant bodies.

> *[...] not having a safety, an endorsement [...] we don't have, in fact, safe. [...] I've had several counselors here who have been threatened, that they slap in the face. (E12, E18).*
>
> *Should have an organ to protect [...]. As a colleague of mine had that [...] it was picking up in the area. Was threatened and all. (E15).*
>
> *[...] has no protection. That's why I just talk, nothing more, moreover, [...] no counsel, the Secretariat sent to me. (E16).*

The lack of protection in occupational causes, a sense of insecurity, enabling many times, they minimize the scope of its actions in relation to the control of violence.

For ACS, for its proximity to family and visibility in the community, the threats may happen more often considering working in remote communities, areas where there are points of drugs, intimidating and prevents in certain situations, exposing the situation of violence. Also, they are afraid that their involvement with problems of families of their area may interfere with the day to day work.

> *And we also works in a community that is a little bit dangerous, we get scared of them wanting to do something with us. [...] And have you even restricted in doing, because actually will compromise your work [...] (E5).*

> *[...] for us being a very concerned in the community, we often want to making a complaint and we cannot appear. [...] because, you see, the family falls on us. Everyone gets scared, for being an area also that there are many points of drugs. [...] interfere in our work [...] (E6).*
>
> *I can't get there and that family to know that I denounced because she won't take me more at her house (E14).*
>
> *[...] but in a way, so we don't show up, because you don't give the biggest problem (E15).*
>
> *[...] I was penalized almost throughout the community by the fact denounce. [...] I don't get involved in anything. [...] If I saw him, I didn't say anything. Even for unit I do not speak, because I was penalized and nobody solved anything, nobody took the blow that I took (E16).*

The lack of protection experienced by the professional in handling situations of violence, stating that the complaint of a case of violence caused reprisals from the aggressor family and the community was highlighted by one of the interviewees. Added to this fact, highlights the omission of the USF team, which did not seek to endorse this professional, allowing the same does not get more facing violence, insecurity experienced in the environment job work.

The literature also confirms the great vulnerability of the ACS are exposed, as they live in the same area as the aggressors, these areas often dominated by drug trafficking, and more an impediment to action of these .[10, 19, 24]

Many studies have emphasized the fear of offending or legal involvement in cases of violence as an argument to justify the low performing actions to control this issue, allowing the omission of professionals.[10-11,17,24]

It is noteworthy also that the professionals show anxiety, resistance and ambiguity when speaking of violence against children and adolescents, and the fear of involvement with this fact and the fear of reprisals were some of the probable reasons for the behavior of professionals.[15]

This fear can be related to the absence of an effective institutional support.[17] However, such support should not be only technical, but also a process of listening and emotional preparation suitable.[20,25]

Psycho-emotional factors influenced not only professionals in their actions, but people in situations of violence and their families may also have affected their decisions by fear, stigma in relation to the psychologist and/or the police, lack of privacy, among other issues causing often also the person's failure to situations of violence or of his family.

> *[...] It is very difficult to a female victim, she have to talk with male researchers. [...] you won't feel at ease (E1).*
>
> *[...] the fact of being a bully precinct. Many children arrive here with fear. [...] the stereotype of police let them a little affected [...] 'And now, my mother will be arrested, because I said that my mother had me beaten?' [...] has a difficulty also because of the stereotype of the psychologist, [...] a lot of people think 'ah, who's going on a psychologist's mad'. So, we have marked calls, we see that the child is starting to evolve, but there the father 'Oh, my son is not crazy, doesn't need therapy' (E3).*
>
> *[...] many people are afraid of talking about, are scared of commenting, and came until we talk. When we go, they try to conceal (E7).*

The focus was an important gender issue that interferes with the complaint process, the fact that the person in situations of violence being female and he is a male, which requires overcoming androcentric attitudes, rooted in society that define unequal power relations on the social roles established between women and men in society, and authoritarian attitudes, prescriptive and judgment in the context of services which assist people in situations of violence, as highlighted in the speech of one of the interviewed by mentioning that many people conceal the violence in dealing with the professional.

The family omits and refuses to accept the work of professionals, because they feel unprotected, have also been reported in the literature.[19,15]

♦ *Network*

Violence against children is in a complex phenomenon and the multiple causes, which calls all the sociocultural and economic levels of society. Moreover, as all the experience of the childhood reflected in adulthood, violence can have devastating physical and psychosocial consequences in the short, medium and long term.[15,26]

Given the above, which reflects the complexity of the demands of handling of cases of violence against children and adolescents facing this problem requires multidisciplinary and interdisciplinary interventions, with joint and joint work of various sectors in the search for comprehensive care.[8,15,23,26-28]

In this direction, the networking for professional services that assist people in situations of violence may favor the

development of a more effective work against violence. As noted in the literature, study participants recognized the importance of multidisciplinary work and network for action against violence.

> *[...] What can help is the partnership, the network. When the network works fine, because there's no way we work in isolation [...], i.e. all integrated network (E25).*
>
> *What help are partnerships. [...] It helps and strengthens greatly the work of police station (E3, E26).*
>
> *[...] the network. The whole network that does the job happen, it helps us [...]. (E4, E11).*
>
> *We work together if we couldn't play our part. [...] all competent organs those also protect the child from the situation or victim of this rape that she spent (E12).*
>
> *So, partnership, we work in partnership (E14).*

The concept of health care network can be used to define other network settings, which is defined as a set of services interconnected by a collaborative and interdependent action, with common goals and with a single mission.[29]

Authors conceptualize networks of peace as a set of organizations acting pivotally in their territories, to overcome violence and the establishment of a culture of peace.[8]

Anyway, regardless of the established configuration, networking needs to be guided by joint and common goals. In this sense, corroborates with authors who point out that the network is not only the grouping of services or organizations, it needs subsidies that give meaning to the intertwining of their actions.[30]

As the following units of analysis, one can see that the professionals understand the network just as a group of institutions working with violence but do not demonstrate the intrinsic interconnection to the formation of the network.

> *What helps is that the complaints. Today's tip line that helps. Has the Dcfs has the CREAS. So, these partnerships help enough (E2).*
>
> *We have a good relationship with the CREAS. [...] We have prosecutors, thanks to God, active, a prosecutor who he, daily, he communicates with us and we with him. [...] The issue of CREAS also, which is much a partner (E11).*
>
> *We just have to count on the CREAS [...] (E15).*

The reports show that the partnership and communication is established between the services are part of a networking, but the actions are timely and are not developed in a coordinated way, which would facilitate the work setting greater scope for further action to fight violence against the child and the adolescent.

Other units of analysis, however, already reflected this lack of integration between the institutions, revealing the deficiency of network protection to violence in the city.

> *Some referrals are made for some certain organs and, sometimes, this monitoring is not done properly. The joint sometimes is not a positive point [...] (E9).*
>
> *[...] Although the network, as we always say, the network is stuck, it's missing a lot on that network (E11).*
>
> *[...] the Dcfs has partnered with us; it's hard to [...]. I think it should have more partnership with DEAM, with the Council, but does not have this (E15).*
>
> *The support of CREAS doesn't have much. When else does a complaint take eight, nine days to go. (E16)*
>
> *[...] more effective partnership with social services, with psychologist, [...] If you'd like a NASF [Nucleus for Support to Family Health], had also turned to some of the drugs that causes various problems (E18).*
>
> *I think if you have more integrated everyone. For example, in the PSF [Family Health Program] even we never received any lecture, no progress on this. [...] should have more direct contact with the people here and not there. I think it's too loose. [...] Articulation has not (E20).*
>
> *We need to realize within that process also. In the city of Jequie, I see the network as something that she needs to sew. So, she needs to be spliced and through even the political interest, governmental interest (E25).*

The testimonials highlighted difficulties in reference and counter established between the services which assist children and adolescents in situations of violence, demonstrating weaknesses in this joint, and the lack of interest of public management to strengthen the integration and networking between.

The literature confirms the difficulty of existing integration among the agencies call to violence. Some studies show that institutional practices against violence are often fragile, fragmented, ad hoc and limited to specific sectors.[19,21,23]

Are recognized some problems as obstacles to the work of establishing a network, such as differences in understanding, fear of loss of power conferred by traditional labor relations to certain organs, role conflicts, the difficulty of sharing power and rotation of personnel the members of the network services.[26-7]

In turn, some successful experiences can serve as an example and motivation for new development initiatives of safety nets to violence against children and adolescents.

Study had the experience of two cities in southern Brazil seeking, through the network at work, the protection and the prevention of violence against children and adolescents, making this a public issue, the responsibility must be shared by various sectors of society (government, private companies, non-governmental organizations, among others).[27] Another study reported the experience of an intersectoral and multidisciplinary supervision, characterized by open and classroom discussion of violence by professionals from various sectors, mediated by a supervisor, which is a successful strategy used for networking.[20]

These examples contribute to the visibility and break the silence surrounding the majority of cases of violence, thus demonstrating that despite ominous, violence against children and adolescents has solution.[27]

It should be noted, therefore, that the construction of a network involves a more intense movement to the aggregation of different social actors.[27] Noteworthy is also some requirements for effectiveness, network activity, such as the use of a common language; horizontality of sectors; decision making based on the principles of equality, democracy, cooperation and solidarity; job sharing, resources and information; opening for dialogue, with effective communication between the actors; representation of various institutions with interdependence and autonomy of the same; willingness to incorporate new partnerships and sustainability. In addition, the network must provide a timely care, with safe and effective services in suitable times and places.[8,17,20,29-30]

Being a relatively new action strategy, it is necessary that professionals are able to capture the essence of networking and know how to act in an appropriate manner.[20]

Finally, think of the network, is not thinking about the formation of a new service, but a new concept of work that seeks to articulate different knowledge, more effective interventions for addressing violence against children and adolescents.[8,20,27]

FINAL REMARKS

This research allowed identifying the factors that interfere in the work of professionals who assist children and adolescents in situations of violence and provided an opportunity a better understanding of the context in which the phenomenon of violence.

In this perspective, the results showed that the practitioners identified three groups of factors that enable and/or limit the work with violence: organizational structure, psycho-emotional factors and networking.

Regarding the organizational structure, there is a lack of physical infrastructure, economic, human and material of different sectors and little action the government to facilitate the prevention and combating violence against children and adolescents. Also, was in focus the lack of specific training for professionals, extremely important factor, since the work with violence is very complex, requiring a technical and psycho-emotional preparation.

Despite all the structural shortcomings, it was revealed that professionals through the availability, motivation and good interpersonal relationship, can transform your desktop into a warm and welcoming space, favoring in this way, good work performance and the reception of children and adolescents in situations of violence and their families.

Among the psycho-emotional factors, fear was a feeling often mentioned both by professionals and by the person of violence and their family situation. This feeling was compounded by the lack of support and security by the relevant bodies.

Coping violence requires proper handling of the problem, being indispensable working together and articulated in various sectors, ie, a networking is required. However, despite the recognition of this importance, this study found no longer exists in the city an effective network protection to children and adolescents in situations of violence.

Finally, identify the factors that interfere with work with violence against children and adolescents raises a number of reflections and provides an opportunity to realize that professionals need support and training for more effective action and adequate development of his work, with support and involvement public management in the effective network configuration, and despite portray a local reality, can be extended to the actual situation in many municipalities in Brazil.

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Corresponding Address

Roberta Laíse Gomes Leite Morais
Universidade Estadual do Sudoeste da Bahia
Departamento de Saúde
Rua São Benedito, 46
Bairro Campo do América
CEP 45203-180 – Jequié (BA), Brasil