EXPERIENCE OF WOMEN IN PRISON DURING PREGNANCY
VIVÊNCIA DE MULHERES ENCARCERADAS DURANTE A GESTAÇÃO
EXPERIENCIA DE LAS MUJERES ENCARCELADAS DURANTE EL EMBARAZO

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ABSTRACT
Objective: analyzing the experience of women in prison during pregnancy. Method: a descriptive study with a qualitative approach, with data generated by semi-structured interviews in August and September 2011, starting from the guiding question: “What was for you being pregnant within this prison?” with nine incarcerated women who met the inclusion criteria. The data were analyzed according to the testimonies of the participants according to thematic analysis. The research project was approved by the Research Ethics Committee, with CAAE 0109.0.051.000-11. Results: three categories emerged from the responses: 1 Family and affective relations; 2. Colleagues and the prison and 3. Penitentiary agents. Conclusion: the study revealed that the relationship between these women inside the prison was marked by estrangement from family, mainly due to socioeconomic factors. Descriptors: Obstetric Nursing; Pregnancy; Prisons; Women's Health.

RESUMO
Objetivo: analisar a vivência de mulheres encarceradas durante a gestação. Método: estudo descritivo, com abordagem qualitativa, com dados produzidos por meio de entrevista semi-estruturada, em agosto e setembro de 2011, partindo-se da questão norteadora: “O que foi para a senhora conviver uma gestação dentro deste presídio?” com nove mulheres encarceradas, as quais atenderam a critérios de inclusão. Os dados foram analisados de acordo com as falas das participantes conforme análise temática. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa, com CAAE 0109.0.051.000-11. Resultados: das respostas emergiram três categorias: 1. Família e relações afetivas; 2. Colegas de presídio e 3. As agentes penitenciárias. Conclusão: o estudo revelou que a relação entre essas mulheres dentro do presídio foram marcadas pelo distanciamento dos familiares, principalmente devido ao fator socioeconômico. Descriptors: Enfermagem Obstétrica; Gestação; Prisões; Saúde da Mulher.

RESUMEN
Objetivo: analizar la experiencia de las mujeres encarceladas durante el embarazo. Método: estudio descriptivo, con abordaje cualitativo, con los datos generados a través de entrevistas semi-estructuradas en agosto y septiembre de 2011, a partir de la pregunta orientadora: ¿Cómo era para la señora la gestación dentro de esta prisión? nueve mujeres encarceladas que cumplieron los criterios de inclusión. Los datos se analizaron de acuerdo con los testimonios de los participantes a través del análisis temático. El proyecto de investigación fue aprobado por el Comité de Ética en Investigación, con CAAE 0109.0.051.000-11. Resultados: tres categorías surgieron de las respuestas: 1. Familia y relaciones afectivas; 2. Los colegas y la prisión e 3. Agentes Penitenciarios. Conclusión: el estudio reveló que la relación entre estas mujeres dentro de la prisión estuvo marcada por el alejamiento de la familia, debido principalmente a factores socioeconómicos. Descriptors: Enfermería Obstétrica; Embarazo; Prisiones; Salud de la Mujer.

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INTRODUCTION

Brazil had not consolidated until recently the national policy of health care system encompassing the prison population and the actions performed by professionals working in prisons were not systematized according to the guidelines of the Ministry of Health (MOH), getting mostly in charge of specific initiatives of local managers linked to justice.\(^1\)\(^2\)

Since 1988 the Federal Constitution (FC) and the Penal Execution Law (LEP) 1984 in Brazil, persons deprived of their liberty have the right to health, education, work, leisure, and security, and social security, protection of motherhood, childhood and assistance to helpless. It is known that these rights do not work properly, affected by the prison environment, exacerbating the security of those which are corrupted by public and social policies. In 2003 the partnership between the Ministry of Justice (MOJ) and the MOH’s National Health Plan was established in Prisons (PNSSP) to arrange access for prison populations under the tutelage of the State to health actions of the Unified Health System (SUS) in full. In 2005 the Ministry of Education (MEC) included this system in its schedule with the Program Educating for Freedom (PEL).\(^1\)\(^2\)

The PNSSP advocates public policies affecting the prison population with the mental health services and women’s health such as antenal care, ensuring access to care for complications in pregnancy and childbirth, control of cervical and breast cancer referral to treatment of affected by these diseases, diagnosis and treatment of Sexually Transmitted Diseases (STD)/AIDS, contraception care, immunization, postpartum care, health education and interpersonal relationship.\(^2\)\(^3\)

Regarding interpersonal relationships, it can be considered as convenience of the intellect, which is not tangible, but palpable existence of a therapy that interrelates, and the results of this relationship, providing convenience and based on the life of interaction with inmates. Interpersonal relationships are regarded as exchanges between individuals, mediated by feelings, although these interfere in relations. It is important and relevant to those involved in the relationship remaininga frank and a sincere dialogue, expressing their perceptions, fears and frustrations to prevent detachment, incommunicability and level of dissatisfaction for the caregiver and the cared.\(^4\)

So that the prisoner has these legal guarantees there are provided for rights in the Universal Declaration of Human Rights, the American Declaration of the Rights and Duties of Man and the Resolution of the United Nations (UN), which provides rules for the treatment of the same. Men and women imprisoned in institutions are invisible to society; however, for women this invisibility is more serious. As a prisoner, woman and in numerical difference is less in number compared to the male prison population, by gender differences, being related to the space that are reserved in society.\(^5\)\(^6\)

The Brazilian penitentiary system is sparse for serving the sentence of a pregnant woman who is deprived from liberty found in CF, the LEP and the Statute of the Child and Adolescent (ECA), with no harmonious interpretation of the aforementioned devices, ie no systematic to be followed. The prison as a place of constant stress in the lives of people in the prison system is pressure, involving physical and psychological ailments. With pregnant in prison, stress is added to the stirring emotions of pre-existing condition in the pregnant state, causing emotional instability, leading to pregnant attached to a living even more difficult.\(^7\)

In reality, the feelings of stress generated by prisoners and pregnant women, subvert its interior, featuring in her mind defeat, guilt, frustration, insecurity, fear and shame. Psychological injuries, most often irreparable, have a troubled relationship by the lack of protection, be it their partner, family and government, generating anger and low self-esteem.\(^8\)

Prison is not a nice and comfortable place, however the society and the state cannot neglect people in jail, treating the prisons as punishment to people, who probably will not return to social life with worsening crime, forgetting that individuals in prison suffer from lack of the prison system, and in the near future return to the home living.\(^9\)

The disregard for the health care of pregnant in prison can be checked on a report on women prisoners, noting that if both the mother and the fetus has the right to prenatal care is not respected in prisons in Brazil, and only discover they seropositive carriers and other communicable diseases, such as syphilis and other STDs, in childbirth. Even getting medical care, there was the precariousness of that provision and consultation to prenatal care that should be at least monthly, happens only once during the entire pregnancy, which after consultation, the mother back to the hospital only when it comes into labor.\(^10\)

Given this deficit and precarious reality, it can be inferred that the health care of incarcerated women, especially pregnant...
women, in certain prisons nonexistent, making this real problem of public health, which are at risk of becoming ill with no chance of assistance, exacerbating them when you consider that most of these women come from a low socioeconomic status and without access to health care.

Based on the above, the theme of the pregnant woman arrested for being little discussed in the literature, and especially of the most significant experience in the life situation of women in prison, against the backdrop of an environment that contributes in whole or in part, to the emergence and hatching disease or its manifestation, given that prisoners are unable to, on their own seek another type of care, especially with regard to the duty of the State to provide skilled assistance in view of the current situation of this negligence law does a study that addresses this issue by making it relevant to produce knowledge on the subject is necessary.

The relevance of the study will be based on the facts and findings to promote the company and the competent authorities about the reality of pregnant women in the Brazilian prison system, calling attention to public policies geared to the same and that they are not reduced to the position of victims or aggressive, but first of all seen as women, breaking fundamental paradigms of institutional actions and improvements in health care.

From the summarized studies, we chose to conduct this research on the experience of women arrested during pregnancy, and, considering all these aspects, it was elaborated the question: “What are the experiences that these women experienced during pregnancy before their situation of prison?”

The motivation for this research came from difficult situations as real existing knowledge within the walls of a women's prison, and few studies addressing this issue. The choice of the theme emerged from experiences while participating in the research group Surveillance to Health of the Program Master / Doctorate of Nursing Department of the Federal University of Rio Grande do Norte (denf / UFRN) and working in the area of women's health, more specifically with pregnant women and mothers from the time of graduation, increased interest in the subject and contact with this population. Given the above, we defined the following objectives:

- Analyzing the experience of incarcerated women during pregnancy.


This is a descriptive study of qualitative approach developed in Female Criminal Complex Dr. João Chaves (CPFDJC), Natal, RN, Brazil. Data collection occurred in August and September 2011, with 135 prisoners in 14 cells of the penal complex, which also has problems of structural order of overcrowding and absence of a cell designed for pregnant women and their newborns. In fact, pregnant, postpartum and newborn lived in the same cells with the others, including those suffering from infectious diseases.

The health team within the complex is composed of only a social and two practical nurses working without supervision of a nurse assistant. Every health care of pregnant women occurs on external services to the prison, or the Family Health Strategy (FHS), Public Hospitals Maternity State, County and University.

All women who experienced pregnancy inside the prison participated in the study. We adopted the following inclusion criteria: women who experienced pregnancy within CPFDJC, regardless of being together with your child or not; meet in closed regime, and how exclusion: women who experienced pregnancy in another penitentiary institution, those who were still experiencing pregnancy, or not agreed to participate, even within the inclusion criteria. Initially, it would tell with 14 women in the inclusion criteria, however, due to deletion, five were excluded from the study: one for still being pregnant, another to have experienced pregnancy at another institution and three are in system semi-open at collection.

The first contact with the site of the research took place in April 2011 with the deputy director, who directed the head of the Department of Nursing of the Federal University of Rio Grande do Norte (UFRN) a statement pointing out the security measures that would be taken to the researchers during the activities with inmates and data collection. The Head of the Nursing Department sent a memo to UFRN Asset Security Division (PSD), asking for an opinion about the sufficiency of the safety measures adopted by the direction CPFDJC. In response to the memorandum, the deputy director of DSP/UFRN enrolled understood that the
measures were sufficient for the purpose it was designed for. Because it is outside the Campus UFRN academic activity, it was necessary the elaboration of a Security Protocol in accordance with Resolution No. 162/2010 of the Council of Education Research and Extension (CONSEPE) UFRN containing the Proposed Activity, preliminary hazard analysis and disclaimer.

After release of DSP/UFRN became a new contact with the management of the institution confirmed that the activities would be developed with research participants as previously established timetable. In this, four meetings were planned with women who experienced pregnancy in CPFDJC, Saturdays of the month of May 2011, between 09:00 to 10:30 hours. The meetings were part of a strategy of rapprochement with the 14 women who had a pregnancy within the Complex in a room reserved for these meetings with the advisor and graduate student research.

As a result of the implementation of resolution 196/96 of the National Health Council (CNS) 11, sent to the Secretary of State for Justice and citizenship (SEJUC) and the direction of the Penal Institution (DIP) a letter requesting the completion of research in the establishment. After approval from the Secretary and the institution, the project was submitted to the Research Ethics Committee (CEP) UFRN approved without outstanding with CAAE 0109.0.051.000-11 and protocol number 253/2011.

To obtain the information, used a script structured interview with closed questions and one open, divided into three parts: the first and the second consisting of socio-demographic and obstetric variables, respectively, both with the purpose of characterizing the participants; and, finally, the third with a guiding question: “What was for you to experience a pregnancy within this prison?”

With the assent of the CEP / UFRN was initiated research, firming up individual contact with each participant explaining the purpose of the study, use of the recorder and that the interviews would be in a private room available for the management of the institution. It was emphasized, with respect to the confidentiality of the conversations and anonymity, that they would not receive anything and would have no burden at the time of the interviews; also informing those on the possibility to discontinue participation in the study at any time without damage to their assistance in prison, if that were the wish of the same. There were also informed that in order to protect the real identity would be identified by names of flowers with the acquiescence of all. Was read the disclaimer Informed Consent Form (ICF) and then signing the same was requested when the woman agreed to participate. The recorded interviews were transcribed and typed in full in Microsoft Word application by a graduate student.

The data was through the Content Analysis Bardin12, which is to seek to know what is behind the words on which leans. Data were analyzed obeying three stages: pre-analysis, in which the interviews were propagated for an organization should be obtained from the data collected; material exploration, regrouping all the material is divided into similar groups, always around the context of the study. Finally, treatment of the results and interpretation of data yielding a central theme: the experience of women in situations of incarceration during pregnancy, knowing the originating thematic categories, namely: 1 - Interpersonal Relationship; 2 - Feelings that permeate the pre pregnancy woman; 3 - Lack of health care of incarcerated pregnant women. Each category was subdivided into subcategories. In this survey we opted for theme 1 (interpersonal relationship) who gave birth to three subcategories: family and intimate relationships; colleagues from prison and penitentiary agents.

RESULTS AND DISCUSSION

● Featuring the participants of research

The age range was between 19 to 25 years old, unmarried (66.7%), from the State of Rio Grande do Norte, low level of education; 66.7% have not completed primary education and 33.3% average. Family income was around minimum wage (55.5%) and 33.3% had no income. The average number of pregnancies was three, and 33.3% experienced pregnancy for the first time. The average number of living children was two and, in relation to abortion, three reported having been through this procedure; one reported having been pregnant in prison, the others were already pregnant when they were arrested. The prenatal visit during pregnancy as prisoners, 77.8% denied and who participated in the consultation, the average was two.

These data corroborate a study among women incarcerated in the Maximum Security Women's Prison in the northern zone of São Paulo from March 2003 to December 2004 with 358 women who were part of the Penitentiary Complex Carandirú. Was identified that women were disadvantaged sections, low education and proportional wages and a less than minimum wage, so educational and
emotional precarious life with early loss of parental protection, physical and sexual violence, among other.\textsuperscript{13}

After the characterization of participants there were analyzed three subcategories, namely: family and intimate relationships; colleagues from prison and penitentiary agents, category Interpersonal relationship that women held inside the prison.

- **Subcategory 1: family and relationships**

When analyzing the speeches of the participants of the study, we observed the indicator affective relationships in two directions, one side marked by the support of families and the other by helplessness. In this sense, the words of the interviewees below exemplify about the support received from the families during the period of pregnancy:

- **My family at any time abandoned me, or me, or my daughter, all weekend my sister was here** (Carnation);
- **I had my family assistance, every week had a visitor and the fair; my family helped me a lot, and that gave me strength** (Lily).

When Lily in her speech mentioned my family helped me a lot and it gave me strength, shows that the support received was support for coping with pregnancy in prison, despite all the difficulties and characteristics that the system currently has.

The family and social support are essential for the conservation of maternal mental health in relation to the children and the establishment of a support network during pregnancy and puerperal period becomes even more relevant in women prisoners, considering the particularities of biopsychosociocultural order that permeate living in the prison system.\textsuperscript{14}

This reality family helplessness is evidenced in the statements below:

- **It was difficult because my family gave me certain contempt due to my addiction [drugs] and also did not accept the pregnancy, and he arrested and I prey, and I have no support from my family** (Poppy);
- **My aunt who raised me weren't coming to visit me because my family does not accept anything wrong, it is very difficult for me here in jail** (Gardenia).

Given these statements, it is observed that the lack of family in the female incarceration plus the condition of being pregnant is regarded by women as difficulty coping with pregnancy in prison, generating negative feelings of abandonment, loneliness and depression during pregnancy.

In the life of the pregnant woman, whether it be your first pregnancy, teen or not, the family is a safe haven, providing emotional support, education, economic and social essentials during this period, contributing to decreased anxiety, depression, anxiety and fear during pregnancy.\textsuperscript{15}

It was also observed that family relationships are difficult because of the socioeconomic factor:

- **When I was pregnant my family comes once a month because it was far away, then there was no way to come every week, comes once a month when he received the money and conditions is limited to come** (Lilac);
- **My mother lives in the interior, far from here, in white sand, so it was very difficult because it only comes once a month** (Gardenia).

This fact was also confirmed with the report of CEJIL\textsuperscript{10}, considering that in public chains of Brazil health care is deficient in certain chains and a cell is converted into makeshift infirmary with medical equipment, but without skilled professionals, since the factor socioeconomic influence to the distancing of family relationships of women prisoners, for lack of funds to travel to the prison.

Agrees with the results of CEJIL\textsuperscript{10}, a research developed in the city west of Bahia with incarcerated women regarding health care available, 63.64% of these respondents have never received any care and the previous six months, 36.36% confirmed this care, with 75% due to routine and 25% cardiovascular emergencies.\textsuperscript{16}

Regarding the child’s father, and, like most adolescents were single (66.7%), had no stable relationship before being arrested, the lines are marked by the absence of the father during the pregnancy:

- **Her father also accompanied her at any time, just when we smoke, do drugs together, but after I got arrested and had my daughter, he didn’t want to know** (Carnation);
- **The boy’s father did not follow the pregnancy because he’s also stuck, when I was pregnant he even sent a person to drop some things, diapers and money, but then disappeared, didn’t send anything else** (Iris).

One consequence of the increase of the incarcerated female population is the loss or weakening of family relationships. The inmates relate changes in homes as abandonment of husbands or partners; break the bond with family members due to stigma and suffering caused; increasing the responsibility of older children who go home and take care of younger siblings; concerning with the entry or residence of the children or familiar crime.\textsuperscript{8}
Given this subcategory research showed that during the imprisonment of pregnant women, affective relationships are weakened, caused mainly by socio-economic factor and social stigma, generating feelings of abandonment and loneliness that can come with depression in these women. In most cases the child's father did not participate this time, since the relations with these women were not stable, and imprisonment was one of the factors contributing to the abandonment.

- **Subcategory 2: colleagues from prison**

The relationship with the colleagues from prison was also expressed in the lines showing appropriate relationship with the other:

- My relationship with the prisoners is great, I like them all, and I have no quarrel with any of them. (Anemone);
- I was very well received by other prey, I was kind of spoiled because I'm pregnant, and I was very well received. (Lily)

However in other lines was possible to detect these try to maintain good relationship with the other prey as a way to avoid conflicts:

- I get along with everyone; make friendship with all, to a have to go through things in here which I see a lot of passing and have to go to the punishment. I stay in my quiet corner, don't go out of the cell, is difficult. (Lilac);
- I've never had friction with other prey, we discussed, but because of bullshit, I avoid, I don't want to go to punishment (Iris).

The following lines already reveal the difficulties of coexistence between preys:

- Many things I sought, but others came up to me, like the contempt of my colleagues, their prey because you can't leave the prison because it says it was cabueitar [deliver] are judging you, you may have gone to a doctor, but went to cabueitar (Poppy);
- The criticism that I received were of the prey, at first, who was here for the medical sector and had a strip search [magazine] inside, so the guilty would be who would pass so been stalked. I've faced the whole courtyard, said they wanted to rip my leg, my head, others the eyeball, I slept with my own cell partners who slept with an iron on his hip and said he was going to stab me (Gardenia).

In the speeches of Poppy and Gardenia, we observe the degree of difficulty to ensure social interaction among these women in prison with other prisoners, in view of the fact that they are pregnant and need to leave the prison for medical consultation or any procedure outside reach the eyes of other inmates, becoming a constant threat to these.

Incarcerated pregnant women are more prone for sensitivity gained from pregnancy to being victims of psychological torture, since divide a cell with other women with addictions, habits and different lifestyle and need to control the most diverse situations, since the presence of noise, noise, confusion and intrigue inherent in a chain.

In general, the interpersonal relationships among pregnant women and other prisoners are distrust and suspicion compromising the bonds of friendship. Some maintain appropriate relationships and come to be pampered, but will never address the lack of true friendships outside the prison and families; others prefer to stay in your corner that living can be the best possible, thus avoiding conflicts and punishments. However, certain pregnant felt persecuted and threatened by the need to be absent from the prison, going to be considered “cabuetas” by the other prisoners, exacerbating the coexistence and relations marked by mistrust.

- **Subcategory 3: The penitentiary agents**

This subcategory shows the lines of participants relationships with the penitentiary agents during the period when they were pregnant:

- Many agents are professionals feel some concern, give attention to the prey (Poppy);
- When I first came here treated me well, I had no problems with the agents, my behavior is good, and I don't want to go to punishment (Iris).

Their discourse must show that penitentiary agents prepared and meet the inmates, seeking the return of these to the outside world through resocialization. In Article 1 of the LEP provides that the purpose of criminal enforcement is to “provide conditions for harmonious social integration of sentenced and interned.”

They understand that not only punishes the individual but guide you into prison, giving advice and assistance in obtaining resources able to return the convict to the social environment.

Another finding of this research concerns the power relationship established by the prison staff in a hierarchical status are the prey. Certain prisoners were abused psychologically and physically, plus submission to situations of constant humiliation experienced during the period when they were pregnant, as noted in the speech:

- I had a discussion with an agent, got to denounce her to the judge. She went so far as to threaten me, said it was tenured civil servant and authority no one would take her out of here, I felt threatened, scared of her...
and at the same time she likes me, hit me in the face, yelling several times; When was the shift of it I was always scared, scared of my punishment increase(Poppy);

The people who live here is marked, there are several situations like humiliation. There are some agents who treat you like trash, like I’m nothing, and that’s tricky, because you’re a human being just like her(Lilly).

Frequent and threatening conflicts between prison officers and prisoners are a reality in prisons, and who pays or suffer the consequences are the prey. Largely conflicts could be resolved through talks; however the agents have the power and privilege under the four walls to exercise the power to punish, without being punished.

It stands out in the speeches of the participants experienced situations moments of contempt on the part of the professional front pregnant condition of women:

Once I was in pain all night, then the agent didn’t want to take me, because I had already gone to the night before and it solved my problem and said it was not to have a baby because I was 7 months, but I said: woman, I’ve got a very strong pain! Had the girls beat grid to power her take me (Lilac);

I was worried when I went to have my baby. I called in the grid and they thought he was lying, that I wasn’t going to have the girl at the time. And I had to put the outfit for the agent see I was pouring the liquid, so I can go for motherhood (Anemone).

The statements of Lilac and Anemone reveal situations unprepared and even contempt of prisons in understanding and respecting the condition of being a woman and being pregnant in CPFDJC agents, since pregnant, generally during this period undergoes physical changes, hormonal and emotional.

According to the above in this subcategory, it could be seen that the relationships developed between the trapped pregnant women and prison officers are marked by relations of power. On one side, the prisoners try to keep stable behavior to avoid punishment, the other are recorded accounts of humiliation, abuse and lack of preparation to meet the specific needs of pregnant women. Thus, it is believed that ensuring working conditions and safety for prison staff, coupled with adequate training with an emphasis on gender specificity, as one of the pillars for the immediate restructuring of the prison system is required.

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FINAL REMARKS

Based on the proposed objective of the research, it was found that the situation experienced by pregnant women trapped in CPFDJC is difficult since there is no health service in the institution with doctors and nurses to treat and care for these women. The service, when it occurs, is accompanied by nursing staff on an ad hoc and isolated manner, indicating the virtual absence of specific actions to meet the demands of the same.

There is no systematic monitoring in prenatal, delivery and postpartum, it worsened by the lack of police escort vehicle availability and difficulty in making appointments in accredited with the SUS.

It is verified that the physical structure of the prison was not built based on the specifics of the pregnant woman. There is no specific place for women remain the pregnancy period and meets your needs. Socioeconomic factors also influenced the weakening of affective relationships. In other cases, family support was crucial for coping with pregnancy in prison, helping to overcome obstacles imposed by the system.

We agree, therefore, that while the subject is poorly researched is recurrent in the Brazilian reality. This study recognizes the difficulties facing the complexity of the topic, but allowed visualization of the life of a pregnant woman in the prison world. Identified the main health needs of this population; detected the presence of obstacles to meeting their needs. The research is relevant in that it can stimulate and instigate, from the production of knowledge, reflections and discussions between the various stakeholders and government agencies in order to restructure and ensure the effective implementation of a public policy for incarcerated pregnant women.

The challenge lies in the organization of attention to the prison health and adoption of management mechanisms that include actions for the guaranteed constitutional rights. It is recommended that state and local membership intersectoral strategies aimed at the qualitative and quantitative expansion of health care to the pregnant woman incarcerated, promoting volley in care managers, ensuring effective, comprehensive, and resolving humanitarian actions.

It is relevant and troubling reality found in CPFDCJ deserving a different look, while the nurse as an adjunct to care for women in the prison system, especially to young people of
childbearing age. As that woman deprived of the right to liberty, health is also compromised, interfering with the development of a healthy pregnancy. Therefore the presence of nurses in adopting a humanized model for quality of care, the democratization of power relations and recognition of rights and governmental practices is needed to achieve the expected effectiveness in welcoming woman in pregnant puerperal cycle.

It is further proposed work promoting continuing education aimed at preparation and improvement of professional CPFDJC so that they understand the specificities of women prisoners, especially pregnant women, to act in view of guaranteeing human rights.

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