

Violation of children's and adolescents' rights – the profile of a southern state in Brazil

Mariucha Ramella Marcon Nemer, Bruna de Souza Nogueira, Fernanda do Nascimento de Lemos Campos, Márcia Cristina da Silva, Morgana Ducatti Alves and Luiz Fernando Lolli

Departamento de Odontologia, Centro de Ciências da Saúde, Universidade Estadual de Maringá, Avenida Mandacarú, 1550, 87080-000, Maringá, Paraná, Brasil. *Author for correspondence. E-mail: maru.marcon@gmail.com

ABSTRACT. The rights of children and adolescents are provided by law and it is the duty of the State, family and society to care for them. Health and education professionals are responsible for reporting suspected or confirmed cases of rights violation. This study aimed to investigate the prevalence and qualification of violation of children's and adolescents' rights in the State of Paraná between 2009 and 2014. A descriptive and observational quantitative study was carried out based on the records of the Child Protective Services in Paraná, accessed through the Information System for Childhood and Adolescence (SIPIA). A total of 129.123 violations of rights were found. Among those cases, the right to familiar and communitarian companionship stands out with the greatest number of violations, followed by the right to education, culture, sports and leisure. Mothers were found to be the main aggressors, followed by fathers, and sexual violence/abuse was the most prevalent type of violence. In conclusion, there was a significant amount of violation of children's and adolescents' rights in the State of Paraná during the period covered by this research, and it has increased over the years. Besides, we found out that there is a predisposition of gender and age group for each variable analyzed.

Keywords: child abuse; human rights; child advocacy; legal liability.

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Introduction

Children's and adolescents' rights are listed in the Federal Constitution. The State, together with family and society, must provide such groups with dignity and protection. The Brazilian Child and Youth Statute (ECA) has created a Rights Assurance System (SGD), whose model establishes a comprehensive partnership between governments and civil society in order to elaborate and monitor the execution of all public policies regarding children and adolescents. The aforementioned system is sustained by three foundational aspects, namely 'promotion of rights', 'defense' and 'social control'. The categories of rights sustained by ECA are 'life and health', 'freedom, respect and dignity', 'familiar and communitarian companionship', 'education, culture, sports and leisure' and 'professionalization and protection at work'. Therefore, the violation of any of these rights demands intervention.

By evaluating the current situation of the policies brought by the Statute, we can state that the commitments made through the law represent progress. Yet, ineffectiveness in terms of operation is considerable (Rosemberg & Mariano, 2010). Putting all that into practice is not an easy task. It demands the engagement of the State and multiple actors, and has a great political and ethical dimension (Conselho Federal de Psicologia [CFP], 2009). In that context, Child Protective Services are in charge of assisting children and adolescents, protecting them whenever it is necessary.

Health professionals play a pivotal role in cases of children's and adolescents' rights violation due to the fact that those cases may be strongly connected with labor issues (Braun, 2002). Any violation of one's bodily integrity may require assistance by such professionals, which makes them important in detecting and dealing with a violation case. That includes mandatory reporting in certain situations.

Violation of children's and adolescents' rights is widely discussed. Being aware of legislation and the mandatory need of reporting is not the only requirement when it comes to health professionals. They are expected to deeply understand violence as a phenomenon, its peculiarities and how it is produced. The aim of this study is analyzing prevalence of children's and adolescents' rights violation in the State of Paraná, categorizing violation, besides associating it with age group and gender variables.

Material and methods

A descriptive and observational quantitative study was carried out based on the records of the Child Protective Services in the State of Paraná. The data were accessed through the Information System for Childhood and Adolescence [SIPIA] (1997). Data collection was done in digital media between August and September, 2015. We considered information related to the years of 2009, 2010, 2011, 2012, 2013 and 2014, and the research analyzed the following variables:

- 'gender';
- 'age group';
- 'violated right';
- 'violated right – right to life and health';
- 'violated right – freedom, respect and dignity';
- 'violated right – freedom, respect and dignity – physical violence';
- 'violator'.

The data collection process was performed by an examiner, who was previously trained by a specialist in Forensic Dentistry. The data were organized with the Microsoft Excel program and processed by using Bioestat 5.0. Statistical analysis was carried out by the chi-square test (χ^2) contingency table C or Fisher's exact test, with a significance level of 1% ($p < 0,01$).

Results and Discussion

From 2009 to 2014, 129.123 cases of children's and adolescents' rights violation were registered in Paraná. The data collected by this study show a raise in the number of cases over the years (Figure 1). The following figure is composed of 6 graphs that represent the increase in the number of cases registered in the Information System for Childhood and Adolescence (SIPIA), in Paraná.

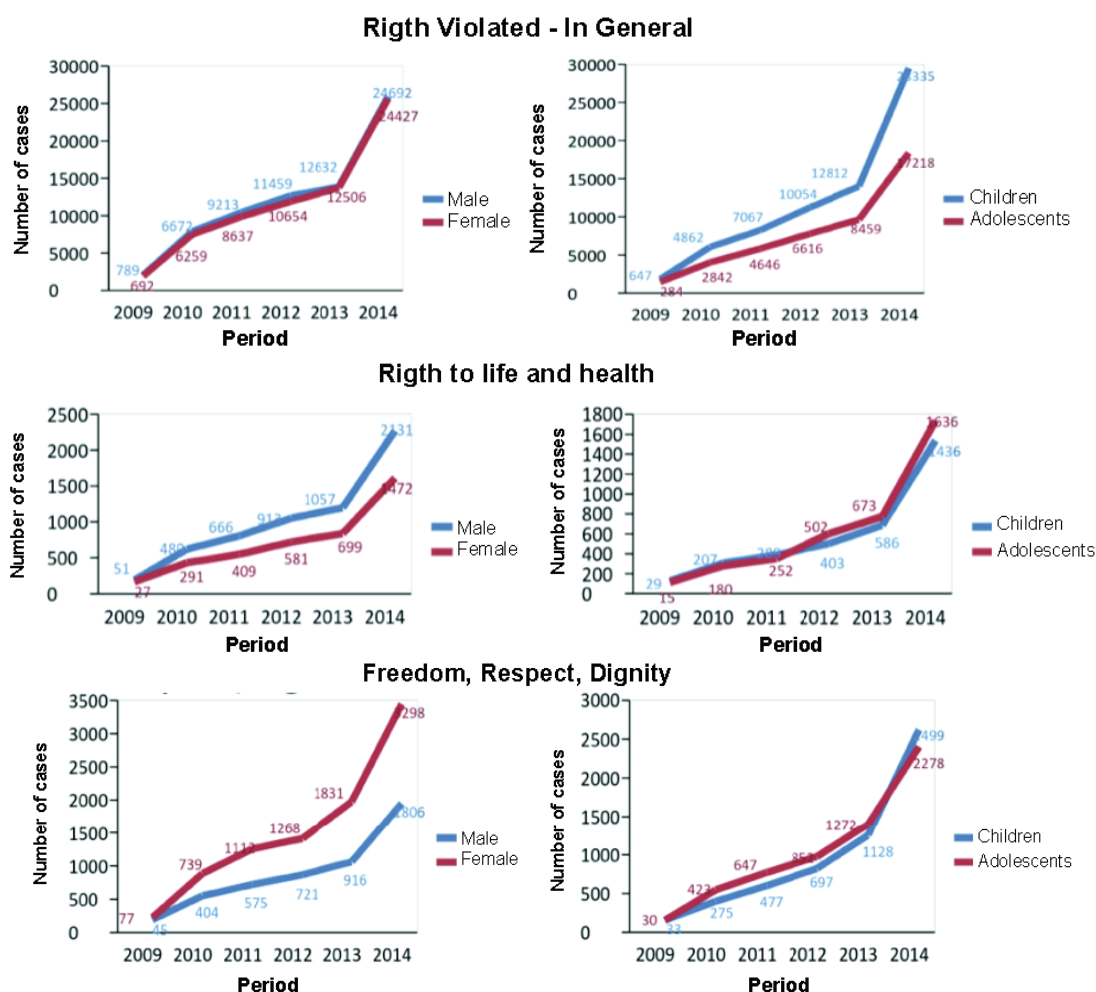


Figure 1. Historical series of violated rights of children and adolescents in the State os Paraná in the 2009-2014 sexennium (SIPIA, 1997).

Table 1 shows the data related to violation of the 'right to life and health', associated with gender. In that context, we can see that most violation cases were associated with the male gender. Table 2, in its turn, establishes a connection with 'age group', and shows that adolescents are more likely to have their rights violated, except when it comes to violation of the right to 'education, culture, sports and leisure', which is more prevalent among children. As for the sub variables, they were mostly associated with children.

Table 1. Association between 'violated right' and 'gender' focusing on the 'right to life and health' variable in the cases of violation of children's and adolescents' rights in the State of Paraná from 2009 to 2014.

VIOLATED RIGHT	2009			2010			2011			2012			2013			2014			Total		
	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value
FAMILIAR AND COMMUNITARIAN COMPANIONSHIP	275	245	0,8700	2725	2576	0,8100	3917	3704	0,7500	4514	4235	0,7200	5269	5197	0,8720	9878	10107	0,0440	26578	26064	0,1230
RIGHT TO LIFE AND HEALTH	51	27	0,0360	480*	291	<0,0001	666*	409	<0,0001	913*	581	<0,0001	1057*	699	<0,0001	2131*	1472	<0,0001	5298*	3479	<0,0001
Inadequate health care service	7	3	0,5370	66	33	0,3900	49	38	0,2990	62	581	<0,0001	71	42	0,5780	147	114	0,3700	402	269	0,8170
Offensive actions towards life and health	10	5	0,9200	189	95	0,1990	330	177	0,2280	415	245	0,4360	544	333	0,3600	994	608	0,0480	2480*	1463	0,0063
Lack of specific actions for preventing diseases and promoting health quality	3	0	0,2900	11	8	0,6980	9	2	0,1700	15	11	0,7200	18	13	0,8100	30	46*	0,0006	86	80	0,0257
Food and nutrition insecurity	3	1	0,5770	37	39	0,0200	30	19	0,9180	27	21	0,4960	28	18	0,9260	51	43	0,3400	176	141	0,0830
Lack of health care service	19	8	0,6300	129	72	0,6100	198	114	0,6280	318	213	0,6190	261	195	0,2500	688	459	0,6150	1613	1061	0,9700
Irregular practices in health premises	0	1	0,3544	1	2	0,3000	3	2	0,9280	2	2	0,6490	4	1	0,3660	13	10	0,7980	23	18	0,5770
Damage to life and health due to actions or omission	9	9	0,2200	47	42	0,0800	47	57*	0,0008	74	50	0,7500	131	97	0,4270	208	192*	0,0059	516	447*	<0,0001
EDUCATION, CULTURE, SPORTS, LEISURE	346	278	0,3600	2398*	2028	0,0030	3365*	2814	0,0001	4429*	3765	0,0006	4596*	4036	<0,0001	9168*	8074	<0,0001	24302*	20995	<0,0001
FREEDOM, RESPECT, DIGNITY	112	136	0,0170	980	1318*	<0,0001	1177	1659*	<0,0001	1357	1890*	<0,0001	1595	2506*	<0,0001	3299	4659*	<0,0001	8520	12168*	<0,0001
PROFESSIONALIZATION AND PROTECTION AT WORK	5	6	0,6000	89*	46	0,0009	88*	51	0,0060	246	183	0,0230	115*	68	0,0007	216*	115	<0,0001	759*	469	<0,0001
TOTAL	789	692		6672	6259		9213	8637		11459	10654		12632	12506		24692	24427		65457	63175	

*Preference; Fem = Female. Source: SIPIA (1997).

Table 2. Association between 'violated right' and 'age group' focusing on the 'right to life and health' variable in the cases of violation of children's and adolescents' rights in the State of Paraná from 2009 to 2014.

VIOLATED RIGHT	2009			2010			2011			2012			2013			2014			Total		
	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value
FAMILIAR AND COMMUNITARIAN COMPANIONSHIP	174	142*	<0,0001	1643	1440*	<0,0001	2698	2311*	<0,0001	3394	3055*	<0,0001	4640	4125*	<0,0001	10434	8115*	<0,0001	22983	19188*	<0,0001
RIGHT TO LIFE AND HEALTH	29	15	0,6140	207	180*	0,0001	289	252*	0,0013	403	502*	<0,0001	586	673*	<0,0001	1436	1636*	<0,0001	2950	3258*	0,4150
Inadequate health care service	4	0	0,2103	31	32	0,5270	40	26	0,2680	42	38	1690	65*	36	0,006	164*	83	<0,0001	346*	215	0,0739
Offensive actions towards life and health	3	2	0,6738	16	29	0,0227	26	92*	<0,0001	46	198*	<0,0001	80	388*	<0,0001	210	997*	<0,0001	381	1706*	0,9250
Lack of specific actions for preventing diseases and promoting health quality	1	0	0,6667	4	8	0,1680	3	0	0,1539	13	6	0,0380	9	13	0,0990	42	27	0,0200	72	54	0,0200
Food and nutrition insecurity	3	0	0,3059	52*	15	0,0002	37*	7	<0,0001	37*	8	<0,0001	37*	8	<0,0001	82*	9	<0,0001	248*	47	<0,0001
Lack of health care service	8	9	0,1760	60	73*	<0,0001	129	102	0,5350	190	225	<0,6700	234*	181	0,0005	653*	1421	<0,0001	1274*	1011	<0,0001
Irregular practices in health premises	1	0	0,6667	1	0	0,5361	1	3	0,2652	2	0	0,1150	3	1	0,2540	14	8	0,1130	22	12	0,0454
Damage to life and health due to actions or omission	9	4	0,5524	43	23	0,780	53*	22	0,0049	73*	27	<0,0001	158*	46	<0,0001	271*	91	<0,0001	607*	213	<0,0001
EDUCATION, CULTURE, SPORTS, LEISURE	363*	67	<0,0001	2372*	526	<0,0001	3237*	1107	<0,0001	4967*	1615	<0,0001	5953*	1748	<0,0001	12779*	3589	<0,0001	29671*	8652	<0,0001
FREEDOM, RESPECT, DIGNITY	80	58*	0,0068	637	676	<0,0001	835	944*	<0,0001	1163	1245*	<0,0001	1633	1812*	<0,0001	3654	3638*	<0,0001	8002	8373*	<0,0001
PROFESSIONALIZATION AND PROTECTION AT WORK	1	2	0,1700	3	20*	<0,0001	8	32*	<0,0001	127	199*	<0,0001	16	101*	<0,0001	32	240*	<0,0001	187	594*	<0,0001
TOTAL	647	284		4862	2842		7067	4646		10054	6616		12828	8459		28335	17218		63795	40065	

*Preference; Child = Children; Adol = Adolescents. Source: SIPIA (1997).

The data presented by Table 3 refers to 'violator' and 'gender'. Statistically, females are more likely to have their rights violated by grandparents, siblings, stepfathers, uncles/aunts. When it comes to males, on the other hand, violators are more likely to be the mother or father.

Table 3. Association between ‘violator’ and ‘gender’ in the cases of violation of children’s and adolescents’ rights in the State of Paraná from 2009 to 2014.

VIOLATOR	2009			2010			2011			2012			2013			2014			Total		
	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value
Grandparents	8	7	0,9000	72	106*	0,0046	123	143	0,1700	133	143	0,2490	194	199	0,6740	341	413	0,0200	871	1011*	0,0005
Siblings	2	4	0,3690	29	42	0,0820	32	71*	<0,0001	69	101*	0,0040	74	99	0,0450	137	203*	0,0007	343	520*	<0,0001
Stepmother	4	4	0,9200	22	35	0,0570	22	28	0,3600	33	29	0,8000	37	57	0,0320	101	104	0,9450	219	257	0,0579
Mother	190	173	0,8500	1956	1758	0,1480	2967	2717	0,0379	3412	3093	0,3240	4114	3916	0,2500	7696	7724	0,4200	20355*	19381	0,0075
Stepfather	17	12	0,4670	116	155*	0,0066	94	219*	<0,0001	136	273*	<0,0001	202	384*	<0,0001	367	651*	<0,0001	932	1694*	<0,0001
Father	100	87	0,6729	1238	1121	0,2800	1515	1423	0,2990	1959*	1659	0,0097	2505*	2258*	0,0097	4882*	4516	<0,0001	12199*	11064	<0,0001
Legal Guardian	33	45	0,1140	252	262	0,3390	269	263	0,9680	283	283	0,4300	257	249	0,8760	552	604	0,2400	1646	1706	0,1523
Uncle/aunt	4	2	0,4660	44	74*	0,0027	55	117*	<0,0001	70	115*	0,0002	92	183*	<0,0001	181	325*	<0,0001	446	816*	<0,0001
Total	358	334		3729	3553		5070	4981		6095	5696		7475	7345		14257	14540		36991	36449	

*Preference; Fem = Female. Source: SIPIA (1997)..

Table 4 shows the data related to ‘violator’ and ‘age group’ from 2009 to 2014. In all variables analyzed, there is a predisposition towards adolescents, except for the ‘grandmother’ variable, which is more associated with children.

Table 4. Association between ‘violator’ and ‘age group’ in the cases of violation of children’s and adolescents’ rights in the State of Paraná from 2009 to 2014.

VIOLATOR	2009			2010			2011			2012			2013			2014			Total		
	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value
Grandparents	4	7	0,1588	60	58	0,7000	108	93	0,9100	141*	82	0,0045	215	144	0,0600	473*	243	<0,0001	1001*	627	<0,0001
Siblings	0	2	0,1937	9	20	0,0200	27	31	0,2490	45	72*	0,0011	45	97*	<0,0001	153	144	0,0180	279	366*	<0,0001
Stepmother	1	1	0,6852	9	19	0,0300	13	21	0,0600	27	17	0,3000	47	37	0,8400	115	76	0,5890	212	171	0,8000
Mother	142	107	0,8288	1268	1059	0,1360	2169	1754	0,2400	2710	2289	0,5000	3856	3017	0,100	8481	5928	0,2500	18626	14154	0,0120
Stepfather	8	11	0,2266	52	97*	<0,0001	78	119*	<0,0001	135	184*	<0,0001	259	258	0,0300	565	402	0,9200	1097	1071*	<0,0001
Father	5	9	0,2590	78	97	0,2100	109	176	0,1990	136	171	0,8200	267	287	0,6100	705	681	0,3400	1300	1421	0,72900
Legal Guardian	10	20	0,0150	89	116*	0,0100	137	169*	0,0013	166	196*	0,0037	170	221*	<0,0001	543	498	<0,0001	1115	1220*	<0,0001
Uncle/aunt	4	2	0,4679	31	43	0,0670	57	53	0,6300	77	57	0,377	120	113	0,3000	278	200	0,9580	567	468	0,4460
Total	250	195		2309	2082		3695	3132		4824	4171		6924	5690		15625	11187		33627	26457	

*Preference; Child = Children; Adol = Adolescents. Source: SIPIA (1997).

Table 5 presents the data regarding ‘violated right – freedom, respect, dignity’ in relation to gender and focusing on the ‘physical violence’ variable. We can notice prevalence for the female gender in both types of sexual violence (abuse and exploitation). Conversely, males are more predisposed to physical and psychological violence.

Table 5. Association between ‘violated right – freedom, respect and dignity’ and ‘gender’ focusing on the ‘physical violence’ variable in the cases of violation of children’s and adolescents’ rights in the State of Paraná from 2009 to 2014.

VIOLATED RIGHT – FREEDOM, RESPECT AND DIGNITY	2009			2010			2011			2012			2013			2014			Total		
	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value	Male	Fem	p value
Physical violence	20	27	0,497	193*	193	<0,0001	246*	269	<0,0001	330*	291	<0,0001	393*	396	<0,0001	723*	803	<0,0001	1905*	1979	<0,0001
Beating / physical aggression	3	4	0,704	2	3	0,6082	1	0	-	7	6	0,7	53	53	0,84	10	18	0,1	76	84	0,4150
Others	0	0	-	0	0	-	0	0	-	0	0	-	3	0	0,1394	1	0	0,36	4	0	0,0739
Corporal punishment	0	0	-	0	0	-	0	0	-	0	1	0,5625	22	25	0,59	12	5	0,247	34	31	0,9250
Physical torture	0	0	-	1	0	0,5714	0	0	-	0	1	0,5625	4	0	0,0731	6	1	0,1784	11	2	0,0200
PSYCHOLOGICAL VIOLENCE	16	13	0,07	122	161	0,015	186*	234	<0,0001	181*	238	0,0076	277*	364	<0,0001	656*	839	<0,0001	1438*	1849	<0,0001
SEXUAL VIOLENCE / ABUSE	9	35	0,046	87	336*	<0,0001	137	574*	<0,0001	201	703*	<0,0001	244	1025*	<0,0001	415	1606*	<0,0001	1093	4279*	<0,0001
SEXUAL VIOLENCE / COMMERCIAL SEXUAL EXPLOITATION	0	2	0,404	2	49*	<0,0001	6	35*	0,0092	9	36	0,0246	2	46*	<0,0001	12	50*	0,0086	31	218*	<0,0001
Total	45	77		404	739		575	1112		721	1268		916	1831		1806	3298		4467	8325	

*Preference; Fem = Female. Source: SIPIA (1997).

The data brought by Table 6 present the ‘age group’ variable, and shows a prevalence for adolescents when it comes to ‘sexual violence – commercial exploitation’.

Table 6. Association between “violated right – freedom, respect and dignity” and “age group” focusing on the “physical violence” variable in the cases of violation of children’s and adolescents’ rights in the State of Paraná from 2009 to 2014.

VIOLATED RIGHT – FREEDOM, RESPECT AND DIGNITY	2009			2010			2011			2012			2013			2014			Total		
	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value	Child	Adol	p value
Physical violence	12	10	0,8600	89	158	0,3500	144	188	0,7600	219	259	0,7500	338	327	0,0800	730	665	0,9900	1532	1607	0,51700
Beating / physical aggression	6	1	0,7692	1	3	0,7222	1	0	1,0000	6	7	0,6376	60	39	0,9200	18	9	0,7770	92	59	0,51700
Others	0	0	-	0	0	-	0	0	-	0	0	-	0	2	0,1648	0	1	0,3774	0	3	0,06665
Corporal punishment	0	0	-	0	0	-	0	0	-	1	0	0,5000	27	19	0,8700	12	5	0,5900	40	24	0,71700
Physical torture	0	0	-	0	1	0,8773	0	0	-	0	1	0,5625	3	0	0,2217	3	4	0,2588	6	6	0,3449
PSYCHOLOGICAL VIOLENCE	5	9	0,2590	78	97	0,2100	109	176	0,1990	136	171	0,8200	267	287	0,6100	705	681	0,3400	1300	1421	0,72900
SEXUAL VIOLENCE / ABUSE	16	11	0,5480	107	158	0,7800	224	272	0,3000	336	408	0,9400	518	638	0,2100	1054	885	0,1280	2255	2372	0,5000
SEXUAL VIOLENCE / COMMERCIAL SEXUAL EXPLOITATION	0	0	-	1	10	0,0400	0	11*	0,0045	6	14	0,1800	5	20*	0,0070	10	47*	<0,0001	22	102*	<0,0001
Total	33	30		275	423		477	647		697	852		1128	1272		2499	2278		5109	5502	

* Preference; Child = Children; Adol = Adolescents. Source: SIPIA (1997).

Law number 8.069 (1990) from 13th July, 1990, addresses the Child and Youth Statute, which establishes the rights of children and adolescents: the right to life and health, the right to education, culture, sports and leisure, and the right to professionalization and protection at work. Therefore, identifying the prevalence of violated rights, as well as victims' profile and their association with aggressors is of great relevance for the State and its community, for it provides bases for early detection and intervention in suspected cases.

Our research shows that the number of cases of violated rights has increased over the years, and that the most common situations involve familiar and communitarian companionship, followed by education, culture, sports and leisure. Violators are prevalently mothers, followed by fathers.

A search on SIPIA revealed 281.232 cases of rights violation in Brazil from 2009 to 2014. If we take into account only those cases registered in Paraná, then the number is 129.123, which means 46% of the cases registered in the entire country. These figures may suggest that other Brazilian States underreport those cases, which is corroborated by other studies affirming that underreporting of violence does happen in Brazil (Gonçalves & Ferreira, 2002).

Although the Brazilian Child and Youth Statute was promulgated over 20 years ago, it was only in 2006 that the National Plan for Promoting and Defending the Right of Children and Adolescents to Familiar and Communitarian Companionship was created. It was devised to ensure such right through public policies linked to other governmental programs. With regard to Institutional Reordering of Institutional Shelters, the main goal of the National Plan is adjusting the shelters in order to extinguish the large ones, thus ensuring familiar reintegration, and enabling fostering processes, so that children and adolescents have the right to familiar and communitarian companionship. Our findings show that, in Paraná, this right is the one with the greatest number of violation cases (n=52902), which points to the need of more effective public policies.

Violation of the right to education, sports, culture and leisure comes runner-up in the number of cases reported (n=45.398). The Federal Constitution (Brasil, 1988) states that "education, everyone's right and a duty of the State and family, must be promoted and encouraged in cooperation with society, aiming at one's full development, preparing them for citizenship and qualifying them for work". A study (Silva, Ometto, Furtuoso, Pipitone, & Sturion, 2000) similar to ours found out that only 28,22% of children over 5 years old were in nurseries. That confirms the results of this study, which identified greater prevalence of violation of the right to education, sports, culture and leisure related to children rather than adolescents.

When it comes to the right to freedom, respect and dignity, there are three types of violence, namely psychological, physical and sexual. Minayo and Assis (1994) point that children who are victims of structural violence are more likely to be deprived of their rights. Our study shows a gradual increase in the number of cases reported for the "physical violence" sub variable. That can be justified by a change in the legislation, which declared that reporting suspected cases is mandatory, especially when it comes to health and education professionals. Physical abuse is more likely to happen in families in which parents are too young, immature or alcoholics (Pascolat et. al., 2001).

Regarding those families in which children and adolescents are victims of physical violence, such practice plays a central role in their education (Guerra, 1985), since parents or guardians make use of corporal punishment as an educational measure (Deslandes 1994).

Psychological violence is far more subjective. However, it is often associated with physical violence, leaving deep marks on children's and adolescents' development, besides being commonly described in association with other types of violence (Cunha, Assis, & Pacheco, 2005). Abranches and Assis (2011) state that psychological violence causes real and potential long-term damage to children's and adolescents' mental and physical health. The authors also affirm that this type of violence conveys a message of rejection, thus, jeopardizing one's socialization ability and psychological development.

As for sexual abuse, it is a universal phenomenon that affects all social classes, ethnics, religions and cultures (Drezet et al., 2001). Pfeiffer and Salvagni (2005) point that most abusers are people who are close to the child's or adolescent's family. So, aggressors take advantage of this trust relation and the power they have over the victim. In Paraná, there are more cases of sexual abuse involving females, the same results found by Ribeiro, Ferriani, and Reis (2004), in a study carried out in the city of Ribeirão Preto, State of São Paulo. The author states that, more than just sexual desire, it is also a matter of domination. Therefore, female children and adolescents are the ones who are usually dominated and subject to older men or women.

Domith and Lourenço (2016) reported that children are potential victims of domestic violence, which can be direct (when children themselves are the target) or indirect (when they witness someone being assaulted). According to the World Health Organization, direct domestic violence includes emotional or physical maltreatment, sexual abuse, neglect or negligent treatment, commercial exploitation or exploitation of other natures, which can lead to health problems.

The data collected and analyzed in this research showed that violators are mainly mothers, followed by fathers. Mothers usually spend more time with their children than fathers. That is the reason why they are more likely to maltreat them. Nonetheless, in cases in which the mother and father spend the same amount of time with their children, the latter tends to commit assaults more often (Deslandes, 1994). Violence against children and adolescents may have immediate consequences, such as anxiety, guilt, fear towards the aggressor or people of the same gender, or even others, and long-term consequences such as suicidal ideation, depression, isolation and other disorders.

Situations of physical, psychological and/or sexual violence require an interdisciplinary work in order to ensure that victims have protection and assistance, and also to guarantee the violator to be held responsible (Arpini, Soares, Bertê, & Forno, 2008).

The Ministry of Health stresses that high prevalence of violence against children and adolescents makes it a serious public health issue. Health professionals are often the first ones to be in contact with episodes of violence, and the reason why victims seek assistance is usually covered by other problems or symptoms. Brazilian law has made mandatory the report of suspected or confirmed cases of rights violation, and it imposes penalties on health or education professionals who happen to omit any information. However, despite being obliged and recognizing the importance of reporting, those professionals still struggle to incorporate such procedure due to lack of basic information what allows an accurate diagnosis, and also for they are afraid of the legal inconveniences. Furthermore, the curriculum of most degrees in the field of health does not comprise any training on violence-related aspects (Jamillo & Uribe, 2001). Last, but not least, we can mention the need of institutional engagement, in order to offer professionals the necessary support, so that they feel less uncomfortable with reporting, thus, contributing to greater visibility of the problem and its eradication. Article 245 of the Child and Youth Statute (Lei no 8.069, 1990) states the following:

Art. 245. If a doctor, teacher or anyone responsible for a health premises at secondary, primary or nursery education levels fails to report to authorities any cases they have become aware of, regarding suspected or confirmed episodes of maltreatment against children or adolescents, they will be fined 3 to 20 reference wages, and twice as much as that amount in case of repeated infringement.

According to the Code of Practices on Dental Ethics, article 9, item VII (Conselho Federal de Odontologia [CFO], 2012), it is the duty of professionals to “[...] care for the health and dignity of their patients, and violating that represents and ethical infringement”. Thus, omitting the mandatory report in violation cases not only violates the Child and Youth Statute, but also ethics. Reporting is of great importance, for it is an instrument to fight violence, as well as an epidemiological tool that provides benefits to similar cases (Gonçalves & Ferreira, 2002).

Conclusion

Violation of children’s and adolescents’ rights has reached significant numbers over the years in Paraná, which calls for efficient public policies. In addition, all this emphasizes the relevance of the role played by health and education professionals in suspecting and reporting cases of that nature.

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