



## SOCIAL REPRESENTATIONS OF PRIMARY CARE NURSES ON "BEING YOUNG" AND PREVENTION OF HIV

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### ABSTRACT

**Objective:** To grasp the social representations of nurses about "being young" and HIV prevention in young people. **Methodology:** This is a qualitative study conducted in four Basic Health Units of northwestern Paraná (Brazil) with ten nurses using the Theory of Social Representations about "Being Young" and "HIV Prevention in Young People" through interviews and evocations analysis. **Results:** The main evocations of nurses are related to the vulnerability of young people to risk behaviors and the need for a contextualized sexual education. The Health at School Program was cited as a way to improve information about sexual health and condom use, promoting workshops that deconstruct stereotypes. Collaboration between education and health is essential to empower young people and improve their living conditions, especially in contexts of social vulnerability. **Final considerations:** The social representations of nurses point out that, although youth is often associated with freedom, it is also linked to risks. In this context, education on the use of condoms and strengthening social support are fundamental, as they promote open dialogues and partnerships between schools and health services, aiming at an integral and preventive approach to sexual health of young people.

**Keywords:** Sexually Transmitted Diseases. Qualitative Research. Nurses; Youths.

### INTRODUCTION

Acquired Human Immunodeficiency Syndrome (AIDS) is an infectious disease caused by the Human Immunodeficiency Virus (HIV), a retrovirus with RNA genome that affects CD4+ T cells in infected individuals. Having HIV is different from having AIDS, but the infection by the virus, when untreated, generates an aggression to the individual's immune system and, consequently, immunodeficiency, making him vulnerable to opportunistic diseases that characterize the clinical picture of AIDS<sup>(1)</sup>.

HIV is transmitted through unprotected sexual intercourse, blood transfusions, sharing of syringes in the use of injectable drugs and vertically between mother and child during pregnancy, birth or breastfeeding. Its diagnosis

is performed by laboratory examination and was facilitated by the quick tests currently offered by the Brazilian Unified Health System (SUS)<sup>(2)</sup>.

The emergence of HIV/AIDS was accompanied by a marked social vulnerability, as well as some prejudices about this disease, still very present in our contemporary<sup>4</sup>. Despite the advances in the prevention, diagnosis and treatment of the disease, there are still prejudices and paradigms to be fought, related to the discussion about sexual relations and the demystification of false information disseminated by the population about the forms of transmitted<sup>(3,4)</sup>.

Globally, HIV is the second leading cause of death among adolescents and young people, accounting for 26.7% of the general population in Brazil. In 2022, 702 new HIV cases were registered in this age group in the country and 28

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in the State of Paraná, according to the Department of Chronic Diseases and Sexually Transmitted Infections (DCCI)<sup>(5,6)</sup>.

According to the World Health Organization (WHO), individuals aged between 15 and 24 years old are considered young. During this period, physical, emotional and behavioral changes occur, including those related to sexual experience and behavior, which make the youth vulnerable to exposure to STIs. Therefore, it is essential that health professionals and services address the prevention, diagnosis and treatment of sexually transmitted infections (STIs), including HIV<sup>(7)</sup>.

Regarding the prevention of these diseases, there is difficulty in developing actions in health services due to the situations of vulnerability that young people are exposed. Therefore, it is necessary to use innovative educational practices that propose the active participation of the target audience and health professionals, and the creation of public policies focused on this population<sup>(8)</sup>.

In this context, nurses working in Primary Health Care (PHC) and the Family Health Strategy (FHS) play an important role in preventing HIV in young people, providing close contact with the community in nursing consultations, home visits, educational actions, active search of cases and reception in the units. This contrasts with the difficulties that have arisen due to the lack of formal protocols for attending young people at risk of exposure to the immunodeficiency virus and to health care centered on the doctor instead of the multiprofessional team<sup>(9)</sup>.

It is believed that a better understanding of the phenomenon under study will be found using the Theory of Social Representations (TSR)<sup>(10)</sup>, because they are social constructions that influence people's attitudes, beliefs and behaviors. Understanding how health professionals perceive and deal with these issues is fundamental to promote more effective prevention actions, as well as understanding the challenges and barriers faced in the care of this population.

Therefore, considering the importance of HIV prevention in young people and knowing the social construction of health professionals working in the city, since some common sense

knowledge can influence strategies to promote health<sup>(11)</sup>, the objective of this to grasp the social representations of nurses about "being young" and HIV prevention in young people.

## METHODOLOGY

This is a qualitative study that used the Theory of Social Representations (TSR) as theoretical reference and followed it. By adopting this approach, it is possible to understand how such representations influence the attitudes and behaviors of professionals, which can contribute to the development of appropriate strategies for prevention and health promotion in this specific contextual<sup>10</sup>.

The municipality under study has ninety-nine teams from the Family Health Strategy (FHS) allocated in 35 Basic Health Units (BHU). The work of the FHS is essential for the implementation of preventive actions and for promoting quality of life, focusing not only on solving health problems but also on the continuous improvement of the community's well-being.

The previously defined inclusion criteria for participants in the study were: to be a nurse and work at the FHS for a minimum period of six months. Nurses who were on vacation, leave or absent at the time of data collection were excluded from the study. There was no refusal of any nurse approached for study participation.

Possible participants were randomly approached by the researcher, who, during visits to some BHUs, personally extended the invitation to participate in the study. After acceptance, the interview was scheduled, which took place at the participant's workplace, in a private environment, to ensure the confidentiality of the interviewee, and it was audio-recorded after the participant's authorization.

Therefore, 10 nurses from the FHS participated in the study. The data were collected by the main researcher, who was previously trained to develop the collection techniques, which consisted of a semi-structured interview containing information such as: sex, race, level of education, working time, among others. In addition, the technique of free evocation<sup>12</sup> was used, in which we sought to

apprehend the social representations of these nurses through the inductor term "Being Young" and "HIV Prevention in Young People". Participants were asked to write five words or expressions that came to their mind related to these two inducing terms.

This technique lasted on average 15 minutes and the data collection process was completed at the time saturation was reached, that is, when new information obtained no longer added relevant content to existing analyses. This method ensured that the data collected were representative, allowing solid and substantiated conclusions about the object of study<sup>(13)</sup>.

To obtain the analysis corpus, the evocations were typed in Excel, in their original form, and with the help of MAXQDA Plus 2022 Student software, version 22.0.1, two clouds of words derived from each of the inductor terms were generated (figure 1 and 2). Subsequently, the descriptive analysis of the most frequent words and their relations with the study context was carried out.

The study was developed in accordance with the guidelines disciplined by Resolution N

466/12 and N 510/2016 of the National Health Council (CNS). Approved by the Research Ethics Committee (CEP) of the State University of Maringá under opinion 5.228.399.

## RESULTS AND DISCUSSION

The 10 nurses participating in the study worked in four BHUs, with an average age of 56 years and 19 years of experience, consisting of nine females and one male. From the data analysis, two potential categories emerged: the representation of "Being Young" and the representation of "HIV Prevention in Youth".

### Representation of "Being Young"

At the beginning of the interview, after questioning by the researcher to each participant individually, the words evoked in relation to the term "Being Young" were "fun", "study", "health", "freedom" and "friends", in this order of code hierarchy, and, subsequently, the word cloud illustrated in Figure 1.



**Figure 1.** A cloud of words originating from the free evocations of nurses when asked about the term "being young", Maringá, Paraná, 2022.

**Source:** Survey data, 2022.

The concept of youth has been discussed throughout history from various points of view, resulting in different interpretations and definitions of the term. There are conceptions

that characterize it as an evolutionary phase, determined by the biological clock, or as a stage of transition/preparation for adult life, or as a period of disobedience, problems and break of

regress<sup>(14)</sup>.

Two of the main evocations, "fun" and "freedom", are linked to the behavior of young people. Professionals attributed to this phase the lack of relevance of social norms, which makes young people feel free to make choices and have fun whenever possible. However, to ensure a healthy future, it is essential that the young person take responsibility for their life, following the best guidelines on the lifestyle to be adopted and reducing the risks existing<sup>(15)</sup>.

There are several risk behaviors that may arise in youth, including those related to sexual development. The discovery of pleasure often occurs during this period, and early sexual activity increases vulnerability to sexually transmitted infections, including HIV and teenage pregnancy in an unplanned way, which impacts young people's lives and their objectives<sup>(16,17)</sup>.

The scientific evidence<sup>(15, 18)</sup> indicate that in early adolescence, between 10 and 14 years old, sexual activity usually begins in situations of vulnerability, such as low socioeconomic status, alcohol or drug use, multiple partners, unprotected sex or lack of knowledge about prevention methods<sup>(19)</sup>.

Considering these vulnerabilities and focusing on the issue of "health", which was highlighted in this study, it is essential to know the initiatives related to sexual and reproductive health for adolescents. It is necessary to go beyond the simple provision of information on diseases and prevention, because many young people feel saturated, especially in relation to sexual behavior and violence, requiring a change in the approach to promote health from this groups<sup>(16)</sup>.

An interesting fact is that while the US invests in intervention programs to change the current scenario on sexual and reproductive health of young people, in England there is an emphasis on sexual because it is believed that individuals only have maturity to exercise their sexual autonomy safely from the age of 16 years old<sup>(19)</sup>.

In Brazil, the sexual and reproductive health actions of young people are coordinated between the health and education sectors through the School Health Program (SHP). This interdisciplinary program, established in 2007,

has implemented important activities to promote health and prevent diseases, although they are still fragmented and disarticulated with the legislation<sup>(19)</sup>.

Using educational institutions to address and intervene in this aspect is a smart option, since it extends the contact of health services with this population, which must attend school rooms<sup>(16)</sup>. At this moment, the evocation "studies" is reinforced, which was highlighted by the participants.

However, the search to develop critical health awareness of adolescents, supporting their self-sufficiency and maintaining their health, is not new for educational institutions. Since 1997, the Ministry of Education has included sex education as one of the transversal themes in the various areas of knowledge in the National Curriculum Core (NCC), with the aim of integrating the issue of sexual orientation into all educational practices<sup>(16)</sup>.

For a long time, when it came to health-related issues, the school was used only to develop preventive care activities, with actions based on the biomedical model, which influenced approaches aimed at the individual, with vertical methodologies and disconnected from social, political and cultural contexts<sup>(20)</sup>.

The predominance of clinical-biological discourses in the social practice of teachers represented health as absence of disease and disconnected from social issues, assigning personal responsibility to adolescence and youth, without considering the context in which individuals are inserted<sup>(20)</sup>.

On the other hand, initiatives supported by the community network show promise to address the social factors that influence the health-disease process, using school as a space for citizen training. Thus, taking health promotion initiatives to schools requires partnerships with the community and various sectors of society, in addition to building new discourses on health as a citizenship project and quality of life, the review of current approaches to health promotion in schools, as well as strategies for the ideological redefinition of actors working in this field, particularly teachers<sup>(20)</sup>.

In this broad context of health and its promotion, the term "friends" refers to the

presence of people who can modify behaviors and support whenever necessary. The relationships established in adolescence are of paramount importance, since they can be adjusted to function as a social network of support, based on the available strategies for managing adversities<sup>(21)</sup>.

In a systemic perspective, social support is linked to changes in the environment as well as to individual characteristics, established interactions and reciprocity in relationships regarding the perception process of those involved. Therefore, in addition to friends, the family, as a provider and protector, has a significant role, as well as the school and the

community, with power to intervene in situations that young people experience and deserve attention from public policy<sup>21</sup>.

## Representation of “HIV Prevention in Youth”

Regarding the expression "HIV prevention in young people", nurses evoked the following words, in order of hierarchy by codes: "condom", "information", "responsibility", "irresponsibility", "awareness". These evocations originated the word cloud illustrated in Figure 2.



**Figure 2.** A cloud of words originating from the free evocations of nurses when asked about the term "HIV prevention in young people", Maringá, Paraná, 2022.

**Source:** Survey data, 2022.

Regarding the aspects of HIV prevention in young people, the word condom was the most evoked by participants. It is important to highlight that, in the search for HIV prevention, the use of condoms has a central role in the actions developed by health professionals and policies. However, it is not enough to make it available; it is necessary to intervene in what hinders or prevents its use by young people and adolescents.

Study with young people showed that the reasons for having sex without condom are numerous, but only one is related to access to the device: In situations of sporadic and unforeseen sexual relations between young the lack of condoms can result in unprotected sex, due to

the concern not to miss the moment<sup>(22)</sup>. The other reasons are related to behavior and (pre)concepts, such as increasing sexual pleasure; demonstrating trust and loyalty between partners; taking condoms for meetings and using alcohol and other drugs before the relationship<sup>(23)</sup>.

In this context, it is possible to understand the importance of other evocations highlighted by nurses (information, responsibility, irresponsibility and awareness), because they directly influence the prevention of HIV in young people and the use of condoms.

The Health and Prevention in Schools (HPS) project aims to improve information directed at young people and encourage them to adopt

responsible actions, including the use of condoms. As a result, there is a decrease in STI infection and the school dropout rate due to teenage (or juvenile) pregnancy in the age group of 10-24 years old<sup>(24)</sup>.

However, the HPS goes beyond directly addressing condom use, STIs and teenage pregnancy. He highlights the importance of engaging with those involved about sexual diversity and how it can influence the health promotion of young people and adolescents, as well as the prevention of STIs in these individuals. In this sense, the project explores the notion of diversity from three perspectives: gender identity, biological sex and sexual orientation<sup>(25)</sup>.

The first category, gender identity, is addressed in the manuals of the Ministry of Health from the perspective of social construction, that is, as part of the premise that people are influenced by the social context in which they are inserted, going beyond what is determined by biological sex<sup>(25)</sup>.

According to the STI, HIV and AIDS Prevention Manual, it is feasible to conceive of gender as a set of social representations that were elaborated based on biological differences between the sexes. In this constructivist conception, culture is presented as a determinant element of behaviors, customs, practices, representations, rules, among others, which serve to shape people's identities and define their social roles<sup>(25)</sup>.

As for the category of sexual orientations, it is explored through the representation of the various sexualities, in which the desire of the individual will guide his affective/ sexual behavior. This component of the HPS project aims to apply the themes through workshops aimed at deconstructing stereotypes and stigmas, as well as for prevention in individual care and group care<sup>(25)</sup>.

Thus, the holding of workshops can provide moments of reflection, debate and expansion of knowledge for both the executive team and the adolescents. In addition, the activities carried out together make it possible to reach a greater number of people in less time and promote the exchange of experiences<sup>(26)</sup>.

A study conducted with 33 young people, high school students of the State education

system in Natal/RN, showed that the workshops helped to raise awareness among adolescents about HIV prevention. They were involved in self-reflection exercises on various topics, stimulating their curiosity and clarifying doubts about HIV and its prevention forms<sup>(26)</sup>. Similar results were observed in a study in Nigeria, where school education was identified as an effective way to increase HIV knowledge and awareness among adolescents and young adults<sup>(4)</sup>.

Additionally, the use of accessible language during workshops, mediated by active and easy-to-learn methodologies, promoted empowerment, awareness and dissemination of information on STI prevention, including HIV, and sexual health-related care<sup>(27)</sup>.

Thus, it is necessary to provide the young people with a constant search for new reflections in the educational process, as well as innovations in the way of conducting these discussions seeking new didactic and methodological forms in the teaching-Learning involving health and education services<sup>(28)</sup>.

Regarding health professionals, partnerships with schools and public health investments are needed to implement innovative campaigns that promote awareness among the young population. Dialogue is a fundamental component for nurses to reach adolescents, who should be conducted naturally and without taboos or preconceptions<sup>(29)</sup>.

In addition, it is necessary to provide adequate training so that the nurse is prepared to deal with adverse situations and family problems that may arise, especially when it develops actions in PHC and in the territory, where there are several political and social positions that involve the sexual and reproductive education of adolescents and youth<sup>(29)</sup>.

Regarding services provided to the public, especially to young people, it is important to mention that specialized services around STI/HIV treat real users, while primary services deal with potential clients, that is, the individuals most susceptible to contracting the HIV virus. This fact has had an impact on the way professionals conduct the work process, as STI-focused services are more familiar with policy guidelines-and administrative, while PHC and mental health services should complement their

knowledge with socially shared notions and frequently referenced knowledge<sup>(19)</sup>.

In practice, this situation may reinforce stigmas against some young people, especially those who identify as LGBTQIA+, poor or black, since the stigma still fosters psychological and social suffering in certain groups during adolescence, being a central theme in the health-disease process<sup>(19)</sup>.

Finally, it is important to consider that, in the context of HIV prevention among young people, educational institutions represent an open and educational space regarding sexuality, providing knowledge and skills necessary to encourage conscious and healthy choices<sup>(30)</sup>.

Therefore, education and health, when well-articulated, increase the possibilities of integral assistance to people through actions that seek to improve living conditions and promote health. For this to occur, it is necessary to invest in both the establishment of links and the resources offered by effective policies that guarantee youth protagonism in spaces related to arts, culture, sport, religion, among others, valuing biological, emotional, social, political, economic, cultural and spiritual aspects<sup>(21)</sup>.

Because it is a study that used self-reported data that are subject to bias, in addition to the difficulty of access of the researcher to professionals are limitations of the study. However, the research contributed significantly to understanding the view of these professionals on HIV prevention in young people, providing valuable insights for future public health interventions and policies.

## FINAL THOUGHTS

The analysis of the social representations of nurses regarding "being young" and HIV prevention among young people reveals a multifaceted understanding of youth and the challenges related to sexual health in this age group. Nurses recognized that youth, often associated with concepts such as "fun" and "freedom," represents a critical phase of transition and learning.

However, this period is accompanied by significant challenges, including risk behaviors that can compromise health, such as early sexual activity. The social support network, involving friends, family, and educational institutions, emerges as a determining factor in promoting healthy practices.

In this context, condom use is essential for preventing infections such as HIV, but its effectiveness depends on the education and awareness of young people about the barriers they face. The "Health and Prevention in Schools" project exemplifies an integrated approach that, in addition to focusing on prevention, addresses sexual diversity and the formation of partnerships between schools and health services, aiming to deconstruct stigmas and promote holistic health.

Therefore, the theme of HIV prevention highlights the need for an approach that goes beyond simply disseminating information, favoring an environment that encourages open dialogues and the development of critical skills. In this way, by considering youth as a group with specific needs, it is possible to create intervention strategies that truly respond to the challenges faced by this population.

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## MATERNAL QUALITY OF LIFE DURING SOCIAL DISTANCING FROM THE COVID-19 PANDEMIC

### ABSTRACT

**Objective:** to assess maternal quality of life during the Covid-19 pandemic. **Method:** Exploratory, quantitative, cross-sectional study with a sample defined with the virtual Snowball method. The collection took place between June and September 2021, online. A semi-structured form on socioeconomic issues and the World Health Organization's abbreviated quality of life assessment instrument were used. Data analysis included descriptive statistics, Pearson's Chi-Square, Fisher's Exact, and Multiple Logistic Regression tests. For all analyses, p-value <0.05 was considered. **Results:** 305 responses from women with a mean of 1.6 children. Gender inequality was present. There was statistical significance between race/brown color (58.3%; p=0.045) and income of up to one minimum wage (67.9%; p<0.001) and low quality of life. Higher probability of lower quality of life in mothers who did not share responsibilities for child care (OR 3.18) and for those who did not take care of mental health (OR 2.45). **Conclusion:** The emotional well-being and quality of life of mothers of children in social distance during the pandemic was low. The support network is a protective factor for the mental health and quality of life of this population. Gender discussions and assignments with children are necessary.

**Keywords:** Mothers. Quality of life. Covid-19. Gender equality.

## REPRESENTACIONES SOCIALES DE ENFERMEROS DE ATENCIÓN PRIMARIA SOBRE "SER JOVEN" Y PREVENCIÓN DEL VIH

### RESUMEN

**Objetivo:** analizar las representaciones sociales de los enfermeros sobre el "ser joven" y la prevención del VIH en los jóvenes. **Metodología:** se trata de un estudio cualitativo realizado en cuatro Unidades Básicas de Salud del noroeste de Paraná-Brasil con diez enfermeros utilizando la Teoría de las Representaciones Sociales sobre "Ser Joven" y "Prevención del VIH en jóvenes" mediante entrevistas y análisis de evocaciones. **Resultados:** las principales evocaciones de los enfermeros están relacionadas a la vulnerabilidad de los jóvenes a comportamientos de riesgo y la necesidad de una educación sexual contextualizada. El Programa de Salud Escolar fue citado como una manera de mejorar la información sobre salud sexual y el uso de preservativos, promoviendo talleres para combatir los estereotipos. La colaboración entre educación y salud es esencial para empoderar a los jóvenes y mejorar sus condiciones de vida, especialmente en contextos de vulnerabilidad social. **Consideraciones finales:** las representaciones sociales de los enfermeros señalan que, aunque la juventud es frecuentemente asociada a la libertad, también está conectada a riesgos. En este contexto, la educación sobre el uso de preservativos y el fortalecimiento del apoyo social son fundamentales, ya que promueven diálogos abiertos y alianzas entre escuelas y servicios de salud, con el fin de adoptar un enfoque integral y preventivo para la salud sexual de los jóvenes.

**Palabras clave:** Infecciones de Transmisión Sexual. Investigación Cualitativa. Enfermeros. Jóvenes.

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