

INTERDISCIPLINARITY AS A STRATEGY FOR CARING FOR AND COPING WITH SEXUAL VIOLENCE AGAINST CHILDREN AND ADOLESCENTS



<https://doi.org/10.56238/arev7n1-200>

Submitted on: 12/24/2024

Publication date: 01/24/2025

Daniella Amaral Aguiar¹.

ABSTRACT

The objective of this theoretical essay is to present sociodemographic data on the phenomenon of sexual violence perpetrated against children and adolescents in Brazil, for representation and reflection on interdisciplinary work as a strategy in mental health in the care and confrontation of this phenomenon. It was concluded that the articulation of public policies is essential for a more qualified, articulated and comprehensive approach regarding care and monitoring in the segment of childhood and adolescence.

Keywords: Interdisciplinary Work. Mental health. Child and Adolescent.

¹ Master's degree in Social Work from the Graduate Program in Social Work at the Faculty of Human and Social Sciences (Unesp). Specialist in Social Assistance Policy from the Uninter International University Center. Degree in Social Work from the Federal University of Triângulo Mineiro (UFTM). Social Worker. E-mail: daniellaaguiar_@hotmail.com.

INTRODUCTION

Dealing with violence against children and adolescents is a recent theme from a historical point of view, considering that it was only at the end of the twentieth century, in Brazil, that this public began to be recognized as subjects with rights.

From the entire Brazilian legal apparatus that brings rights and underpins public policies for the comprehensive care of children and adolescents aimed at preventing and protecting situations of risk and violence, health policy comprises a significant measure. Considering that violence leaves signs, health care is essential in order to promote the overcoming of the situation experienced, with strengthening, resignification and even working on the recognition of the production and reproduction of violence (BRASIL, 2017).

Guerra (2015, p.417) emphasizes that networking is essential for preventive care in situations of violence against children and adolescents.

The reflection brought here is justified by the high number of complaints received through the service channels that characterize sexual violence against children and adolescents as one of the greatest violations of the rights of children and adolescents, and that, despite the advances in Brazilian legislation, it is essential to expand the debate and studies on the subject in order to promote its confrontation and overcoming.

SEXUAL VIOLENCE AGAINST CHILDREN AND ADOLESCENTS: SOME SOCIODEMOGRAPHIC DATA

This session presents some sociodemographic data of children and adolescents who were victims of sexual violence in Brazil in 2018 and who were notified through complaints on channels and platforms such as Dial 100 (Dial Human Rights) and the Access to Information Law. The data represent the profile of the victims, the profile of the perpetrators of violence, the main places of occurrence and the situations of recidivism. The platforms surveyed do not represent the referrals made to children and adolescents who suffered sexual violence, and it is not possible to list in data which public and/or private facilities this public received care.

According to data from Dial 100 listed by the Ministry of Women, Family and Human Rights, in 2018 there were a total of 76,216 complaints of violence against children and adolescents in Brazil. Among this number, 17,093 refer to sexual violence. Data provided by the Access to Information Law, prepared by Folha de São Paulo in 2019, reveal that

sexual violence against children and adolescents in compulsory notifications in the health area, brings a higher number, 29,628 in 2018.

The main victims are female, with an average age of 12 to 17 years (approximately 6,000). However, the incidence in girls under the age of 12 and boys from 0 to 17 years of age is also alarming, noting that in the cases of male victims, violence against children predominates, that is, in the range of 0 to 11 years of age

The places presented where violence occurs are varied, but the residence itself affects the largest number (68%) of the situations, followed by unknown places, public roads, others and school, which together do not reach half of the first.

Among the perpetrators, father and stepfather (12% each) are presented as the main aggressors, followed by boyfriends (7%), spouses (7%), mother (3%), brothers/sisters (3%) and ex-boyfriends (1%).

From the relationship between the perpetrators and the victims, it is shown that the majority (26%) are acquaintances, followed by others (19%) where they are considered uncles/aunts, grandfathers/grandmothers, drivers; the unknown authors add up to 11% and 1% are people related to institutions (public, private, church professionals, NGOs, among others).

Considering the data listed by the Ministry of Women, Family and Human Rights, the numbers are different, however the general percentage is repeated, that is, it is found that within the 17,093 complaints, 13,418 are about sexual abuse and 3,675 refer to sexual exploitation.

The profile of the victims exposes that female people are the biggest victims, 73.44% in situations of abuse and 75.10% in situations of sexual exploitation. In these situations, males present 18.60% and 12.06%, respectively.

From the profile of the aggressors, in descending order of occurrence, the following are listed: mother, father, stepfather, uncle, neighbor, boyfriend, grandfather and brother, as perpetrators.

These numbers reveal a cruel reality that remains widespread in society, and important indices that indicate the high number of children and adolescents who were victims of this violation of rights. The data presented, however, present a reality of the year 2018, a year in which the social context was different from what we are currently experiencing with the global pandemic of the new coronavirus.

It is in the face of this Brazilian reality of violence against children and adolescents that public policies are organized for care and coping, however these also present limits and possibilities that require constant reflections and evaluations in order to improve and qualify public actions so that they are effective in attending to this phenomenon, it is therefore considered interdisciplinary work as fundamental for professional practice in health and mental health as a strategy of qualification and contribution to combating this violence.

INTERDISCIPLINARY WORK IN MENTAL HEALTH: A COPING STRATEGY

The health strategy adopted by the SUS leads to expanded care, considering social determinants as factors that directly and indirectly affect the health condition of the population, that is, expressions such as work, housing, leisure, education, among others, are fundamental in the process of people's development.

The psychosocial care network (RAPS) was established by Ordinance MS/GM No. 3,088 (BRASIL, 2011), and provides care for people with suffering or mental disorders, it also covers people in situations of alcohol and other drug use. Among some of its objectives is priority care for groups considered vulnerable, including children and adolescents. In this ordinance, it establishes the Psychosocial Care Centers (CAPS) as a specialized care point in the area of mental health, bringing their organization.

This service brings the concept of multidisciplinary work, that is, it has several areas of knowledge to meet the demands presented by the user population. Because he considers that "there is no production of health without production of mental health. Therefore, it is necessary to take into account that, when receiving health care, the biological, psychic and social dimensions of individuals must be considered." (BRASIL, 2014, p. 23)

In a recent study, Deslandes, Vieira, Cavalcanti and Silva (2016) point to the restrictive scenario of Brazilian mental health policy. The criticism made deals with the criteria for care in this service, which consists of attending children and adolescents with severe or persistent mental disorders, so the cases of victims of sexual violence will be subject to the professional's judgment.

To provide care to children and adolescents in line with their needs and reality, taking into account social, family, and cultural conditions, in order to enable comprehensive care that should be included in the political agenda together with the articulation between

other social policies, such as education, social assistance, housing, etc., enabling dialogue between them in order to guarantee and enforce rights.

Thus, it is necessary that every child and adolescent assisted is perceived in its entirety, a movement possible through joint and articulated work between professions, in this bias Deslandes, Vieira, Cavalcanti and Silva (2016) highlight the experience of a CAPS in the city of Campo Grande that specifically meets demands arising from violence, demonstrating as a possibility and strategy.

The concern with sexual violence perpetrated against the childhood-adolescence segment should be highlighted in any policy of care for this public, as it permeates more elementary aspects, in addition to psychological suffering, aggression and other physical forms of suffering can be included, causing even more negativity in the lives of the victims.

The high rate of sexual violence in the country presented in the previous section of this article points to the need to disseminate information to society in general in order to confront and report this type of violence. Due to the high number of occurrences and also recidivism, it is necessary to rethink how public facilities and their professionals are dealing with the forms of care and monitoring of victims.

Ferreira, Côrtes and Gontijo (2019) reveal in their study that health services have limited approaches, it is perceived that the treatment of external injuries with the use of medications is more used, which demonstrates the lack of preparation of professionals to deal with other manifestations of violence, as well as the difficulties in paying attention to how social aspects are involved and evidenced in the lives of victims.

It takes time and tact for professionals and children and adolescents so that they can feel welcomed and protected in order to reveal what has been happening in their homes. It is worth mentioning the current context of the COVID-19 pandemic that we have been experiencing since 2020, which resulted in a restructuring of the social organization so that schools throughout Brazil were closed (some still continue, others have already returned to activities) and children and adolescents started to remain only in their homes, which can lead to new violations of rights and even greater difficulties in making the complaint.

These questions are necessary, because their answers can contribute to the articulation of services, reformulation of policies and care flows. To this end, it is essential that the professionals at the forefront have an ethical commitment to the demand met and

always reassess the situations, together, allowing the construction of knowledge about each situation.

In this sense, it is understood that health care, and especially mental health, is extremely relevant to carry out work, whether individual (with those who suffered) or also family. In this way, interdisciplinary work is shown to be a possibility of this service, encompassing different professionals who will contribute to the comprehensive care of children and adolescents.

In the study presented by Garbin, Dias, Rovida and Garbin (2015) that portray the mandatory reporting of situations of violence in health services, it is pointed out that this notification corresponds to an important instrument for epidemiological surveillance, allowing the definition of public policies for intervention, prevention and coping. The authors state that there are usually resources to combat the phenomenon of violence, but there is still little applicability of these due to several factors such as the lack of knowledge of the professionals involved, their insecurity and even structural weaknesses of the system itself.

It is understood that it is important to have services and resources available for the notification of violence or suspicion, enabling greater security and skills for professionals to diagnose the situation that will allow the identification of the best alternatives and appropriate measures for intervention (GARBIN *et al.*, 2015).

Thus, sexual violence against children and adolescents, as a demand for public and specialized services, must be considered in a broader context, that is, for the understanding of this phenomenon, it is essential to conduct a historical, social, cultural and economic survey, so that the analysis is carried out considering not only the uniqueness of a subject (victim), since this violence is transcendental, Complex.

Welcoming, listening and accompaniment are extremely relevant for the knowledge of the situation, not only in itself, but to take it to a universal context and also to particularize it so that the issues not said a priori can be perceived. As stated by Ferreira, Côrtes and Gontijo (2019, p. 4005) "Professionals must perceive the problem of violence as focal in their practice. Only then will vulnerabilities be recognized and the phenomenon will not be underestimated."

According to Beserra (2018), sharing competencies, skills and attributions through the collective collaboration of social policy professionals constitutes collective work in the search for interfaces and congruences in meeting demands.

The concept of interdisciplinarity is complex, since its historicity and the forms of apprehension in the production of knowledge must be taken into consideration. We briefly adopt what Jorge and Pontes (2017, p. 180) bring, who infer that interdisciplinarity "[...] as a possibility of social practice that can respond to the practical demands of work, through a perspective of totality that moves in a contradictory, complex and historical environment [...]".

Jorge and Pontes (2017) highlight that interdisciplinarity provides openings between professions, makes it possible to deepen the dialogue between them in a way that converges and complements each other. It is emphasized how integration is essential for intervention in reality, with attention to the intentionality of development, of the social being and of the political meaning that this category carries.

Therefore, considering a complex phenomenon such as sexual violence in its entirety is the role of all those who make up the human resources staff.

FINAL CONSIDERATIONS

When reflecting on the numbers that show how violence and, in particular, sexual violence against children and adolescents reflect on Brazilian daily life, it is understood that the current legislation that underpins the protection of this public is not enough. Recent studies that address the theme of interdisciplinarity bring this as a strategic element of a more integrated intervention, through the articulation of knowledge and the construction of new knowledge.

Violence as a violation of rights reaches space in a sexist, unequal, discriminatory, unjust and repressive society, especially to social minorities, or people considered more vulnerable, due to their peculiarity, as perceived in the results. Therefore, it is considered as a strategy to confront it, the overcoming of the society we live in, the construction of a new societal order directed to social equality, with the dissemination of new, collective values, with the search for human and social emancipation.

The objective of this article was to present the Brazilian reality through sociodemographic data regarding sexual violence perpetrated by children and adolescents, in order to support reflection on interdisciplinary care as a strategy for care and coping with this phenomenon in health services. Thus, the results represent a frightening reality and point to an urgent need to disseminate information on this topic, allowing the construction

of new coping strategies, overcoming fragmentation and uncritical repetition of demands, especially in a pandemic scenario.

The reflections presented here constitute part of a debate on a reality experienced in various work spaces and that is not exhausted here, as it is essential to continue and expand studies on sexual violence considering the social dynamics that are constantly renewed, but that this phenomenon has always been present.

REFERENCES

1. Beserra, I. K. N. (2018). A interdisciplinaridade como possibilidade de atuação do assistente social: Interfaces e especificidades no âmbito da Assistência Social. *Interdisciplinaridade*, 13(1), 68-84. Available at <http://revistas.pucsp.br/index.php/interdisciplinaridade> Retrieved April 13, 2021.
2. Brasil. (2017). Lei nº 13.431, de 04 de abril de 2017. Estabelece o sistema de garantia de direitos da criança e do adolescente vítima ou testemunha de violência e altera a Lei nº 8.069, de 13 de julho de 1990 (Estatuto da Criança e do Adolescente). Brasília, DF. Available at http://www.planalto.gov.br/ccivil_03/_Ato2015-2018/2017/Lei/L13431.htm Retrieved June 13, 2021.
3. Brasil. Ministério da Mulher, da Família e dos Direitos. (2019). Dados de abuso e exploração sexual contra crianças e adolescentes comparativo 2018 e 2019. Brasília, DF: MMFDH. Available at <https://dossies.agenciapatriciagalvao.org.br/dados-e-fontes/pesquisa/balanco-disque-100-comparativo-2018-e-2019/> Retrieved November 2020.
4. Brasil. (2011). Portaria nº 3.088, de 23 de dezembro de 2011. Institui a Rede de Atenção Psicossocial para pessoas com sofrimento ou transtorno mental e com necessidades decorrentes do uso de crack, álcool e outras drogas, no âmbito do Sistema Único de Saúde (SUS). Brasília, DF. Available at http://bvsms.saude.gov.br/bvs/saudelegis/gm/2011/prt3088_23_12_2011_rep.html Retrieved April 8, 2021.
5. Brasil. Ministério da Saúde. (2014). Atenção psicossocial a crianças e adolescentes no SUS: Tecendo redes para garantir direitos. Brasília, DF: Ministério da Saúde. Available at http://bvsms.saude.gov.br/bvs/publicacoes/atencao_psicossocial_crianças_adolescentes_sus.pdf Retrieved June 13, 2020.
6. Cubas, M. G., & Amancio, T. (2019, September 30). 42% das crianças e adolescentes que sofrem abuso sexual são vítimas recorrentes. *Folha de S. Paulo*. Available at <https://www1.folha.uol.com.br/cotidiano/2019/09/42-das-criancas-e-adolescentes-que-sofrem-abuso-sexual-sao-vitimas-recorrentes.shtml> Retrieved December 10, 2020.
7. Deslandes, S. F., Vieira, L. J. E. S., Cavalcanti, L. F., & Silva, R. M. (2016). Atendimento à saúde de crianças e adolescentes em situação de violência sexual, em quatro capitais brasileiras. *Interface*, 20(59), 865-977. Available at <https://www.scielo.br/j/icse/a/dCLcp8cQmptMKXhPt789Zpg/abstract/?lang=pt> Retrieved April 8, 2021.
8. Faleiros, V. P. (2005). Abuso sexual de crianças e adolescentes: Trama, drama e trauma. *Serviço Social e Saúde*, 2(2), 107-124. Available at https://pdfs.semanticscholar.org/ebb9/49a1fd099c0a5815cdcb8b0f2c3415591a27.pdf?_ga=2.263441164.1663602856.1625947915-820874257.1625947915 Retrieved June 10, 2021.
9. Ferreira, C. L. S., Cortes, M. C. J. W., & Gontijo, E. D. (2019). Promoção dos direitos da criança e prevenção de maus tratos infantis. *Ciência & Saúde Coletiva*, 24(11), 3997-4008. Available at <https://www.scielo.br/j/csc/a/qxhbH35c96Dpj6RQSkYmWFH/?format=pdf&lang=pt> Retrieved April 8, 2021.
10. Garbin, C. A. S., Dias, I. A., Rovida, T. A. S., & Garbin, A. J. I. (2015). Desafios do profissional de saúde na notificação da violência: Obrigatoriedade, notificação e encaminhamento. *Ciência & Saúde Coletiva*, 20(6), 1879-1890. Available at <https://www.scielo.br/j/csc/a/DcWLn67LwTjBwvnKz87BwZx/?format=pdf&lang=pt> Retrieved April 13, 2021.
11. Guerra, V. N. A. (2015). Como organizar redes de combate à violência doméstica contra crianças e adolescentes? In A. M. Azevedo & V. N. A. Guerra (Eds.), *Infância e violência doméstica: Fronteiras do conhecimento* (7th ed., pp. 413-429). São Paulo: Cortez.
12. Jorge, E. M., & Pontes, R. N. (2017). A interdisciplinaridade e o Serviço Social: Estudo das relações entre profissões. *Textos & Contextos*, 16(1), 175-187. Available at <https://revistaseletronicas.pucrs.br/ojs/index.php/fass/article/view/26444> Retrieved July 9, 2021.