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# Obstetric violence: unleashing factors and preventive nursing measures

**ABSTRACT** | **OBJECTIVE:** To characterize the factors that cause obstetric violence and the importance of nursing in the development of preventive measures. **METHODS:** This is a systematic review of the literature with metasynthesis, using the PRISMA protocol. The research was reported in the search source: Virtual Health Library (VHL) and in the databases: SCIELO and LILACS, presenting a total of 61 documents. After establishment and application of inclusion criteria: free available articles, published between 2015 and 2020, in Portuguese, English and Spanish and exclusion: do not present to the theme, repetitive, dissertations and abstracts, resulting in a total of 10 articles. **RESULTS:** The delivery process is an event full of possible misunderstandings, painful behaviors and negligence, which can generate obstetric violence causing irreversible physical and psychological trauma. **CONCLUSION:** Through this study, we sought to highlight the importance of minimizing abusive practices, with the use of strategies that effectively implement programs and policies aimed at the mother-child binomial.

**Keywords:** Obstetric violence. Nursing care. Women's Health.

**RESUMEN** | **OBJETIVO:** Caracterizar los factores que causan la violencia obstétrica y la importancia de la enfermería en el desarrollo de medidas preventivas. **MÉTODOS:** Se trata de una revisión sistemática de la literatura con metasíntesis, utilizando el protocolo PRISMA. La investigación fue reportada en la fuente de búsqueda: Virtual Health Library (VHL) y en las bases de datos: SCIELO y LILACS, presentando un total de 61 documentos. Tras el establecimiento y aplicación de criterios de inclusión: artículos gratuitos, publicados entre 2015 y 2020, en portugués, inglés y español y exclusión: no se presentan al tema, repetitivos, disertaciones y resúmenes, dando como resultado un total de 10 artículos. **RESULTADOS:** El proceso de entrega es un evento lleno de posibles malentendidos, comportamientos dolorosos y negligencia, que puede generar violencia obstétrica causando traumas físicos y psicológicos irreversibles. **CONCLUSIÓN:** A través de este estudio, buscamos destacar la importancia de minimizar las prácticas abusivas, con el uso de estrategias que implementen eficazmente programas y políticas dirigidas al binomio materna-infantil.

**Palabras claves:** Violencia obstétrica. Cuidado de enfermería. Salud de la Mujer.

**RESUMO** | **OBJETIVO:** Caracterizar os fatores que ocasionam a violência obstétrica e a importância da enfermagem no desenvolvimento de medidas preventivas. **MÉTODOS:** Trata-se de uma revisão sistemática da literatura com metassíntese, com utilização do protocolo PRISMA. Realizou-se a pesquisa referida na fonte de busca: Biblioteca Virtual em Saúde (BVS) e nas bases de dados: SCIELO e LILACS, apresentando uma totalidade de 61 documentos. Após estabelecimento e aplicação dos critérios de inclusão: artigos disponíveis gratuitos, publicados entre 2015 a 2020, em língua portuguesa, inglesa e espanhola e exclusão: não apresentassem à temática, repetitivos, dissertações e resumos, resultando em um total de 10 artigos. **RESULTADOS:** O processo do parto é um acontecimento repleto de possíveis equívocos, condutas dolorosas e negligências, que podem gerar a violência obstétrica causando traumas físicos e psicológicos irreversíveis. **CONCLUSÃO:** Por meio desse estudo buscou destacar a importância de minimizar as práticas abusivas, com o uso de estratégias que efetivem programas e políticas voltadas ao binômio mãe-filho.

**Palavras-chaves:** Violência Obstétrica. Assistência de Enfermagem. Saúde da Mulher.

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## INTRODUCTION

The birth experience was considered an important moment in women's lives, allowing the transition to a new social role: being a mother. <sup>1</sup> Until the mid-nineteenth century, births took place at home, being assisted by midwives, who struggled to make this moment comfortable and joyful. <sup>2</sup>

The institutionalization of childbirth in the 20th century led to the use of technologies during care, in situations classified as high risk for mother and child, so there was a reduction in maternal and neonatal mortality rates, however, these practices became me-

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chanized, fragmented and dehumanized, due to the excess of unnecessary interventions, reducing women's autonomy at the time of childbirth.<sup>3-4</sup>

The term obstetric violence has been used since the recognition of this violation of women, being defined as an appropriation of the female body and its reproductive autonomy, during the pre-partum, childbirth and postpartum process, by health professionals, exposing women to dehumanized behaviors, use of painful or embarrassing procedures, as well as unnecessary drugs, replacing the natural process of birth in pathological and using abusive attitudes in relation to the psychological state of women.<sup>5</sup>

A study carried out in Brazil in 2015, with 603 postpartum women revealed very high rates regarding interventions (86.5%) suffered some type of intervention during childbirth.<sup>7</sup> Some common interventions are the Kristeller maneuver (37%), episiotomy (56%) and routine use of oxytocin and amniotomy (40%).<sup>6,7,8</sup> This study has a very relevant context, as it is composed of the high rates of interventions used in labor and birth care, which are well evidenced by the data presented.<sup>6</sup>

The health team's performance in reducing violence in the obstetric field is remarkable, due to its direct action during the clinical phases of the pre-partum, delivery and puerperium, vaginal and cesarean sections, which provide women and their families with comprehensive and humanized care.<sup>7</sup>

It is also noteworthy that the care practice of the nursing team is one of the factors that has been developing humanized care, which justifies this study, since Cardoso<sup>8</sup> emphasizes that nursing is also an important part to welcome and humanize pregnant women in the birth/birth process. Thus, it is understood that obstetric and neonatal care, performed by health services, must have as essential characteristics to quality and humanization.<sup>9</sup>

Given the importance of the nursing team in combating violence in the obstetric field, as well as the importance of the subject discussed, the following question was asked: What factors trigger obstetric violence?

As a result, the objective of the study was to characterize the factors



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that cause obstetric violence and the importance of nursing in the development of preventive measures.

## METHOD

This is a systematic literature review with metasynthesis. This type of research seeks to provide logical and scientific knowledge, through objectives established by the authors and the use of methodology to obtain results with high levels of evidence, through meta-synthesis, used to associate qualitative studies, locating and dividing on themes, areas or topics. The qualitative approach follows the rationale of investigating, evaluating and interpreting data.<sup>10-11</sup>

The search referred to in the search source: Virtual Health Library (VHL) and in the databases: Scientific Electronic Library Online (SciELO) and Latin American and Caribbean Literature in Health Sciences (LILACS) was carried out through the use of the descriptors in health sciences (DeCS): "Obstetric Violence", "Nursing Assistance", in association with the Boolean operator AND.

Among the inclusion criteria, the following studies are cited: fully available free of charge, published between 2015 and 2020, published in Portuguese, English or Spanish. Exclusion criteria were defined in studies that did not present the central theme, that did not answer the guiding question, repetitive, dissertations, theses, documentaries, monographs, projects, simple or expanded abstracts. After researching and applying filters for year and language, the abstracts were read to better select those that met the criteria.

The resolution indicates that research does not need to be registered and evaluated by the CEP/CONEP system. According to Carvalho (2017)<sup>12</sup>, the definition of the nature of the research data is shown as a criterion to define the demandability of the evaluation

of projects in the scope of the human and social sciences. Examples are investigations whose participants are not identified, such as public opinion

surveys, census, which use information in the public domain, which deal with scientific texts or which are based on professional practices.

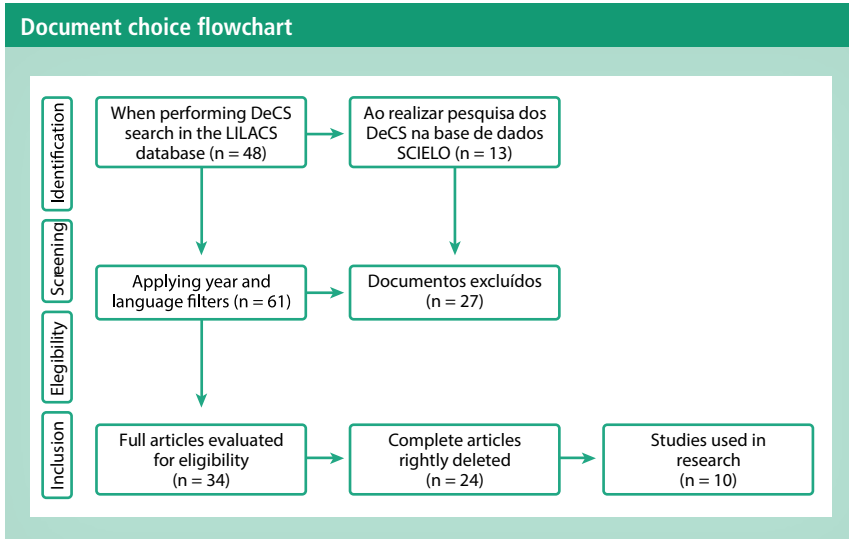
## RESULTS

When searching the VHL, only the LILACS database was filtered, obtaining a total of 48 documents. In the SciELO database, 13 studies, resulting in 61. After applying the established criteria, 33 studies remained, of which only 10 were part of the construction of the study, of which LILACS (09) and SciELO (01).

To demonstrate the entire process of searching and choosing the documents used, a flowchart based on the PRISMA protocol was used, illustrated below.

## DISCUSSION

Obstetric violence is a topic that is gaining more and more visibility and generates relevant discussions about



Source: Own elaboration.

Author and year	Objective	Main findings
Rabelo LR, Oliveira DL, 2019	Describe obstetric violence and nursing care in promoting safe childbirth.	A study made up of pregnant women and their newborns in different territories of the country showed that, of the total research sample of 23.940 women, 56,8% were considered to be cases of usual obstetric risk.
Pérez, Oliveira, Lago, 2018	To analyze the consequences of obstetric violence in the lives of women who have experienced this experience.	An assessment of the impact of childbirth on the development of disorders in women was carried out, and highlighted that among 60% of those who had a history of traumatic childbirth, 20% had depressive symptoms weeks after childbirth.
Torres JA., Santos I, Vargens OMC, 2017	Analyze the organizational and structural conditions of health institutions that can favor or hinder the occurrence of obstetric violence.	This modality of obstetric violence can also be considered institutional, as it occurs in health care institutions
Velho MB, Santos EKA, Brüggeman OM, Camargo BV, 2017	Demonstrate the role of nurses in this process of humanization of care.	The main findings of humanization during childbirth are: women's protagonism and their choices, awareness and training with permanent educational actions in health.
Brasil, Ministério da Saúde, 2017	Emphasize the importance of minimizing even definitively annul abusive and harmful practices, practiced by professionals.	The study showed that the more the pregnant woman has information about the procedures performed, the more her fears and anxieties are minimized.
NarchI NZ, Cruz EF, Gonçalves R, 2015	Demonstrate the role of nurses in this process of humanization of care.	In Brazil, obstetric violence is practiced by physicians and nursing professionals, especially in the form of negligence, verbal violence and physical violence, except for sexual violence.

<p>Altaweli RF, Court C, Baron M. 2015</p>	<p>Identify the experience of primiparous women in the face of possible cases of obstetric violence in vaginal delivery.</p>	<p>A study carried out in São Paulo demonstrated that the devaluation of normal birth is a growing adoption of surgical and interventional techniques.</p>
<p>Carlos GA, Matozinhos FP, Carmo JM, Manzo BF, 2015</p>	<p>Build the Discourse of the Collective Subject of Nurses, post-graduate students in Obstetric Nursing, about obstetric violence.</p>	<p>The existence of strategic methods capable of reversing this situation through evidence-based guidelines and changes in attitudes on the part of specialists are highlighted.</p>
<p>Silva MG, Marcelino MC, Rodrigues LSP, TORO RC, SHIMO, A.K. 2015</p>	<p>Analyzing the perception of parturients about violence and the main forms of obstetric violence suffered by Brazilian women</p>	<p>The results showed that women's lack of knowledge about their rights can contribute to the non-perception of behaviors that constitute violence</p>
<p>Pérez, BAG, Oliveira EV, Iago M S, 2015</p>	<p>Analyze in the literature, the actions of assistance and promotion of women's health practiced by nursing, with an emphasis on the reproductive phase, in the prenatal, childbirth and postpartum periods, and considering the experience of abuse and obstetric violence.</p>	<p>It is up to the multidisciplinary team to put into practice the principles of the PNHPN and treat human beings with all their integrity, rights and specificities.</p>

Source: Own elaboration.

women's rights during the childbirth process. This theme has been addressed since the late 1980s, arising from some discriminatory and inhuman attitudes in childbirth care. <sup>13</sup> Aguiar emphasizes that the terminology obstetric violence is used to describe the various forms of violence that occur in pregnancy, childbirth, postpartum and postpartum care. <sup>14</sup>

Thus, violence is considered a violation of the rights of pregnant women in the parturition process, which includes loss of autonomy and decision about their bodies. In this sense, it means the appropriation of women's reproductive processes by some health professionals, through mechanized, technician and mass childbirth care. <sup>15-16</sup>

Psychological violence is also part of the factors that cause obstetric violence, is considered cruel and one of the most recurrent in the hospital environment, characterized by: deprivation of information to the mother about the procedures performed, making offensive, insulting, discriminatory, humiliating or vexatious, treating the parturient in a rude, aggressive, non-empathic and mocking way, exposing the parturient to situations of fear and abandonment.



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According to the Ministry of Health <sup>17</sup> the process of humanization of birth, which also includes the possibility of a companion for the parturient, necessarily involves a change in human attitudes and in the procedures adopted. Being the health professional of paramount importance, for being an integral part of the team that provides comprehensive care to women, reviewing concepts, to favor a complete, technical and humane care for the client.

Some measures during nursing care are recognized for the non-occurrence of obstetric violence, for example: clarifying with accessible language, procedures and actions that help during parturition and how it can also collaborate to avoid the use of invasive techniques that are not indicated, always evaluating the risk-benefit. Knowing how to listen to the parturient while respecting her moment and respecting her time for decision-making, avoiding embarrassment, enabling the right of free choice of a trusted person for monitoring throughout the prenatal/delivery period, giving autonomy to the woman regarding her sexual rights and to invest in professional development and good evidence-based practices. <sup>18</sup>

In this context, it is possible to affirm that the use of good nursing practices in assisting parturients contributes to the humanization of childbirth, encouraging women to return to their protagonist role, having the same knowledge about their rights and thus reducing interventions performed by some health professionals who are considered obstetric violence.

#### CONCLUSION

The birth process is an event full of possible mistakes, painful behaviors and negligence, which can generate obstetric violence causing irreversible physical and psychological trauma. Through this study, we sought to highlight the importance of minimizing abusive and harmful practices, prac-

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ticed by some professionals with the use of strategies that make programs and policies effective for the mother-child binomial.

It is important to note that the training of professionals who accompany since prenatal care is essential in monitoring the pregnant woman. These actions aim at their physical and mental well-being, preparing them for motherhood, as humanized care is essential throughout the parturition and postpartum process.

Finally, it is necessary to develop campaigns and courses for professional improvement, aimed at combating obstetric violence. It is necessary to act a reform in the care provided, based mainly on humanization, respecting the autonomy of women so that they feel protagonists of this moment. 🐦

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