

The importance of nursing care for women victims of sexual violence in emergency units



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ABSTRACT

INTRODUCTION: Sexual violence against women generates several problems, such as increased suicide rates, drug and alcohol abuse, incidence of health problems such as headaches and gastrointestinal disorders, in addition to all psychological suffering. According to the Brazilian Forum on Public Security, there were 66,020 rapes in the country in 2021. An increase of 4.2% of the cases, with 75.5% of the victims being vulnerable, unable to consent to the sexual act. 61.3% of the victims of sexual violence were under 13 years of age and in 79.6% of the cases the perpetrator was known to the victim. Harassment cases totaled 4,922, an increase of 2.3%, and sexual harassment was 19,209, an increase of 9% over the previous year. **OBJECTIVE:** To verify the importance of nursing care for women victims of sexual violence

in emergency units. **METHOD:** This was an integrative literature review conducted between 2019 and 2023; the search was used in the database: Latin American and Caribbean Health Sciences Literature (LILACS), BDENF nursing (Brazil), Scientific Electronic Library Online (SCIELO). To identify the articles, the following descriptors were used: "sexual abuse", "sexual violence", "nursing" and "women". The inclusion criteria were articles that answered the guiding question of the research: What is the importance of nursing care for women victims of sexual violence in emergency units?; full articles, national articles and articles published in the last 05 years. **RESULTS:** A total of 19,713 articles were searched, and applying the criteria for inclusion, exclusion and duplicate articles, we were left with 18 articles for analysis and interpretation. Nursing care for women who are victims of sexual violence is, In general, it is adequate, with welcoming and humanized attitudes, and can be improved through intersectoral articulations aimed at prevention, treatment and adequate notification of cases. Among the nursing diagnoses, we listed: Fear; Impaired psychosocial integrity, feelings of powerlessness, anxiety, low self-esteem, and overload and stress. **CONCLUSION:** We conclude that sexual violence against women is a universal and strongly present problem in the country, with a very important part still invisible due to the high rates of underreporting. It was also noticed that the care of the nursing team, especially the nurses, is based on the competencies inherent to the training of these professionals.

Keywords: Sexual abuse, Sexual violence, Nursing, Women.

1 INTRODUCTION

Violence has more than one meaning, it is complex and polysemic, it implies several elements and theoretical positions. This happens in many ways. Violence can be natural, because no one is free from violence, it is proper to all human beings, or artificial, when violence is usually an abuse of force



by some against others. The practice of violence expresses attitudes contrary to one's freedom and will, in which the moral and ethical dimension resides. The term violence is the quality or characteristic of violent, an act of cruelty, the occupation of violent means, sudden fury, coercion that leads a person to the subjection of someone¹.

The World Health Organization (WHO) also establishes distinctions on the nature of violence, which can be of origin: 1) physical; 2) sexual; 3) psychological; 4) related to deprivation or abandonment. In the context of violence, violence against women has reached alarming proportions. A study that screened violence using a WHO instrument, in which 991 women participated, the results showed that the prevalence of violence throughout life was: psychological 57.6%; physical 39.3% and sexual 18.0%. In addition, women with up to eight years of schooling, whose mothers suffered intimate partner violence, used drugs and were affected by sexual violence in childhood, had a higher prevalence in all three types of violence².

In its report, the WHO points out that 35.0% of women in the world report having suffered some type of violence in their lives, both physical and sexual. Sexual violence against women is the demonstration of the power of men over women, considered gender violence, being a cruel aggression, which causes damage, and can interfere with issues such as physical well-being, sexual, reproductive, emotional, mental and social issues of women affected by violence. In this context, sexual violence is any sexual act or attempt to perform a sexual act by violence, unwanted sexual comments or advances, actions to commercialize or use a person's sexuality, regardless of the relationship between the victim and the victim, in any field³.

Currently in Brazil there are many cases of sexual violence against women, there are more hidden cases than revealed, for reasons of fear for part of the abuser and the issue of abused women feeling guilty for such an act means that the abuser is not taken to the responsible authorities so that he can answer in court for his acts. With this, the interest and the need for debate is aroused, as well as the elaboration of reflections on the theme. This is mainly the result of the work carried out by researchers in recent decades to denounce and transform into democratic relations the conflicts that have historically existed between men and women^{4,5,6}.

With regard to nursing, the theme is relevant for the collection of discussions and data that can contribute significantly to the understanding and delineation of the current situation, with the aim of promoting actions aimed at changing its reality. Thus, the guiding problem in this study is: What is the role of the nurse in the face of a woman who is a victim of sexual violence? In view of this, this research sought to reflect on the role of nurses in the care provided to sexually assaulted women with a view to establishing a relationship of welcoming and biopsychosocial care^{7,8}.



2 GOAL

- To verify the importance of nursing care for women victims of sexual violence in emergency units.
- Identify nursing care with victims;
- To identify nursing diagnoses and nursing interventions for women who are victims of sexual violence.

3 METHODOLOGY

Scientific research is present in every field of science, in the field of education we find several published or in progress. It is a process of investigation to solve, answer or deepen a question in the study of a phenomenon.^{7,8,9} Scientific research has several modalities, one of them being the literature review that will be the model used in the present study, exposing all the steps that should be followed in its realization.^{10,11} Bibliographic research is mainly inserted in the academic environment and has the purpose of improving and updating the knowledge, through scientific research of works already published ^{12,13,14}.

3.1 TYPE OF RESEARCH

Integrative review has the potential to promote review studies in several areas of knowledge, while maintaining the methodological rigor of systematic reviews. The integrative review method allows the combination of data from the empirical and theoretical literature that can be directed to the definition of concepts, identification of gaps in the areas of study, review of theories and methodological analysis of studies on a given topic¹⁵.

3.1.1 Research steps

This research method has six distinct phases: 1) identification of the theme and selection of the hypothesis or research question for the elaboration of the integrative review; 2) establishment of criteria for inclusion and exclusion of studies/sampling or literature search; 3) definition of the information to be extracted from the selected studies/categorization of the studies; 4) evaluation of the studies included in the integrative review; 5) interpretation of the results and, 6) presentation of the review/synthesis of knowledge¹⁶.

3.1.1.1 Elaboration of the guiding question and descriptors

The problem arouses collective interest in the field of Health, as it is related to the need for increasingly specific interventions for women involved in this problem. Thus, this research aims to



answer the following question: What is the importance of nursing care for women victims of sexual violence in emergency units?

The descriptors were adapted for each database and combined using Boolean operators (OR, AND and NOT).

3.1.1.2 Elaboration of selection and exclusion criteria of articles

The inclusion criteria were evaluated according to the following pre-defined inclusion criteria to determine the relevance of the theme: articles that evaluated the care of women victims of sexual violence by the nursing team, in Portuguese, written in the last 05 years. Commentaries, editorials, doctoral theses, master's dissertations, articles that were not in Portuguese, Spanish and English, articles that were not available in full, and systematic reviews were categorized as exclusion criteria.

3.1.1.3 Selection of databases for the selection of articles

Bibliographic Databases are sets of data that are related to each other. They allow the retrieval of information memorized on the computer, in addition to gathering and organizing journal articles, books, theses, among other documents. They represent ideal resources for getting to know the publications of the scientific community, through bibliographic information of various types of documents from different publishers, in different areas of knowledge, being updated very regularly and were selected for this study, according to the guidance of professors and multidisciplinary professionals 17. The studies available in the literature were identified between the years 2019 and 2023. The search for studies will be carried out in the following databases: SciELO, Lilacs and BDENF.

3.1.1.4 Data collection

In order to extract the data from the selected articles, it is necessary to use a previously prepared instrument capable of ensuring that all the relevant data is extracted, minimizing the risk of transcription errors, ensuring accuracy in the verification of information and serving as a record. The data should include: definition of the research subjects, objectives, methodology, results and conclusion.

3.1.1.5 Critical analysis of the included studies

Analogous to the data collection stage of a conventional survey. The objective of this step is to organize and summarize the information in a concise manner, forming a database that is easy to access and manage. Generally, the information should cover the study sample (subjects), the objectives, the methodology used, the results and the main conclusions of each study.



4 FINDINGS

A total of 1,124 articles were found with the descriptors Sexual Violence AND Women; applying the inclusion and exclusion criteria, we had 127 articles for analysis. On the other hand, with the descriptors, Woman and Nursing, 18,589 scientific articles were found and 251 articles were used after refinement; with the descriptors Sexual Violence and Women, 5,407 articles were obtained; initially applying the criteria, 450 articles were selected for first reading. After a detailed refinement and considering the guiding question of the research and reading of the abstracts, 115 that did not correspond to the theme studied were excluded and 43 were duplicated. Thus, this integrative review found 18 scientific articles.

For the organization and extraction of the data, as well as the analysis of the articles, an instrument was created containing data on the year of publication, name of the authors and title of the article, type of research, objective, results and conclusion of the study. In a second, more in-depth reading of the article, it was possible to verify the level of evidence and to carry out the analysis and synthesis of the studies seeking answers to the study question, in order to obtain a broad approach to the theme. The analysis was carried out by evaluating the content of the articles, in which care, competencies, nursing diagnosis and nursing interventions in the face of legal abortion were sought.

Table 1. Articles selected for analysis with the descriptors Sexual Violence and Nursing 2023.

	Article Link/ Title/ Authors	Goal	Method	Conclusion
18	https://pesquisa.bvsalud.org/bvsms/resource/en/mdl-36548127 . <i>Nursing care provided at medical institutions to female victims immediately after a sexual Assault Incident: The qualitative descriptive study.</i> Fukumoto, T.	Clarify the format of the assistance to women who are victims of sexual violence when they present themselves in one institution immediately after the assault	Semi-structured one-on-one interviews with 20 nurses and midwives	The study identified the forms of nursing care: providing security, social support, clinical examinations, building trusting relationships, support in promoting emotional/physical health, dignity and ensuring continuity of support.
19	https://pesquisa.bvsalud.org/bvsms/resource/pt/mdl-35970605 . <i>Pathway To healing and recovery: alleviation of survivor worries in sexual assault nurse examiner-led sexual assault telehealth examinations.</i> Miyamoto et al.	Understand the feelings and evaluations of women who have experienced sexual assault and whether these concerns were Experienced or resolved during a sexual assault examination conducted by a sexual assault nurse examiner Telehealth-enabled	74 adolescents and adults who have received Service of sexual assault in 8 hospitals were heard	Most participants felt believed (83%) and did not feel judged (88%) or guilty (85%) during the exam. The participants rated the quality of the care received very well (92%) and 84% stated that the examination helped them to feel better, suggesting that the examination conducted by a nurse examiner is an important step in the victim's recovery
20	https://pesquisa.bvsalud.org/bvsms/resource/en/biblio-1384640 . <i>Nursing care for women in situations of violence sexual:</i>	You'll meet Nurses' social representations of nursing care provided to women in situations of sexual violence	Qualitative, exploratory-descriptive study by means of from semi-	The nurses' social representations of the nursing care provided to women in situations of sexual violence are anchored in the execution of protocols in a humanized way, objectified in the notion of welcoming



	Representations Socials Nurses. Saints <i>et al.</i>		structured interview with 20 nurses	
21	https://pesquisa.bvsalud.org/bvsms/resource/en/mdl-35384937 . <i>Innovative Assessments for Retention of Sexual Assault Nurse Examiners</i> . Hite, Amy, <i>et al.</i>	Provide education to assist in training and certification of registered nurses in advanced practices to perform examinations Sexual Assault Forensics	Academic-Practice Partnership-Community to provide longitudinal immersive clinical training	Post-training evaluations determine nurses' satisfaction, compassion, burnout, and secondary traumatic stress. This last factor had negative effects on forensic nursing and the ability to intervene to solve cases
22	https://pesquisa.bvsalud.org/bvsms/resource/en/biblio-1349860 . Technology to support nursing care for women in a situation of sexual violence. Alves <i>et al.</i>	Develop an application to support the nursing assistance to women in situations of sexual violence	Evaluation of diagnoses, Interventions from Nursing & Mobile App Development	The application facilitated the nurses' understanding of the care provided to victims of sexual violence, mitigating the professional's feeling of powerlessness and supporting their clinical thinking for the execution of the nursing process based on scientific evidence
23	https://pesquisa.bvsalud.org/bvsms/resource/pt/mdl-33892950 . Sexual Assault Nurse Examiner/Forensic Nurse Hospital-based Staffing Solution: A Business Plan Development and Evaluation. Green <i>et al.</i>	To investigate the turnover, <i>burnout</i> and quality of care for victims of sexual violence by the nursing team	Implementation and follow-up of a business plan based on floating shifts	Building a staffing solution and business plan that supports these specialty nurses reduces burnout related to secondary or vicarious trauma, fosters sustainable staffing, increases the quality of care, and reduces the legal and regulatory risks associated with this unique patient population
24	https://pesquisa.bvsalud.org/bvsms/resource/pt/mdl-34780481 . Assessing the care of doctors, nurses, and nursing technicians for people in situations of sexual violence in Brazil. Leal <i>et al.</i>	To evaluate the quality of care for people in situations of sexual violence in health care services. health Identifying Positive and Negative Indicators	Cross-sectional study with a cross-sectional approach Quantitative and Convenience sampling (134 professionals)	The results indicated positive factors: adequate infrastructure; rooms for patient care; gynecological bed; visual and auditory privacy; Robust team trained to provide health services to people in situations of sexual violence. Negative factors: reduced number of rooms with bathrooms; absence of protocols to identify and assist people in situations of sexual violence; absence of leaflets, posters and other materials on sexual violence; absence of a flowchart for referral to specialized services; non-use of specific protocols, non-referral of these patients to the specialized care network. Most professionals consider the health unit where they work to be incapable to assist people in situations of sexual violence

Source: Authors, 2023.

Table 2. Articles selected for analysis with the descriptors Sexual Violence and Women 2023.

	Article Link/ Title/ Authors	Goal	Method	Conclusion
25	https://journals.lww.com/forensicnursing/Abstract/2022/12000/Using_Telehealth_Technology_to_Serve_Patients	Assess the feasibility of implementing forensic examination (telehealth) in cases of sexual	Pilot Project Accomplished hair department of Nursing through from	The findings of an evaluation of the temporary telecare model provided insight into the key decisions that must be made in the development and implementation of the program's actions. The program proved to be viable and important in supporting and targeting women who are



	ts. 4.aspx. Using telehealth technology to serve patients reporting sexual assault: an evaluation of key TeleSANE Program features. Shaw <i>et al.</i>	violence	Virtual Meetings	victims of sexual violence.
26	https://enfermfoco.org/articulo/women-in-situation-of-sexual-violence-validation-of-a-flowchart/ . Women in situations of sexual violence: validation of a flowchart. Trentin <i>et al.</i>	Validate a Flowchart for Assistance to Women in Situations of Sexual Violence.	Methodological study of Validation of content through the Delphi technique through form and data collection	The validation of the flowchart enables comprehensiveness in care through the articulation of intersectoral services and, in turn, structuring the service network.
27	https://journals.lww.com/ajnonline/Fulltext/2023/04000/Sexual_Assault_Care_and_Telehealth.7.aspx?context=LatestArticles . Sexual assault care and telehealth. Wendie	Analyze the impact of the closure Of Activities of Nursing in the reception, evaluation and intervention with the Women Victims of Sexual Violence	Report letters collected between the Team from Nursing after the end of activities	The impact of the interruption of activities involving the nursing team will nullify the humanized process of evaluation and orientation to women victims of sexual violence. The lack of preparation and lack of technical knowledge of the responsible professionals is evident, impacting the experience suffered by the victim of sexual violence
28	https://www.revistaenfermagematual.com.br/index.php/revista/article/view/1522 . Women in situations of violence: reflections on the performance of nursing. Melo <i>et al.</i>	Discuss, based on reflective analysis, the role of Professionals from Nursing assistance to women in situations of sexual violence	Essay reflective theory that is the result of research/discussion during the construction of a monographic work	It was evidenced that nurses usually occupy a prominent role in the care of violence against women, as they are one of the first professionals that women have contact with in health services. Nursing, in this scenario, carries out actions of welcoming, qualified listening, tracking and prevention of damage caused by aggression, as well as seeking the reintegration of these women into the society, ensuring biopsychosocial balance
29	https://journals.lww.com/forensicnursing/Abstract/2023/03000/Factors_Affecting_Telemedicine_Implementation_in.6.aspx . Factors Affecting Telemedicine Implementation In fashion Emergency Departments and Nurses' Perceptions of Virtual Sexual Assault Nurse Examiner Consultation for Sexual Assault Survivors. Allison <i>et al.</i>	To evaluate the perceptions of emergency room nurses about the influences on the use of telemedicine, as well as the usefulness and feasibility of teleservice, identifying possible influences on the implementation of the program in the emergency rooms	Research Implementation Questionnaire, involving semi-structured qualitative interviews with 15 nurses	The interviews revealed enablers and barriers to the current use of telecare at all levels of the Implementation Survey. Facilitators included state-level grant funding and technical assistance. Barriers included the clinician's discomfort with being on video and access to ongoing training. Participants believed that the consultation would improve patient care and forensic evidence collection, but had concerns about patient privacy and acceptability.

Source: Authors, 2023.



Table 3. Articles selected for analysis with the descriptors Women and Nursing 2023.

	Article Link/ Title/ Authors	Goal	Method	Conclusion
30	http://seer.unirio.br/cuidado_fundamental/article/view/7191/pdf . The perception of sexual violence's victims about the embracement in a reference hospital in Paraná. Batistetti, Lima & Souza (2020)	To identify the perception of victims of sexual violence in relation to the reception provided by the nursing team in the emergency room	This is a descriptive qualitative study with women victims of sexual violence treated in an outpatient clinic	Nursing lacks social recognition, but its care was recognized as positive by women and generated feelings of protection and acceptance
31	https://www.scielo.br/j/ean/a/ZfXCJr4LrktndVsM3SjMcP/abstract/?lang=en . Vocational training and sexual assault against women: Challenges for graduation in nursing. Aguiar et al. (2019)	To understand the meanings of sexual violence against women from the point of view of students, professors and university administrators of undergraduate nursing courses; and to understand how the contents on this theme are addressed in undergraduate courses in Nursing in Educational Institutions Superior	This is a qualitative study, whose data collection took place from March to November 2018, through interviews with ten students, ten professors and seven managers of two private institutions	The possibilities of incorporating the theme in teaching-learning scenarios and practices converge to the approach of the content on the different types of violence in undergraduate disciplines, with educational actions with the population enhancing the deconstruction of the culture of female subordination. In addition, the study is in line with the opportune moment in which the reorientation of curricular guidelines for health courses is being discussed
32	https://periodicos.ufmg.br/index.php/rem/article/view/44082 . Nursing performance in the conservation of women's health in situations of violence. Albuquerque Netto et al. (2018)	To analyze, from the perspective of Levine's Nursing Theory, the nurses' care for women who have suffered violence	Qualitative and descriptive research carried out in the Family Health Strategy with 11 Nurses who provided care to women in situations of sexual violence, based on interviews using a script of questions Semi-structured	Care needs to enable energy conservation, through comprehensive care for women, and not just focused on violence. They emphasized issues such as reception and access to the health unit, rescuing the woman's bonds with members of the social network.
33	https://www.scielo.br/j/cenf/a/J7KCwxYwvP68zZvb6xHGZHK/a/abstract/?lang=en . Nursing care for women in situations of sexual violence: social representations of nurses. Santos et al. (2022)	To know the social representations of nurses about the nursing care provided to women in situations of sexual violence	Study This qualitative, exploratory-descriptive study was carried out in a referral center of a University Hospital in southern Brazil. Data collection was carried out through semi-structured interviews with 20 nurses	Conclusions reveal, in the experience of the care provided, representations such as: conducts developed by nurses; difficulties encountered in the development of assistance activities for women in situations of sexual violence; and suggestions to improve care for these women. Conclusion: the social representations of nurses about the nursing care provided to women in situations of sexual violence are anchored in the execution of protocols in a humanized way, objectified in the notion of reception
34	https://www.scielo.br/j/ape/a/Hz4qs8HSf44MLKsMbHtWf/ . Technology to support nursing care mujeresensituación of sexual violence. Alves et al. (2021)	Develop an application to support the nursing process in the care of women in situations of sexual violence	Applied research of technological production divided into three stages: elaboration of theoretical material through literature review; Evaluation of the Diagnostics and Interventions by	The application is an unprecedented technology applicable to this clientele that can contribute to the work of nurses, directing care to women in situations of sexual violence through the nursing process



			nursing; and development from in the mobile app	
35	https://www.scielo.br/j/ean/a/ZfXCJr4LrktndvsM3SjMcP/abstract/?lang=en . Vocational training and sexual assault against women: Challenges for graduation in nursing. Aguiar et al. (2019)	To understand the meanings of sexual violence against women from the point of view of students, professors and university administrators of undergraduate nursing courses; and to understand how the contents on this theme are addressed in undergraduate courses in Nursing in Educational Institutions Superior	This is a qualitative study, whose data collection took place from March to November 2018, through interviews with ten students, ten professors and seven managers of two private institutions	The possibilities of incorporating the theme in teaching-learning scenarios and practices converge to the approach of the content on the different types of violence in undergraduate disciplines, with educational actions with the population enhancing the deconstruction of the culture of female subordination. In addition, the study is in line with the opportune moment in which the reorientation of curricular guidelines for health courses is being discussed

Source: Authors, 2023.

5 DATA ANALYSIS AND INTERPRETATION

5.1 NURSING CARE COMPETENCIES FOR WOMEN VICTIMS OF SEXUAL VIOLENCE IN EMERGENCY UNITS

Regarding the format of care for women victims of sexual violence, the study by Fukumoto (2023)¹⁸ brings reflections on the presentation in an institution immediately after the aggression. Comprehensive support for victims of sexual violence is essential. However, the specific type of support needed to restore the physical and mental health and dignity of victims of sexual violence and the role of nurse practitioners in providing comprehensive support remain unclear, according to the author. In the same vein as assistance formats, Trentin et al. (2022)²⁶ proposed to validate a flowchart for the care of women victims of sexual violence using the Deplhi method. The validated flowchart provides elements for the professional in the work context in order to improve the management of cases, potential minimization of the revictimization of women in situations of sexual violence, as well as being a tool in the health work process. Possibility of impact on the daily life of the services involved in the care of women in situations of sexual violence, as well as for the promotion of intersectoral articulation, in the region under study. It should be noted that the flowchart item on the means of communication between services is still a point to be discussed the best way to implement it.

Regarding women's perception of the nursing services offered to them after an episode of sexual violence, Miyamoto et al. (2022)¹⁹; Leal et al. (2021)²⁴ and Batistetti, Lima & Souza (2020)³⁰ highlight important points of the evaluations, which include: Women who felt believed, did not feel judged by the nursing team or blamed during the exams. They also stated that the examination helped them to feel better, suggesting that the examination conducted by a nurse examiner is an important



step in their recovery. Positive factors such as adequate infrastructure; rooms for patient care; gynecological bed; visual and auditory privacy; A robust team trained to provide health services to people in situations of sexual violence were also appointed.

The continuous processes of Continuing Education and technical recycling was the approach of the study by Hite et al. (2022)²¹ highlighting the training and certification of registered nurses in advanced practices to perform sexual assault forensic examinations. The study established a rural academic-practice-community partnership, which provided better physical and mental health care for survivors and better evidence collection and higher prosecution rates in a rural area in need of medical care for women victims of sexual violence in that region. The study by Allison et al. (2023)²⁹ sought to bring the nurses' perception about this theme and, although some professionals were concerned about the adaptations, most had a positive perception after the end of the updating program.

Technological platforms play a key role these days and so it has been in health care services as well. Taking into account the advancement of virtual networks and ease in the implementation of digital platforms, our review highlights the study by Alves et al. (2021)²² who developed an application to support the nursing process in the care of women in situations of sexual violence, assisting in nursing diagnoses and intervention. The application facilitated the nurse's understanding, mitigating the professional's feeling of powerlessness and supporting their clinical thinking for the execution of the nursing process based on scientific evidence, corroborating the study by Alves et al. (2021)³⁴ which has developed a similar application. The feasibility of a telehealth care program was the focus of the study by Shaw et al. (2022)²⁵. The program, in addition to being viable, proved to be promising, since it guided the main decisions that must be made in the development and implementation of the program's actions.

The study also selected a series of studies that gave an account of the reflections, perceptions and challenges pointed out by the nurses themselves. The study by Green et al. (2021)²³ points out the problems involved in the turnover of professionals, especially those involved in burnouts, and the impacts of this situation on care. The outcomes of this follow-up suggest that building a staffing solution and a business plan that supports these specialized nurses reduces trauma-related burnout secondary or vicarious, fostering sustainable staffing, thereby increasing the quality of care and reducing the legal and regulatory risks associated with this unique patient population.

Women victims of sexual violence find themselves, in the initial moments of care services, in a situation of extreme vulnerability, and this process was the target of a study by Albuquerque Netto et al. (2018)^{LIFE 32}. The authors used Livine's Theory to discuss the healthiest interventions in this situation of extreme vulnerability in which patients find themselves. The outcomes indicate that nurses' care needs to enable energy conservation, through comprehensive care for women, and not only focused on violence. Issues such as reception and access to the health unit, rescuing this woman's



bonds with members of the social network are also important points brought up from interviews with the professionals involved in this welcoming process.

Finally, the last two trials of this review highlight the study by Santos et al. (2022)³³ that sought to highlight the social representations of nurses' actions about nursing care provided to women in situations of sexual violence. The importance of adopting protocols is highlighted, with "welcoming" occupying a prominent position. This term, when connected to the others, which are also relevant to the process of representational elaboration, reveals in which aspects and ideas they are anchored: maintaining the woman's privacy and agility of care, supported by the multidisciplinary team, favoring the quality of care. Finally, the study by Melo et al. (2022)²⁸ sought to discuss, based on reflective analysis, the role of nursing professionals in the care of women in situations of sexual violence. It was evidenced that nurses usually occupy a prominent role in the care of violence against women, as they are one of the first professionals that women have contact with in health services. Nursing, in this scenario, carries out actions of welcoming, qualified listening, tracking and prevention of damage caused by aggression, as well as seeking the reintegration of these women into society, ensuring biopsychosocio-spiritual balance.

The nurse together with his team must create a bond with the patient, with this the nurse contributes to the help of overcoming, fear, embarrassment, anguish and helps to discover other forms of explicit violence (women hospitalized because of aggression) or even implicit (women who went to do only routine exams and, because they trusted the professional, report on violence that occurred in their own home). In order for the service to be effective, the professional must listen, because some women need and want to talk about the violence in a private, confidential and non-judgmental way on the part of the professional. It is understood that the nurse should talk to the victim in such a way that everything she refers is confidential, achieving ethics and thus giving the victim the confidence and security necessary to perform the indispensable procedures, making the care humanized. With creativity, the nurse, in addition to training and guiding his team, reserves more time to talk to the victims, and will clarify the doubts presented by the patients^{19,30,33}.

It is also the responsibility of this professional to provide immediate, calm and private care, to schedule and/or develop lectures, training courses, workshops with the participation of victims. Group activities are important for women to realize that this type of problem does not only occur to them, but also to other people and this will facilitate care, in addition to helping them overcome their traumas and also avoid suicides. During care, nurses identify the most frequent consequences: headaches, gastrointestinal disorders, nausea, sleep disorders, mood disorders, depression, anxiety, and sexually transmitted diseases. Thus, the nurse will not only observe the complaints presented by the victims, but will also value the symptoms observed and concealed by the patient, and will also be able to show



through dissemination that there are forms of prevention and care for women who have been assaulted by any type of violence^{26,28,32}.

5.2 THE EPIDEMIOLOGICAL ASPECTS OF SEXUAL VIOLENCE AGAINST WOMEN

One in three Brazilian women over the age of 16 has suffered physical and sexual violence caused by an intimate partner in their lifetime. There are more than 21.5 million women who are victims of physical or sexual violence by intimate partners or ex-partners, representing 33.4% of the country's female population. If we consider cases of psychological violence, 43% of Brazilian women have already been victims of an intimate partner. Black, low-educated women with children and divorced women are the main victims, the survey revealed. The perpetrator of the violence is known to the victim in most cases (73.7%). This shows that the least safe place for women is their own home – 53.8% reported that the most serious episode of aggression in the last 12 months occurred at home³⁶.

This number is higher than that recorded in the 2021 edition of the survey (48.8%), which covered the height of social isolation during the covid-19 pandemic. Other places where there was an episode of violence were the street (17.6%), the workplace (4.7%) and bars or nightclubs (3.7%). Regarding the reaction to violence, the majority (45%) of women said they did nothing. In previous surveys, in 2017 and 2019, that number was 52%. The number of victims who went to a Women's Police Station increased compared to 2021, from 11.8% to 14% in 2022. Other forms of reporting were: calling the Military Police (4.8%), making an electronic record (1.7%) or contacting the Women's Service Center through Dial 180 (1.6%)³⁶.

The survey showed that 46.7% of Brazilian women suffered sexual harassment in 2022, an increase of almost 9 percentage points compared to 2021, when the prevalence of harassment was 37.9%. With the survey, it can be estimated that 30 million women reported having suffered some type of harassment; 26.3 million women have heard disrespectful catcalls and comments on the street (41.0%) or in the workplace (18.6% - 11.9 million), have been physically harassed on public transport (12.8%) or approached aggressively at a party (11.2%)³⁶.

5.3 THE MAIN NURSING DIAGNOSES, INTERVENTIONS AND OUTCOMES FOR VICTIMS OF SEXUAL VIOLENCE

Diagnosics Nursing	Interventions	Expected Outcomes
Fear	Counselling	Self-control
Sleep pattern Harmed	Anxiety reduction	Sleep regulation
Social Isolation	Emotional support	Social Engagement
Increased risk of suicide	Forwarding outpatient	Self-restraint and integrity staff
Low self-esteem Situational	Orientation	Personal well-being
Overload	Exchange of information	Emotional balance



stress	About self-care	
Psychosocial integrity Impaired	Evaluation of Psychosocial domains	Personal resilience
Sentiment impotence	Emotional support	Best answer from Coping
Family lawsuits Dysfunctional	Promoting Integrity familiar	Functional Family Rescue
Anxiety	Guided coping	Self-control

6 FINAL THOUGHTS

The present study found that sexual violence against women is a universal and strongly present problem in the country, with a very important part still invisible due to the high rates of underreporting. One of the main causes of the problem is the deepening of inequalities in gender relations and causes physical and psychological damage to the victims, with repercussions for society.

It was also noticed that the care of the nursing team, especially the nurses, is based on the competencies inherent to the training of these professionals. As weaknesses in the care process, the lack of permanent training in the services on the problem, the absence of care protocols and the lack of institutional support both for the mental health of professionals and the adequacy of physical spaces for problem-solving care were identified.

Therefore, it can be concluded, based on this study, that nursing care for women who are victims of sexual violence is, in general, adequate, with welcoming and humanized attitudes, and can be improved through intersectoral articulations aimed at prevention, treatment and adequate notification of cases. The care process requires the nurse to use fundamental instruments for the victim's recovery and involves observation, emotional care, therapeutic look, common sense, leadership, humanitarian character, solidarity, sensitivity, technique, educational relationship and the biopscho-socio-spiritual dimensions.



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